PREA Facility Audit Report: Final

Name of Facility: Gaston Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: 04/09/2021 **Date Final Report Submitted:** 07/12/2021

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.		V
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.		V
Auditor Full Name as Signed: Trish Bernhards Date of Signature: 07/12/2021		

AUDITOR INFORMATION	
Auditor name:	Brockman-Bernhards, Trish
Email:	trish.brockman@nebraska.gov
Start Date of On-Site Audit:	02/22/2021
End Date of On-Site Audit:	02/23/2021

FACILITY INFORMATION		
Facility name:	Gaston Correctional Center	
Facility physical address:	520 Justice Ct, Dallas, North Carolina - 28034	
Facility Phone		
Facility mailing address:		

Primary Contact	
Name:	Benjamin Burton
Email Address:	benjamin.burton@ncdps.gov
Telephone Number:	704-922-3861

Warden/Jail Administrator/Sheriff/Director		
Name:	Daren Bruce	
Email Address:	daren.bruce@ncdps.gov	
Telephone Number:	704-922-3861	

Facility PREA Compliance Manager		
Name:	Benjamin Burton	
Email Address:	benjamin.burton@ncdps.gov	
Telephone Number:	O: (704) 215-1068	

Facility Health Service Administrator On-site		
Name:	Justin Heinsius	
Email Address:	justin.heinsius@ncdps.gov	
Telephone Number:	704-922-3861	

Facility Characteristics		
Designed facility capacity:	242	
Current population of facility:	220	
Average daily population for the past 12 months:	221	
Has the facility been over capacity at any point in the past 12 months?	Yes	
Which population(s) does the facility hold?	Males	
Age range of population:	20-99	
Facility security levels/inmate custody levels:	Minimum	
Does the facility hold youthful inmates?	No	
Number of staff currently employed at the facility who may have contact with inmates:	47	
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	0	
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	111	

AGENCY INFORMATION	
Name of agency:	North Carolina Department of Public Safety
Governing authority or parent agency (if applicable):	
Physical Address:	512 North Salisbury Street, Raleigh, North Carolina - 27604
Mailing Address:	
Telephone number:	919-733-2126

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

Agency-Wide PREA Coordin	ator Information		
Name:	Charlotte Jordan-Williams	Email Address:	charlotte.williams@ncdps.gov

AUDIT FINDINGS

Narrative:

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

The North Carolina Department of Public Safety contracted with DX Consultants, LLC, 914 Gasparilla Dr. St. Petersburg, FL 33702 for PREA Auditing Services of the Gaston Correctional Center. The purpose of the audit was to determine the Gaston Correctional Center's level of compliance with the standards of the Prison Rape Elimination Act of 2003. The PREA audit of the Gaston Correctional Center (Gaston CC) was conducted on February 22-23, 2021 by Trish Brockman-Bernhards, US DOJ Certified PREA Auditor. The facility is a North Carolina Department of Public Safety-Prisons facility located at 520 Justice Court, Dallas, North Carolina 28034. This was the facility's third PREA audit. The most recent PREA audit was on January 8-9, 2018.

Pre-Onsite Audit Phase

The audit process began on January 7, 2021, when an informational email was sent to the Regional PREA Program Coordinator. The email contained information regarding who the assigned auditor was, the date the pre-audit notices were to be posted, when the Pre-Audit Questionnaire was due and the actual date of the onsite audit. The email also addressed the posting of the attached bilingual PREA Audit Notices containing the address offenders could write to and confidentially contact the auditor prior to the auditor's arrival at the facility. The auditor received no correspondences from any offenders prior to the onsite portion of the audit. While onsite, there were no special requests from the offender population to speak with the auditor either.

Facility staff were instructed in the informational email as to what areas of the facility the audit notices should be posted to and to take photos of the notices when posted, dated if possible and identify the location of where the notices were posted. The auditor received correspondence in the form of email and photos that the notices were posted on January 11, 2021. The bilingual audit notices were verified during the onsite tour in various locations throughout the facility including the gatehouse, main administrative building, Programming area, medical area, various offices in the Satellite trailer, kitchen/dining hall, recreation area, Canteen office, Clothes House, Canteen, Barbershop, Laundry, Library, and housing units A, B, C, D, E, F, G and the holding area currently being used as quarantine and isolation for Covid-19 positive offenders.

The auditor received notification that the PAQ was completed and submitted to the Online Audit System (OAS) on January 25, 2021. Once received, the pre-audit review of the documentation commenced. The auditor completed a documentation review using the Pre-Audit Questionnaire. The Gaston CC PREA Compliance Manager uploaded information, that included policies, procedures, training records, internet research, and supporting documentation for all forty-five (45) standards. The documentation uploaded to the OAS for each standard contained the supporting documentation in-regards to the Pre-Audit Questionnaire; however, the information did not sufficiently address each standard and additional information had to be requested. Additional supporting documentation was provided to the auditor during the on-site and after the facility's on-site visit. The supporting documentation was uploaded to the OAS under the supplemental files.

A conference call was conducted on February 18, 2021, with the Associate Warden/PREA Compliance Manager (PCM) to review the schedule for the on-site visit, discuss the auditor's results of the Pre-Audit Questionnaire and supporting documentation provided on the OAS and review information to be sent to the auditor prior to the on-site visit to the facility. The information requested was to include the following:

- Interview Preparation Sheet
 - · Hours of each security shift
 - Employees assigned to the facility (name, title, working hours/shift)
 - Physical location of records
 - Employee training
 - Employee human resources records
 - Criminal background checks (employee & contractor)
 - Volunteer and contractor PREA training
 - Offender medical
 - Offender mental health
 - Offender grievances
 - Offender PREA Intake screenings/reassessments
 - Offender PREA Education (intake/comprehensive within 30 days)
 - Sexual abuse, sexual harassment and retaliation investigations-administrative (staff-on-offender and offender-on-offender)
 - Sexual abuse, sexual harassment and retaliation investigations-criminal (staff-on-offender and offender-on-offender

- Specialized staff
- · List of staff with shift/days off needed to appropriately conduct PREA interviews
 - Security and non-security staff who have acted as first responders
 - Medical staff
 - Mental health staff
 - Staff who performs screening for risk of victimization and abusiveness
 - Staff who supervise offenders in segregated housing
 - Intermediate/higher-level facility staff
 - Intake staff
 - Non-medical staff involved in cross-gender strip or visual searches
 - Volunteers who have contact with offenders
 - Contractors who have contact with offenders
 - Administrative investigators
 - Criminal investigators
- Offender roster with age/housing unit assignments and list(s) of identified categories of the following inmates:
 - Physically disabled, cognitively disabled, blind, deaf or hard of hearing, and limited English proficient offenders
 - Transgender and Intersex offenders, Gay and Bisexual offenders
 - Offenders in segregated housing (for risk of sexual victimization)
 - Offenders who reported sexual abuse
 - Offenders who disclosed sexual victimization during risk screening
- PREA Investigations Request (from prior 12-months)
 - Staff-on-offender allegations of sexual abuse and sexual harassment
 - · Offender-on-offender allegations of sexual abuse and sexual harassment
 - Overview of administrative and criminal cases and dispositions
 - Pending cases
 - Closed cases
 - Substantiated cases
 - Unsubstantiated cases
 - Unfounded cases
 - Criminal cases referred to prosecutor
 - Prosecutor refused cases
 - Indictment
 - Conviction
 - Acquittal
- Total Number of Hotline calls
- Offender Grievances-Allegations of sexual abuse and sexual harassment

The Associate Warden/PCM sent the documentation (staff roster, staff schedule for random and specialized staff etc.) to the auditor prior to arrival at the facility. Also, additional supporting documents were provided during the on-site visit to address the deficiencies.

Research>

During the pre-onsite audit phase, the auditor conducted internet searches on the facility and agency and reviewed the North Carolina Department of Public Safety's website (www.ncdps.gov). The website includes the NCDPS zero-tolerance policy, investigative information, previous PREA audit reports, PREA reporting information, brochures, posters, handouts and annual reports. The prior PREA report was also reviewed. The general public can access the PREA policy on the website.

The Phoenix Counseling Center has a current Memorandum of Understanding with the Gaston CC for emotional support services for offender victims of sexual abuse. The MOU was reviewed and the auditor was able to make telephone contact with a victim advocate from the Phoenix Counseling Center. Details of the telephone interview are provided in the applicable sections of this report. Just Detention International and RAINN (the Rape, Abuse & Incest National Network) were contacted to determine if the agency had reported any complaints from the facility in the past twelve (12) months. Both organizations reported they did not have any contact from offenders of Gaston CC.

Contact was also made with a Sexual Assault Nurse Examiner (SANE) with the CaroMont Regional Medical Center by telephone. The auditor and the SANE discussed the forensic services offered to offender victims of sexual abuse. During the call, the SANE was able to explain that community level of care is offered to all patients, even offender victims of sexual abuse. Details of the telephone interview are provided in the applicable section of this report.

Onsite Review

Gaston Correctional Center (Gaston CC) is located in Gaston County North Carolina. The address is 520 Justice Court, Dallas, North Carolina 28034. Gaston was one of 51 county prisons the state assumed responsibility for in 1931 and was renovated in the 1930's to house offenders who worked for the Department of Transportation constructing highways. Some of the original buildings are still in use

today and are part of the sixteen (16) buildings the facility uses today. The facility's design capacity is 242 with an average daily population of 221. The offender count on the first day of the audit was 198.

The on-site audit was conducted on February 22-23, 2021. The auditor arrived at the Gaston Correctional Center the morning of February 22, 2021. An entrance briefing was conducted with the Warden, Associate Warden and Regional Security Coordinator. During the entrance briefing, the audit process was explained and a tentative schedule for two (2) days to include facility tour, conducting interviews with the staff and offenders and reviewing the documentation. A brief discussion was held regarding current facility operations due to Covid-19 impacting the offender population. The discussion involved how interviews could be conducted safely and proper sanitizing between interviews could be maintained.

A complete guided tour of the entire facility was conducted by the Associate Warden/PCM with the Warden and the Regional Security Coordinator accompanying. The tour included visiting the gatehouse, main administrative building, Programming area, medical area, various offices in the satellite trailer, kitchen/dining hall, recreation area, Canteen office, Clothes House, Canteen, Barbershop, Laundry, Library, and housing units A, B, C, D, E, F, G and the holding area currently being used as quarantine and isolation for Covid-19 positive offenders. The tour ended after approximately 2.5 hours.

During the tour, the auditor was allowed unimpeded access to any area of the facility. While touring, the auditor was seeking to find blind spots, listening for opposite gender announcements, observing staff and offender interactions as well as searches conducted by staff and locating camera and security mirror placements. Offenders were observed to be under constant supervision of the staff while involved in various activities. The auditor also reviewed the facility schematics. The facility currently has one (1) camera that is watched by staff assigned to the Sgts. Office. There is no recording capability with this camera.

Informal and formal conversations with employees and offenders were conducted. Notifications of the PREA audit was posted in all locations throughout the facility as well as postings informing offenders of the telephone numbers to call and report sexual abuse and sexual harassment and to call the victim advocate for emotional support services. The auditor reviewed the "Daily Narrative" forms containing PREA related documentation (unannounced rounds, PREA related discussions held at shift briefings & cross gender announcements).

During the tour, it was observed that shower and bathroom areas throughout the facility (A, B, C, D, E & F Dorms) did not provide adequate privacy to use the bathroom, change clothing and shower without staff of the opposite gender observing the offender naked. Inmates had constructed makeshift shower curtains and toilet/urinal privacy barriers throughout the facility. The only housing unit that had privacy barriers for showers and toilet/urinal areas was in G-Dorm. Within two weeks, the facility provided the auditor photos of shower curtains that were installed in all showers and barriers that were constructed that allowed privacy for offenders to use the toilet/urinals.

Staff Interviews

The PREA Auditor handbook requires auditors to interview at least twelve (12) random sample of staff. The auditor conducted fourteen (14) random sample of staff interviews. The auditor interviewed a variety of staff from a diverse cross-section of work assignments, supervisors and line staff, males and females and staff of various races. There were two security shifts. The hours for each shift were 0600-1800 hours and 1800-0600 hours. Hours for Administrative staff were 0800-1630 hours. The facility reported forty-seven (47) staff were employed at the facility. Private interviews with staff were conducted in the Chapel area while practicing social distancing. There were eleven (11) specialized employee interviews conducted. Specialized staff were selected based upon their subject matter expertise in the various areas. The facility does not house youthful offenders, therefore, interviews for line staff who supervise youthful offenders and education and program staff who work with youthful offenders were not conducted. Additionally, there were no non-medical staff involved in cross gender strip searches. The facility personnel were found to be cooperative and professional. Staff morale appeared to be very good and the observed staff/offender relationships were determined to be professional.

The PAQ indicated there were zero (0) individual contractors and one hundred eleven (111) facility volunteers who may have contact with offenders. Due to restrictions in place at the facility because of the coronavirus, outside volunteers not employed by the facility have not been allowed to enter the facility. Interviews with volunteers were conducted over the telephone. They were selected from various areas and programs they volunteer in. Zero (0) contractors and three (3) volunteers were interviewed. Overall, the interviews revealed the staff is knowledgeable of the PREA standards and were able to articulate their responsibilities and duty to report.

There is evidence of Gaston CC's Warden obtaining a Memorandum of Understanding with Phoenix Counseling Center on 07/15/20 to provide free confidential crisis intervention and emotional support services related to sexual abuse offenders. Any offender seeking services can call the telephone number at no additional cost to the offender. The auditor contacted a representative from the Phoenix Counseling Center and she explained the services the Phoenix Counseling Center offers. She reported there were no calls made to the Phoenix Counseling Center in the past twelve (12) months from Gaston CC. CaroMont Regional Medical Center provides the emergency services and the forensic medical examinations at no financial cost to the victim. In an interview with the SAFE/SANE nurse, no Gaston CC offenders had been provided forensic exams at the CaroMont Regional Medical Center in the past twelve (12) months.

Additionally, interviews were conducted at a previous time by certified auditor Dorothy Xanos with the NCDPS Secretary's representative (PREA Director), NCDPS Contract Administrator and one (1) of the NCDPS PREA Program analysts prior to the on-site visit. A summary of these interviews was provided to the auditor and were adequate.

All staff interviews were conducted with the guidance of the national PREA Resource Center, PREA Compliance Audit Instruments-Interview Guide. The Interview Preparation Sheet and employee rosters received when arriving onsite assisted the auditor with the selection process for the random and targeted staff. A detailed list and quantity of staff interviewed are noted below.

Staff Categories	Number of Interviews Conducted
Random sample of staff	14
Agency Head or designee	1
Warden	1
PREA Coordinator	1
PREA Compliance Manager	1
Specialized Staff	
Agency contract administrator	1
Intermediate- or higher- level facility staff	2
Medical staff	1
Mental health staff	1
Non-medical staff involved in Cross- gender strip or visual searches	0
Administrative (human resources) staff	1
SANE Nurse CaroMont Regional Medical Clinic	1
Volunteers	3
Contractor staff	0
Investigative staff	1
Staff who perform screening for risk of victimization and abusiveness	1
Staff who supervise offenders in segregation unit	0
Staff of the sexual incident review team	3
Designated staff member charged with monitoring retaliation	2
First responders (security)	2
First responders (non-security)	0
Intake staff	2
Staff trained as Advocates (same individuals who monitor retaliation)	1
Advocacy center staff- Phoenix Counseling Center representative	1
Total random staff interviewed	14
Total agency and unit PREA staff	4
Total specialized interviewed	24

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	Total staff Interviewed	42	

Offender Interviews

During the two (2) day on-site visit, there were one hundred and ninety-eight (198) male offenders in the facility. The Associate Warden/PCM provided the auditor with an offender list to select offenders from for the required interviews to be conducted. The auditor first selected offenders for the specialized interviews that are required and selected random offenders from those left on the list. The PREA Auditor Handbook requires auditors to interview specialized categories of offenders. The auditor selected and interviewed three (3) offenders who reported sexual abuse, one (1) offender that identified as gay, one (1) offender with a physical disability, two (2) offenders that were blind, two (2) offenders that were hard of hearing, two (2) offenders with a cognitive disability and two (2) offenders who were Limited English Proficient. Due to the make up of the offender population some categories are not present within the offender population during the onsite portion of the audit and thus are not interviewed. There were zero (0) offenders who met multiple identified categories from the required list of targeted offender interviews.

These categories of offenders were not present within the population, thus were not interviewed:

- · Youthful Offenders
- Offenders in Restrictive Housing for High Risk of Sexual Victimization
- Transgender or Intersex Offenders
- Offenders who Reported Sexual Victimization During Risk Screening

The PREA Auditor Handbook also requires auditors to interview a sample at least ten (10) random offenders. The auditor conducted seventeen (17) random sample of offender interviews. The random offenders were selected from all seven (7) housing units. Units A,B,C, and D are located in one building. Units E and F are located in another building while Unit G is located in yet another building. The interviewed offenders were of various ages, nationalities and ethnic backgrounds.

All offender interviews indicated they were well informed of their right to be free from sexual abuse and sexual harassment and how to report sexual abuse and sexual harassment using several ways of communication such as trusted staff, administrative staff, knowledge on external reporting telephone number (Offender Reporting Sexual Abuse/Forgiven Ministry) and Phoenix Counseling Center for crisis intervention and victim advocate services. There were some inconsistencies reported regarding the PREA Opposite Gender Announcements being made in the Living Units. Some offenders reported that the announcements are made differently by each shift (some made each time a female staff entered a dorm and some made only at the beginning of a shift). Sometimes the announcements were heard and sometimes they were not heard. This was shared with the Warden and PCM. Overall, the offenders interviewed demonstrated an understanding of the PREA compliance program, the purpose of the intake screening process, the prevention and protection process and reporting mechanisms Gaston CC had in place. Offenders interviewed further stated that staff members were responsive to their needs and reported that they felt safe at this facility.

All offender interviews were conducted with the guidance of the National PREA Resource Center, PREA Compliance Audit Instruments-Interview Guide. The Interview Preparation Sheet and offender rosters received when arriving onsite assisted the auditor with the selection process for the random and targeted offenders. Private interviews were conducted in the Chapel area where social distancing was maintained. A detailed list and quantity of offenders interviewed are noted below.

Offender Categories	Number of Interviews Conducted
Random sample of offenders	17
Targeted offenders	
Youthful offenders	0
Offenders with a physical disability	1
Offenders who are blind, deaf or hard of hearing	3
Offenders who are limited English proficient	2
Offenders with a cognitive disability	2
Offenders who identify as lesbian, gay or bisexual	1
Offenders who identify as transgender or intersex	0
Offenders in segregated housing for high risk of sexual victimization	0
Offenders who reported sexual abuse	2
Offenders who reported prior sexual victimization during risk screening	0
Total random offenders interviewed	17
Total targeted offenders interviewed	11
Total offenders interviewed	28

File Review

Based upon the information provided on the PREA Audit Request for Information form completed by the Gaston CC staff, the auditor was able to determine the facility had zero (0) administrative sexual abuse allegations and three (3) sexual harassment allegations for the period of 1/01/2019 to 1/31/2021. Of the zero (0) sexual abuse allegations, zero (0) was allegations against offenders and zero (0) were allegations against staff. Of the three (3) sexual harassment allegations, two (2) were allegations against staff and one (1) allegation was against an offender. Zero (0) of the zero (0) sexual abuse allegations were found to be unsubstantiated and zero (0) were found to be unfounded. Of the three (3) sexual harassment allegations, two (2) were unable to be investigated due to victims not willing to participate in investigation, zero (0) was found to be unfounded and one (1) was found to be unsubstantiated. No criminal charges were filed in any of the cases.

The auditor was able to review and receive copies of the three (3) administrative sexual abuse and/or sexual harassment allegations the facility had. Zero (0) administrative sexual abuse and three (3) sexual harassment allegations were reviewed. They were selected based upon the outcome and the auditor's need to review all of the required steps and processes to verify compliance with numerous PREA Standards. The auditor was also provided paper copies of the allegation and investigations.

Employee personnel files were maintained in the Human Resources Office. The criminal background records check documentation was maintained in the employee personnel files. The auditor reviewed documentation from five (5) employee personnel files. When selecting the files, the auditor considered reviewing employee files of newer employees who were recently hired as well as staff who had been employed with the facility and staff that were recently promoted to positions at the facility. Training files were reviewed on the same staff.

The auditor reviewed documentation from five (5) offender files. Some documentation in the files included offender education participation acknowledgement forms but there was no indication of completion of a comprehensive education taking place within 30 days of arrival. The PCM and case management staff indicated that offenders are provided educational information the day they arrive by custody staff and comprehensive education/Orientation does not occur. The PCM advised this would be corrected. Initial intake screening information and

PREA allegation and investigation information was observed on the agency OPUS computer data collection system.

The auditor reviewed documentation from 2 medical files and 2 mental health files. These files are electronically maintained. The files reviewed were based on sexual victimization and sexual predatory potential. There were no medical or mental health files to review that were based upon sexual abuse investigations.

Type of File and the Number of Files Reviewed

· Administrative/criminal investigative files: 3

Grievance files: 2 Employee personnel: 5 Employee training: 5

• Offender intake screening files: 5

Medical files:2Mental health files: 2

• Total number of files reviewed: 24

At the end of the onsite portion of the audit, an exit debriefing on February 23, 2021 a summary of the findings was conducted with the Warden. The PREA Compliance Manager was unable to be present as he had fallen ill. At the exit debriefing, the auditor gave an overview of the audit and commented on the on-site observations, interviews, and summarized the strengths and weaknesses after completing the Pre-Audit and On-Site Audit phases. There was a discussion to send the auditor additional documentation for numerous standards and the information would be sent to the auditor within the next week. Discussion regarding the privacy barriers was held and it was reported that the Maintenance staff had already begun construction and photos would be emailed once all areas were complete. The auditor shared that she would make contact with the PCM the following week with needed items. The auditor thanked the Warden and his staff for their hard work and dedication to the PREA process.

AUDIT FINDINGS

Facility Characteristics:

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

Gaston Correctional Center (Gaston CC) is located in Dallas, North Carolina in Gaston County. The address is 520 Justice Court, Dallas, NC 28034. The facility originally opened in 1930 as a county prison and later housed state offenders who worked for the Department of Transportation. Many of the buildings from that era are still utilized today as part of the 16 buildings located on the property. The facility is currently a Work Release facility as well as a reentry facility for male offenders ages 18 and older. The age range of the offender population during the onsite portion of the audit was 19- 67 years old. The facility does not house youthful offenders. The design capacity is 242. The offender count on the first day of the audit was 198. The facility staffing consists of security and non-security employees. Non-security staff include administrative staff, case management and programming staff, maintenance, medical and food service staff. The PAQ indicated there were 47 staff assigned to the facility. The daily operations are managed by Sergeants who oversee correctional officers. There are two security shifts at the facility. The shift times are 0600-1800 hours and 1800-0600 hours.

The facility has a total of seven (7) housing units. Housing Units A, B, C, D, E, and F are general population units while Housing Unit G that houses Work Release offenders. There are five (5) holding cells that prior to Covid 19 were not being utilized. These cells are now being utilized as quarantine cells for Covid 19 positive offenders or transfers into the facility who are required to quarantine before going into general population. Each housing unit is a single level open dormitory style unit. Offenders sleep in bunk beds in each area. Offenders have access to televisions, telephones, chairs and microwaves. The auditor observed PREA materials posted on the housing units, telephone numbers posted near the telephones and PREA posters throughout all areas of the facility. Housing Units A-D each have large shower and bathroom areas. Modifications made during and immediately after the onsite audit provide additional privacy that allows offenders the ability to shower, use the restrooms and changed clothing without staff of the opposite gender being able to view them. Modifications were also made to the shower and restroom areas in Housing Units E & F. All housing units now offer offenders the ability to shower, use the restroom and change clothing without staff of the opposite gender being able to view them. Housing Unit G had appropriate barriers in place allowing privacy for the offenders. Additional buildings on facility grounds include the Chapel, kitchen/dining facilities, gatehouse, programs building, canteen, library, laundry, medical, clothes house, music room, outside visitation area and an Administrative office area. One mirror is utilized in the laundry building and provides staff the ability to see an area behind some clothing shelves. The facility does not have a video monitoring system but does have one (1) camera that is not recorded.

Under normal operations, Gaston CC provides educational services through Gaston Community College to offer Adult Basic Education and GED classes. The Human Resource Development Program teaches offenders skills such as resume writing and job interview skills. The facility also offers programs such as Character Education, Alcoholics Anonymous, Narcotics Anonymous, DART Aftercare, Think Smart, Bible Study, religious services and community leave. Offenders are offered work opportunities with the Department of Transportation and community work crews, municipality crews, work release and facility job assignments such as kitchen, maintenance and janitorial work throughout the facility.

Medical care is offered by one onsite nurse during normal business hours. A physician from a local medical unit is at the facility on a weekly basis. Forensic medical exams are completed at the CaroMont Regional Medical Center. Mental Health staff are not located on site but available as needed. The facility has a staff member trained as a PREA Support Person who is available to offer advocacy support for offender victims of sexual abuse. The PREA Investigator works during first shift and would be called in to investigate any situations of sexual abuse. The State Bureau of Investigation would conduct criminal investigations involving offenders. Criminal investigations may also be conducted by the Gaston County Police Department. Administrative cases involving staff would be conducted by the Office of Special Investigations out of Raleigh.

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	0
Number of standards met:	45
Number of standards not met:	0

The Auditor found the North Carolina Department of Public Safety has developed appropriate policies and procedures that aid in prevention, detection and response to sexual abuse and sexual harassment. The Auditor found the facility's staff are well trained and retained information provided through the agency's training efforts. The Auditor formally interviewed staff and determined staff understood their responsibilities in the agency's policies and procedures regarding the prevention, detection and response towards acts of sexual abuse and sexual harassment. Staff understand their roles as first responders to incidents of sexual abuse and sexual harassment. The Auditor determined the facility has been successful in developing a zero-tolerance culture towards all forms of sexual abuse and sexual harassment. The Auditor discovered the facility's leadership support its staff in the prevention, detection and response efforts. Facility leadership makes unannounced rounds throughout all facility areas to deter sexual abuse and sexual harassment.

The facility's population was educated regarding the agency's prevention, detection and response efforts towards sexual abuse and sexual harassment. Most offenders interviewed informed the Auditor they were confident in staff's abilities and felt staff would maintain confidentiality with sexual abuse related information. The Auditor observed staff interactions with the offender population while on site. All interactions were professional and appeared as if staff have developed appropriate working relationships with the population. The overall population interviewed by the Auditor felt safe in the facility. Each offender informed the Auditor that facility staff are professional and take incidents and threats of sexual abuse or sexual harassment seriously. Formal interviews with staff revealed they are knowledgeable in the policies and procedures to prevent, detect and respond to incidents of sexual abuse and sexual harassment.

The agency ensured its investigator was trained to conduct sexual abuse and sexual harassment investigations in confinement settings. Investigators understand how to conduct appropriate investigations following an allegation of sexual abuse and sexual harassment. The facility's investigator understands the requirement to refer criminal acts of sexual abuse to the local law enforcement agency for criminal investigation. Policy requires investigations be objective and are conducted promptly and thoroughly. Investigators are required to inform offenders of investigative determinations at the conclusion of each investigation. The current and only investigator assigned to Gaston CC was retiring three days after the conclusion of this audit so it will be essential for another staff person to be selected and trained as a facility PREA Investigator. In the meantime, a trained investigator from a nearby facility will be utilized. The facility would conduct an incident review of all allegations within 30 days of the conclusion of the investigation, unless the allegation was unfounded by the facility's investigator.

The Auditor determined the facility meets all standards. The facility made corrective actions to comply with several elements of the PREA standards. Those corrections were made during the audit process. Details of the corrective actions are included in the applicable sections of this report. The agency has appropriate policies, procedures and practices for the prevention planning, response planning, training and education, screening for risk of victimization and abusiveness, reporting, response following a report, investigations, discipline, medical and mental care, and data collection and review of sexual abuse and sexual harassment.

The Gaston Correctional Center has successfully created a zero-tolerance culture at this facility.

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

22 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- NC General Statute 14-27.7 (Intercourse and sexual offenses with certain victims; consent no defense)
- NCDPS-Prisons Policy F.1600 (Management of Security Posts, dated 8/12/2019)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0100 (PREA Coordinated Response Plan Mission and Organization, dated 3/10/20)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020)
- Gaston CC PREA Compliance Manager Warden Designation Memorandum (dated 1/08/2019)
- NCDPS-Prisons Organization Chart (dated 12/4/2020)
- Gaston CC Organization Chart (dated 03/09/2021)
- NCDPS website
- Gaston CC PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- PREA Director (Coordinator)
- Gaston CC PREA Compliance Manager

Findings:p>

This auditor reviewed the North Carolina DPS-Prisons policy that addresses the department's support of the Prison Rape Elimination Act. The Gaston Correctional Center, as well as all other North Carolina DPS-Prison facilities, utilize agency Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) mandating zero tolerance towards all forms of sexual abuse and sexual harassment that applies to staff, contractors and volunteers. Policy F. 3400 also included definitions, provided training requirements of staff and described conduct of investigations involving PREA allegations. Policy F .3400, as well as Gaston Correctional Center Standard Operating Procedure Chapter G .0100 (PREA Coordinated Response Plan Mission and Organization, dated 03/10/2020) clearly outlines the agency and facility's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019), NCDPS-Prisons Policy F.1600 (Management of Security Posts, dated 8/12/2019) and NC General Statute 14-27.7 (Intercourse and sexual offenses with certain victims; consent no defense) describe that fraternization or sexual misconduct between staff, contractors, volunteers and offenders. Each described the prohibited behaviors and sanctions if such behavior was discovered.

NCDPS's commitment of ensuring zero tolerance for sexual misconduct in all its institutions was observed during the onsite visit. This commitment was clearly observed by the posters, flyers and reporting systems in place for staff and offenders. Staff receive information regarding PREA during their initial academy as well as on-going training of staff during their annual inservice training.

The NCDPS-Prisons, agency-wide PREA Director (Coordinator) reports directly to the Professional Standards, Policy & Planning Chief Deputy Secretary, who in turn reports directly to the NCDPS-Prisons Secretary. This position works with sixty-nine (69) NCDPS facilities throughout the state implementing and guiding the agency's efforts toward PREA compliance. A written summary of an interview conducted by certified PREA Auditor Dorothy Xanos earlier in the audit cycle was reviewed. The summary review allowed this auditor to verify that the PREA Director (Coordinator) has enough time to ensure PREA standards are met and that all related concerns are addressed.

Each NCDPS facility has its own PREA Compliance Manager (PCM) that reports to the Warden. The Warden at the Gaston Correctional Center has appointed the current PCM and back-up PCM January 8, 2019. The PREA Compliance Manager at the Gaston Correctional Center addresses all PREA concerns that occur throughout the facility. He reported that he has sufficient time and authority to coordinate efforts to comply with PREA standards.

There is a definite commitment to the sexual safety and security of the staff and offenders at the facility. Based on interviews, documentation provided and observation of operations at the Gaston Correctional Center, this auditor believes the facility "meets" this standard.

Corrective Action:
• None

Auditor Overall Determination: Meets Standard Auditor Discussion The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Inmate Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Memorandum of Agreement with Center for Community Transitions

- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- PREA Director (Coordinator)
- · Agency Contract Administrator

Findings:

This standard is Not Applicable to the Gaston Correctional Center specifically as Gaston CC does not contract for the housing of its' offenders. However, the NCDPS-Prisons does maintain one contract with the Center for Community Transitions for female offenders in need of treatment for access to substance abuse programming. The initial contract was effective July 2017. A review of the MOU contained the contractor's obligation to adopt and comply with the DOJ PREA Standards as well as ensuring that a PREA Audit is conducted by a certified DOJ PREA auditor. The agreement also required the Center for Community Transitions provide a copy of the final PREA report. Although this auditor did not personally interview the Contract Administrator, she accepts the information provided from a recent interview with DOJ certified PREA auditor, Dorothy Xanos. The interview detailed the agency's contract, policy and support of the PREA standards with full compliance. The interview with the PREA Director (Coordinator) confirmed the NCDPS-Prisons has entered into the MOU with the Center for Community Transitions as well as confirming that the contract is monitored by NCDPS-Prisons to ensure the Center for Community Transitions complies with the PREA standards.

Based on interviews, documentation provided and observation of operations at the Gaston Correctional Center, this auditor believes the facility "meets" this standard.

Corrective Action:

115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- North Carolina General Statute 143B-709 Security Staffing
- NCDPS-Prisons Policy F.1600 (Management of Security Posts, dated 8/12/2019)
- Gaston CC Standard Operating Procedure B .0100 (Security Post Assignments and Rotation, dated 05/06/20)
- Gaston CC Post Chart dated 05/04/2020
- Gaston CC Staff Plan Analysis PREA Review, dated 4/21/2020
- Gaston CC Daily Shift Narratives covering multiple shifts
- Gaston CC Dorm Narrative Logs
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- · Gaston CC Warden
- PREA Director (Coordinator)
- · Intermediate or Higher-Level Staff
- Gaston CC PREA Compliance Manager

Findings:

Review of the North Carolina State Statute 143B-709, NCDPS-Prisons Policy F .1600 (Management of Security Posts, dated 8/12/2019), and Gaston CC Standard Operating Procedure B .0100 (Security Post Assignment and Rotation, dated 5/6/20) all contained information requiring each facility to develop a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect offenders against sexual abuse.

While state statute requires a staffing analysis every 3 years, the agency policy requires an annual review of the staffing plan, including a review of all required components of the standard, which was completed in April 2020. Interviews with the Warden and other Intermediate-Higher Level Staff all stated that decisions are made with safety and security as the primary focus when reviewing the staffing plan. Based on the custody level of the offenders and open bay dormitory style housing at the facility, there are very few cameras placed throughout the facility.

Facility Post Charts are developed in accordance with the staffing plan that is reviewed annually. The Post Charts indicate all positions for each shift. Staffing levels are adequate and still ensure high levels of safety and security.

Deviations from the staffing plan are documented on the Daily Shift Narrative Report by the Officer in Charge if necessary. The facility reported no deviations from the staffing plan in the last 12 months. Unannounced rounds are clearly documented on the Daily Shift Narrative Report and Log Sheets of each housing unit/areas. These are conducted daily by the Officer in Charge (Sergeant) and documentation includes the date/time and location of the physical rounds. Interviews with higher level facility staff confirmed unannounced rounds throughout all areas of the facility each week. This auditor's review of logs confirmed unannounced rounds were being made by higher level supervisory staff on all shifts.

After thorough review of policies, SOPs, other supporting documents, interviews conducted, and observations this auditor determines the agency and the facility has met the requirements of this standard based on the above information.

Corrective Action:

115.14 Youthful inmates Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Inmate Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Gaston Correctional Center Standard Operating Procedure Ch G .0200 (Sexual Assault and Harassment, dated 3/10/2020) · Gaston CC Facility Inmate Rosters • Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) PREA Standards Compliance Checklist Interviews: · Gaston CC Warden • Gaston CC PREA Compliance Manager · Intake staff Findings: The review of NDCPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment Policy, dated 8/12/19) and Gaston Correctional Center Standard Operating Procedure Ch. G. 0200 (Sexual Abuse and Harassment, dated 3/10/2020) clearly requires that a youthful offender should not be placed in a housing unit in which the youthful offender will have sight, sound, or physical contact with any adult offender through the use of a shared dayroom or other common space, shower area, or sleeping quarters. Agency policy also requires that the facility maintain sight and sound separation between youthful

offenders and adult offenders or provide direct staff supervision when youthful offenders and adult offenders have sight, sound, or physical contact.

While youthful offenders are not assigned to the Gaston CC, the agency does provide specialized housing for youthful offenders at other NCDPS-Prisons facilities. While assigned at these other facilities, best efforts are made to avoid placing youthful offenders in isolation. Specialized housing arrangements for youthful offenders are provided throughout the agency to meet the requirements of this standard.

The Gaston Correctional Center does not house youthful offenders. Offenders housed at Gaston CC are 18 years old or older. Interviews with the Warden, Intake staff and the PREA Compliance Manager confirmed there are no youthful offenders housed at Gaston CC. Facility offender rosters also confirmed there are no offenders under the age of 18 assigned to Gaston CC. The youngest offender assigned and interviewed was 19 years old.

After thorough review of policies, SOPs, other supporting documents, interviews conducted, and observations this auditor determines the agency and the facility has met the requirements of this standard based on the above information.

Corrective Action:

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

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020)
- NCDPS-Prisons Policy F .0100 (Operational Searches, dated 8/12/2019)
- NCDPS-Prisons Policy F .1600 (Management of Security Posts, dated 8/12/2019)
- Gaston CC Standard Operating Procedure Chapter B .1500, (Operational Searches, dated 11/24/2020)
- Gaston CC Standard Operating Procedure Chapter B .0100, (Security Post Assignment and Rotation, dated 5/06/2020)
- Gaston CC Standard Operating Procedure Chapter G .0300, (Guidance on Transgender Offenders, dated 5/08/2019)
- NCDPS Safe Search Practices Training Curriculum, dated 07/01/2019
- Training Records for Gaston CC staff for Safe Search Practices Training
- Cross Gender Announcement & Acknowledgement form (OPA T.30.pdf)
- · Cross Gender Announcement Poster
- Gaston CC staff 2019-2020 Cross Gender Announcement and Acknowledgement forms
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- Gaston CC PREA Compliance Manager
- · Random sample of Staff
- Random sample of Offenders

Findings:

Review of the NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) and Gaston Correctional Center Standard Operating Procedure Ch. G.0200 (Sexual Abuse and Harassment, dated 3/10/2020) prohibits any cross-gender strip search or visual body cavity searches by staff of the opposite gender. NCDPS-Prisons Policy F.0100 (Operational Searches, dated 8/12/2019) details the requirements of searches in facilities. NCDPS-Prisons Policy F.1600 (Management of Security Posts, dated 8/12/2019) prohibits any cross-gender strip search or visual body cavity searches by staff of the opposite gender. Gaston CC Standard Operating Procedure Chapter B.1500, (Operational Searches, dated 11/24/2020) clearly defines complete searches (strip searches) and routine searches (pat or frisk searches). Either gender staff may perform routine searches (pat or frisk) on the male offender population. Offenders are not allowed to be supervised by staff of the opposite gender while showering or in the toilet area unless appropriate privacy screening is provided to obscure the view of breasts, genitalia and buttocks. Policy also requires offenders to cover themselves appropriately when not in the shower or not utilizing toilets and while in route to and from those areas.

Offender interviews varied on whether or not they felt there was adequate ability to shower, perform bodily functions and change their clothing without non-medical staff of the opposite gender viewing them. During the tour, the auditor observed that offenders in A,B,C,D,E and F Dorms did not have the ability to shower, perform bodily functions and change their clothing without non-medical staff of the opposite gender viewing them. These issues were quickly remedied with the placement of shower curtains and partial door coverings allowing for privacy but also allowed for security to be maintained. Offenders assigned in G-dorm confirmed that they have the ability to shower, perform bodily functions and change their clothing without non-medical staff of the opposite gender viewing them as they have showers with shower curtains, three toilets with barriers/doors and 2 urinals with barriers that prevent staff of the opposite gender from viewing them. This was confirmed during the auditor's tour of the facility. The design of the shower and restroom facilities in G-dorm allowed for privacy. Shower curtains and barriers/doors allowed for privacy but also allowed for security to be maintained.

The offender rulebook also requires offenders to be clothed while going to and from the shower and restroom areas. Facility procedures also prevent female staff from conducting strip searches, unless exigent circumstances require, at which point, the cross-gender strip search should be documented. The PREA Compliance Manager indicated the facility has had no cross-gender searches (pat, strip or visual body cavity) conducted over the past twelve (12) months. There were also no exigent circumstances of cross gender searches (pat, strip or visual body cavity) conducted over the past twelve (12) months.

In 2013, the NCDPS-Prisons PREA Administrator sent an email as part of its "Campaign of Awareness" regarding the development of a cross-gender bulletin board document and announcement that is to be shared with staff as well as a bulletin board poster. A Cross Gender Announcement and Acknowledgement Form (OPA-T30) was attached to the email, with directions that all staff were to sign and the original signed document was to be placed in the employee's personnel file. This form is still used today.

Review of the training curriculum, Safe Search Practices Training, indicated compliance with policy and the standard. The PCM provided curriculum that indicated pat searches, cross-gender pat searches, searches of transgender and intersex offenders are conducted in a respectful, professional manner and prohibits cross-gender strip searches as well as cross-gender visual body cavity searches of any offender. Curriculum also explains that a transgender or intersex offender should not be searched or physically examined for the sole purpose of determining the offender's genital status. Training records provided indicated that 100% of all security staff received training on conducting cross-gender searches and searches of transgender and intersex offenders in a professional and respectful manner consistent with security needs by attending the Safe Search Practices Training. PREA Acknowledgement Forms and Cross Gender Announcement & Acknowledgement forms are signed by all staff completing the PREA: Sexual Abuse and Sexual Harassment 101 & 201 courses and the PREA-Sexual Abuse and Sexual Harassment Medical & Mental Health Response training courses.

Staff interviews revealed that staff fully understand the circumstances that require staff of the opposite gender to announce their presence. Opposite gender announcements at the beginning of shift by female staff were observed by the auditor. The announcements at the beginning of shift are noted in the Shift Narrative Log by the OIC.

Staff were all able to articulate the search procedures and situations that would be considered exigent circumstances as well as the required authorizations and the required documentation to be completed. Staff were also aware that the Gaston CC SOP, Ch B .1500, (Operational Searches, dated 11/24/2020) did not allow complete searches of transgender or intersex offenders to solely determine the genital status of the offender. Staff shared that they would conduct pat searches of a transgender or intersex offender in a private area if the individual offender requested.

After reviewing agency policy and facility SOP, training curriculum, training records, visually observing the shower and bathroom areas of the facility, observation of staff, interviewing staff and offenders, this auditor finds this standard in compliance.

115.16 Inmates with disabilities and inmates who are limited English proficient Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020)
- NCDPS-Prisons Policy E .1800 (Non-English Speaking Offender Program dated 2/05/18)
- NCDPS-Prisons Policy E .2600 (Reasonable Accommodations for Offender with Disabilities dated 9/05/13)
- Health Services Policy & Procedure Manual, Policy # TX VII-1(Developmental Disabilities, effective 8/2007)
- Health Services Policy & Procedure Manual, Policy # TX VII-2 (Physical, Mental or Cognitive Disabilities, effective 8/2009)
- Statewide Term Contract 961C-Translation & Interpretation Services (Omnia Partners)
- Interpretation & Translation Services Access Contact Sheet
- NCDPS-Prisons Offender PREA Education Acknowledgement Form (Spanish and English versions)
- NCDPS-Prisons PREA Support Services form (English and Spanish)
- Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- Intake Staff
- Gaston CC PREA Compliance Manager
- · Random sample of Staff
- Inmates identified with Disabilities or who are LEP

Findings:

Review of the NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Gaston Correctional Center Standard Operating Procedure Ch. G. 0200 (Sexual Abuse and Harassment, dated 3/10/2020), NCDPS-Prisons Policy E .1800 (Non-English Speaking Offender Program dated 2/05/18) and NCDPS-Prisons Policy E .2600 (Reasonable Accommodations for Offender with Disabilities dated 9/05/13) provided information and guidance to ensure that offenders with disabilities, such as those 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 and benefit from all of the protections of PREA. Health Services Policy & Procedure Manual, Policy # TX VII-1 (Developmental Disabilities, effective 8/2007) and Health Services Policy & Procedure Manual, Policy # TX VII-2 (Physical, Mental or Cognitive Disabilities, effective 8/2009) explains how specialized case management services are available for offenders that are identified as developmentally disabled, physically disabled or mentally disabled. The specialized case management includes assisting in orientation to the unit policies and procedures, representation at disciplinary proceedings and additional evaluations, if necessary. Offenders with Limited English Proficiency are afforded the same opportunities. Offenders who are observed to have difficulty understanding or speaking English are screened by use of an approved screening instrument. For new admissions, the screening will occur in the diagnostic center. For offenders who have completed diagnostic processing, the screening will be conducted at the facility by program or educational staff. Upon arrival at the diagnostic center, all offenders receive a handbook that contains the agency's zero tolerance policy toward sexual abuse and sexual harassment, and how to report incidents or suspicions of sexual abuse and sexual harassment. The Offender Handbook is available in Spanish and English. Offenders sign a form indicating they have received this initial information. This form also allows staff to document if the offender needs any extra assistance for comprehending the information. When an offender transfers to another facility, they will not be provided a new Offender Handbook. Policy prohibits the facility from relying on offender interpreters, offender readers or other forms of offender assistants except when a delay in interpreter services could compromise an offender's safety, the performance of first responder duties or the investigation of the allegations.

A current contract is in place offering language translation, interpretation and American Sign Language services that staff can utilize when services are necessary for an offender with disabilities or for those who are limited English proficient. The Language Resource Center provides on-site interpreting, telephonic interpreting, video remote interpreting as well as document translation. This auditor observed that PREA informational posters are visible throughout the facility in both English and Spanish.

Initial PREA Education is provided by intake staff in a manner that ensures the offender comprehends the material presented and it is read to the offender during the intake process. Policy requires that within three calendar days of arriving at the Gaston Correctional Center, a PREA brochure provided to the offender population included information on suspicious behavior, reporting, prevention strategies, making false claims, definitions of forms of sexual misconduct and retaliation. As with other material, it is available in an English and Spanish version.

During the on-site visit, one (1) physically disabled (ADA standard) offender, three (3) offenders who were blind or hard of hearing, two (2) limited English proficient offenders and two (2) offenders with cognitive disabilities were identified, interviewed and reported that they remembered being asked questions regarding PREA when they came into the facility. Those offenders reported they understood information that staff presented and know reporting processes. Case management services are provided for any offender with any identified special needs. The PREA Compliance Manager reported there were no offender interpreters, assistance or readers that assisted another offender with reporting allegations of sexual abuse or sexual harassment.

Random staff interviews indicated staff, mostly supervisory staff and FTO's, were aware of the Language Resource Center interpretation services. A few newer staff were not aware but said they would contact a supervisor. All staff were aware they were not allowed to utilize offender interpreters, offender readers or other types of offender assistants except in limited circumstances.

After reviewing agency policy, offender PREA Education presentation, interviewing staff and offenders, this auditor finds this standard in compliance.

Corrective Action:

115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Administrative Memorandum from NCDPS HR Director, dated 8/30/2013 & Administrative Memorandum Addendum from the NCDPS PREA Director, dated 10/13/2013
- · HR 004 NCDPS Criminal History Record Check Form
- HR 005 NCDPS Applicant Verification Form, dated December 2020
- HR 008 NCDPS Professional Reference Check Form, dated December 2020
- HR 013 NCDPS Employment Statements, dated December 2020
- Gaston Correctional Center Background Check Log, revision date of 1/20/2021
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

• Administrative Specialist I (responsible for Human Resources duties onsite)

Findings:

Review of the NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and the Administrative Memorandum from the DPS HR Director dated 8/30/2013 with an Addendum from the DPS PREA Director dated 10/13/2013, prohibits the NCDPS-Prisons from hiring or promoting anyone who may have contact with offenders, and shall not enlist the services of any contractor who may have contact with offenders, who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; 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 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. Information on substantiated allegations of sexual abuse or sexual harassment involving a former NCDPS employee shall be furnished to any institutional employer the former employee has applied to work if the request was in writing. Gaston Correctional Center performs criminal background records checks on any potential new employee and contractor as well as individuals seeking promotion. Background records checks are also conducted on all current employees and contractors every five (5) years. Material omissions or providing false information is grounds for termination. Staff are obligated to disclose any arrests or previous misconduct within 24-hours of the event.

Documentation received and reviewed prior to the onsite audit currently being utilized by NCDPS-Prisons require consideration of any incidents of sexual harassment when hiring or promoting employees or enlisting the services of any contractor. The Administrative Memorandum from the DPS HR Director dated 8/30/2013 requires the agency to consider any incidents of sexual harassment in determining to hire or promote anyone, or to enlist the services of any contractor.

NCDPS policy is required to perform criminal background records checks and consistent with any federal state or local laws, make best efforts to contact all prior institutional employers for any information on substantiated allegations of sexual abuse or any resignation during a pending allegation of sexual abuse. In the past twelve (12) months, the facility reported that thirteen (13) individuals were hired who may have contact with offenders. In addition to employee applicants, zero (0) criminal background checks were completed on contracted staff over the past twelve (12) months as there are no contract staff employed by the facility. These individuals all had criminal background checks completed. The criminal records checks completed search for criminal convictions, pending criminal charges and driving records on a federal, state and local level. The criminal background checks are not conducted onsite. They are sent to NCDPS Central Office for completion.

The facility Administrative Specialist I was detailed in her explanation of the process of conducting criminal background checks on all new hire employees and contractors as well as any staff member being considered for a promotion. The Administrative Specialist I provided the document utilized to track when current employees and contractors are due for the five (5) year re-check of criminal records. The process to initiate the five (5) year criminal records check was explained. A selection of five (5) employee HR files were reviewed. There are no contract staff employed by the facility so there were no HR files reviewed for contract staff. One of the five (5) employee files reviewed also contained appropriate administrative paperwork for promotional purposes. She did report that if information was requested from an institutional employer for which a former employee has applied to work requests information on substantiated allegations of sexual abuse or sexual

harassment, she would refer them to the Regional HR office. All HR files contained the appropriate applications and hiring forms that include the questions regarding any prior incidents of sexual misconduct. The forms reviewed were the NCDPS Applicant Verification Form, NCDPS Professional Reference Check Form and the NCDPS Employment Statement Forms.

After reviewing agency policy and procedures, a review of employee and contractor HR files, staff interviews, and the receipt of follow-up documentation, this auditor finds this standard in compliance.

Corrective Action:

115.18 Upgrades to facilities and technologies Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Surveillance System Schematic/Diagrams • Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist Interviews: • Gaston CC PREA Compliance Manager Findings: NCDPS-Prisons Policy F. 3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires all designing and acquisition of new facilities and in planning substantial expansion or modification of existing facilities to consider the effect of the design, acquisition, expansion, or modification upon the facility's ability to protect offenders from harm, including sexual abuse. The policy also requires that any installing or updating of video monitoring systems, electronic surveillance systems, or other monitoring technology to be considered how such changes may enhance the facility's ability to protect offenders from harm, including sexual abuse. The Gaston CC has not acquired a new facility or made substantial expansion or modification to its existing facility since August 20, 2012 or since the last PREA Audit in 2018. Gaston CC has also not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the facility's last PREA audit in 2018.

After reviewing agency policy and procedures, staff interviews, and observations made during the onsite portion of the audit,

this auditor finds this standard in compliance.

Corrective Action:

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

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- North Carolina General Statute 143B-1200 (Assistance Program for Victims of Rape and Sexual Offenses)
- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 03/10/2020)
- NCDPS-Prisons, Health Services Policy & Procedures, Policy # Cp-18 (Sexual Abuse, dated 2/2014)
- Memo regarding contact with Caromont Regional Medical Center regarding SAFE/SANE examinations
- 2021 Mutual Aid Agreement Gaston County Police Department
- 2021 Mutual Aid Agreement with Caromont Regional Medical Center
- Memorandum of Understanding with Phoenix Counseling Center, dated 07/15/2020
- Memorandum from Commissioner of Division of Adult Corrections and Juvenile Justice (dated September 23, 2019) to the North Carolina Sheriff's Association
- North Carolina Coalition Against Sexual Assault, dated 12/2018
- Form OPA-A18-Designation of PREA Support Person
- Training Certificate for PREA Support Person Training of designated staff member
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- Gaston CC's PREA Compliance Manager
- SAFE/SANE Program Coordinator from Caromont Regional Medical Center
- Phoenix Counseling Center representative
- Staff designated as PREA Support Person
- Random sample of staff

Findings:

North Carolina General Statute 143B-1200 (Assistance Program for Victims of Rape and sexual Offenses), NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 03/10/2020) requires administrative and/or criminal investigations be completed on all incidents of offender-on-offender sexual abuse or staff sexual misconduct. Investigations are to be conducted promptly, thoroughly, and objectively for all allegations. Evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings or criminal proceedings are utilized. Allegations of sexual abuse are referred for investigation to an agency with legal authority to conduct criminal investigations, unless the allegation does not involve potential criminal behavior. Individuals assigned to investigate allegations of sexual abuse or sexual harassment are required to attend PREA Training that all staff are required to participate in as well as specialized training in conducting sexual abuse investigations in confinement settings. NCDPS-Prisons facilities conduct only administrative investigations. The Gaston County Police Department would complete criminal investigations. All allegations are reported to them. The agency sent a letter to all law enforcement agencies in the state on September 23, 2019 requesting their compliance with PREA standards in the event an investigation is completed. A current Mutual Aid Agreement is in place with the Gaston County Police Department and the Gaston Correctional Center for completing all PREA investigations that are potential criminal cases.

The facility reports that they do not house youthful offenders. The facility reports in their PAQ that the evidence protocol was adapted from or otherwise based on the most recent edition of the DOJ'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.

The above policies require and the facility reports that all offenders who experience sexual abuse are provided access to forensic medical examinations by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) at no financial cost to the offender. The facility has a current Mutual Aid Agreement with the Caromont Regional Medical Center (CRMC) to conduct all forensic exams. An interview with the SAFE/SANE Program Coordinator indicated they are responsible for conducting all SAFE/SANE exams from Gaston CC. Both the facility and the SAFE/SANE reported no

forensic medical exams had been conducted over the last twelve (12) months on offenders from Gaston CC. Any evidence collected from a forensic exam is sent to the state's crime lab. CRMC has a SAFE/SANE all call after normal operating hours.

The facility will attempt to make a victim advocate from a rape crisis center available to the victim. A MOU is in place with Phoenix Counseling Services, dated 07/15/2020. The Phoenix Counseling Services will provide confidential emotional support to offenders who are victims of sexual abuse and will accompany an offender during a forensic exam. Offenders are provided a pamphlet from the Phoenix Counseling Services during their orientation. A telephonic interview was held with a representative from Phoenix Counseling Services. She indicated there had been no calls from offenders assigned to Gaston CC in the last twelve (12) months. In addition, NCDPS PREA Office sent a memo requiring all facilities identify staff to become trained to become a PREA Support Person (PSP). The PSP can accompany an offender (of the same sex), during a forensic exam, accompany and support the offender victim through the investigatory interview and provides emotional support, crisis intervention and referrals. Gaston CC currently has designated one (1) staff. This staff was screened for appropriateness to serve as a victim advocate and received specialized training (PREA Support Person Training). Staff interviews and training records confirmed the responsibilities of the PSP at the Gaston CC.

Corrective Action:

115.22 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 03/10/2020)
- 2021 Mutual Aid Agreement with Gaston County Police Department, dated 1/16/2020
- Memorandum from Commissioner of Division of Adult Corrections and Juvenile Justice (dated September 23, 2019) to the North Carolina Sherriff's Association
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- · Gaston CC PREA Investigator
- Gaston CC Warden

Findings:

NCDPS-Prisons Policy F. 3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Gaston Correctional Center Standard Operating Procedure Ch. G. 0200 (Sexual Abuse and Harassment, dated 03/10/2020) both require that administrative and/or criminal investigations be completed on all incidents of offender-on-offender sexual abuse or staff sexual misconduct. Investigations are to be conducted promptly, thoroughly, and objectively for all allegations. Allegations of sexual abuse and sexual harassment are referred for investigation to an agency with legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The referrals are to be documented. When a verified incident of sexual abuse of an offender by a staff member, contractor or volunteer and sexual abuse between offenders occurs, referrals are to be made to a local law enforcement agency for investigation and consideration for criminal prosecution. Gaston CC staff assigned to investigate allegations of sexual abuse or sexual harassment are required to attend PREA Training that all staff are required to participate in as well as specialized training in conducting sexual abuse investigations in confinement settings that includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in a confinement setting and criteria and evidence required to substantiate a case for administrative action or referral for prosecution. Allegations involving staff are also to be reported to the Office of Special Investigations. NCDPS facility investigators only conduct administrative investigations while criminal investigations are referred to the Gaston County Police Department. A memorandum of understanding is in place with the Gaston County Police Department and the Gaston Correctional Center for completing all PREA investigations that are potential criminal cases. The Police Department provides investigative services on a 24-hour basis for allegations of sexual abuse.

Staff refers all allegations of sexual abuse and harassment to their Regional office and the NCDPS PREA Office. The appropriate information regarding the investigation is entered to their internal OPUS system. The PREA policy, Offender Sexual Abuse and Sexual Harassment Policy, is found on the NCDPS website.

Gaston CC reported three (3) allegations of sexual abuse and sexual harassment resulting in an administrative investigation in the past twelve (12) months. Of the three (3) allegations, only one was able to be investigated as victims were not willing to participate in the other two (2) investigations. The one (1) investigation resulted in the allegations being unsubstantiated. There were zero (0) allegations of sexual abuse and sexual harassment resulting in criminal investigation in the past twelve (12) months. The PCM tracks all of the sexual abuse and sexual harassment investigations at the facility.

In 2019, the Commissioner of Division of Adult Corrections and Juvenile Justice sent a memorandum to the North Carolina Sheriff's Association providing them information concerning investigations in accordance with the national PREA standards. Interviews with the Warden and Investigative staff confirmed that administrative or criminal investigations are completed for all allegations of sexual abuse or sexual harassment. Any internal investigation that identifies criminal activity or reveals that a staff member is involved is immediately referred to the Gaston County Police Department or SBI. The facility investigator acts as a liaison with investigator from the GCPD as well as keeping the Warden updated on the progress of the sexual abuse investigation.

After reviewing agency policy and procedures, staff interviews, and observations made during the onsite portion of the audit,

Í	this auditor finds this standard in compliance.
	Corrective Action:
	None

115.31 Employee training Auditor Overall Determination: Meets Standard Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020)
- New Employee Orientation Manual (June 2020)
- NCDPS PREA: Sexual Abuse and Sexual Harassment 101 & 102 Training Curriculums (w/ power point slides) (rev. 7/1/2019)
- NCDPS PREA: Staff and Offender Relationships Training Curriculum (rev 7/01/2019)
- Learning Management Systems Instructions
- Staff PREA Informational Poster
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- · Random sample of Staff
- Human Resources Staff

Findings:

In accordance with the NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020), require that all new employees receive Sexual Abuse and Harassment 101 as well as annual refresher training. The training contains all ten required components of the standard which include: (1) The agency's zero tolerance policy for sexual abuse and sexual harassment, (2) How to prevent, detect, report and respond to allegations of sexual abuse and sexual harassment, (3) Offender's rights to be free from sexual abuse and sexual harassment, (4) The rights of offenders and employees to be free from retaliation for reporting sexual abuse and sexual harassment, (5) The dynamics of sexual abuse and sexual harassment in confinement, (6) The common reactions of sexual abuse and sexual harassment victims, (7) How to detect and respond to signs of threatened and actual sexual abuse, (8) How to avoid inappropriate relationships with offenders, (9) How to communicate effectively and professionally with offenders, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming offenders; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

All new employees are required to read the NCDPS Employee PREA brochure and sign the PREA Acknowledgement Form. The PREA Acknowledgement Forms are stored in each employee's personnel file in the Human Resources Office. This auditor observed the PREA Acknowledgement Forms in all staff personnel files. By signing the form, staff acknowledge that they received the training and understand their responsibilities in reporting incidents of sexual abuse and sexual harassment. All employees are trained as new hires, regardless of their previous experience. Training is tailored to both genders, as well as juveniles/youthful offenders, so additional training is not necessary.

All staff receive Sexual Abuse and Harassment 101 refresher training every two years and receive Sexual Abuse and Harassment 201 refresher information during the alternate years of offender sexual abuse and sexual harassment issues emphasizing the zero-tolerance and duty to report, as well as covering current sexual abuse and sexual harassment policies and procedures. Other training is also provided through the LMS system that staff can participate in when the training is assigned to them. In addition, information is shared during shift line-ups and through PREA Bulletins. Training records indicate staff completed the required training during the last training year. Employee training records are electronically maintained. Each employee has their individual log on to the Learning Management System (LMS). LMS is the online system utilized by the NCDPS-Prisons.

After reviewing agency policy and procedures, staff interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.32 Volunteer and contractor training Auditor Overall Determination: Meets Standard Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- NCDPS-Prisons Policy F .0604 (Community Volunteer Program, dated 7/01/10)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020)
- · Volunteer Training Packets
- PREA Acknowledgement Forms signed by Volunteers
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

· Random Volunteers

Findings:

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020) and NCDPS-Prisons Policy F .0604 (Community Volunteer Program, dated 7/01/10) require that all volunteers and contractors who will have contact with offenders have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection and response. Volunteers and contractors will receive the PREA: Sexual Abuse and Harassment 101 training as part of initial orientation. The volunteer/contractor is required to verify their understanding of the training by signing the PREA Acknowledgement Form and returning the form to the facility. The facility reported in its PAQ that (111) volunteers have been trained in agency policies and procedures regarding sexual abuse and sexual harassment prevention, detection and response policies and procedures. Due to the Covid 19 restrictions, there has been no volunteer trainings conducted over the last 12 months. Interviews with volunteers/contractors indicated they had received training on their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response.

The level and type of training provided to volunteers and contractors is based on the services they provide and the level of contact they have with the offenders. All volunteers and contractors who have contact with offenders are notified of the zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. Volunteers and contractors are required to completed the Sexual Abuse and Harassment 101 training and sign the PREA Acknowledgement Form upon completing the training. Volunteer record files were reviewed and documentation existed acknowledging their requirement for confidentiality, their duty to report incidents of sexual abuse and sexual harassment as well as an understanding of their responsibilities under the agency policy regarding sexual abuse and sexual harassment prevention, detection and response. Interviews with three (3) Religious volunteers confirmed they completed the Sexual Abuse and Harassment 101 training and their knowledge obtained about NCDPS zero tolerance and their duty to report sexual abuse and harassment.

After reviewing agency policy and procedures, staff/volunteer interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020)
- NCDPS Offender PREA Education Acknowledgement Form (dated 3/15/2013)
- NCDPS External Reporting Agency Acknowledgement Form (updated 2/9/2018)
- Offender PREA Acknowledgment Brochure (English and Spanish, dated 2/04/2014)
- Memo from Gaston PCM regarding changes to the Gaston CC Intake and PREA Education, dated 4/28/2021
- Education Upon Transfer Email (dated 8/2/2013)
- · Ways to Report Poster
- Gaston CC Talking Points Inmate Orientation-English
- Offender Handbook
- Offender admission numbers for 2020
- · Offender Records Files reviewed on site
- Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- Intake Staff
- Random sample of Offenders

Findings:

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020) require that offenders receive information at the time of reception about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. A memo from the Gaston PCM regarding changes to the Gaston CC Intake and PREA Education, dated 4/28/2021was also provided to clarify updates to the PREA Education and Orientation process. The Pre-Audit Questionnaire indicates that there were 256 (later corrected and verified by PCM to 250) offenders all of which received education on PREA's zero-tolerance policy and reporting methods for sexual abuse and sexual harassment incidents.

Upon arrival at the facility, offenders receive a PREA educational brochure that contains information on ways to report incidents of sexual assault or sexual harassment. All offenders transferred to the facility are oriented within 72 hours of their transfer. PREA Education material is provided for all offenders transferring in. Education material includes sexual abuse and sexual harassment upon transfer. Education is completed utilizing the Offender FACTSHEET OPAT101 Facilitator Talking Points as well as each offender receiving a copy of the PREA Brochure. Additional sexual abuse and sexual harassment information shall be provided through offender brochures, handbooks, handbook and posters. Each offender signs the Orientation Form after meeting with Programs section staff and the form is placed in their field jacket. Orientation is completed by assigned case managers with the entire Orientation process overseen by the Programs Director.

Offenders are educated regarding their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policy and procedure for responding to such incidents, to the extent that the policies and procedures of the new facility differ from those of the previous facility. Appropriate provisions are made as necessary for offenders not fluent in English, persons with disabilities and those with low literacy levels.

Offender files were reviewed and dates on the Offender Acknowledgement Forms were within the appropriate time frames in accordance with this standard. Several random offenders reported during their interviews that they remembered receiving information regarding PREA the day they arrived and again at a later date. PREA posters were highly visible in all areas of the facility and information was in the handbook offenders are all provided.

After reviewing agency policy and procedures, staff and offender interviews, and documentation provided this auditor finds this standard in compliance.

Corrective Action:
None

115.34 Specialized training: Investigations Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020) • NCDPS Specialized Investigations: Sexual Abuse and Harassment lesson plan • Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) PREA Standards Compliance Checklist Interviews: · Gaston CC PREA Investigator Findings: NCDPS-Prisons Policy F. 3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and Gaston Correctional Center Standard Operating Procedure Ch. G. 0200 (Sexual Abuse and Harassment, dated 3/10/2020), requires staff assigned as investigators to complete training on conducting sexual abuse and sexual harassment investigations in a confinement setting. This required training includes: Techniques for Interviewing Sexual Abuse Victims; Proper use of Miranda and Garrity Warnings; Sexual abuse evidence collection in a confinement setting; and Criteria and evidence

required to substantiate a case for administrative action or prosecution referral. When the staff investigators complete the specialized Investigator Training, it is documented in the staff training records in the Learning Management System.

The NCDPS Specialized Investigations: Sexual Abuse and Harassment training lesson plans are developed by the NCDPS PREA Office. All staff selected as PREA Investigators must complete this training prior to be assigned to conduct administrative investigations. There is currently one (1) staff currently assigned to the Gaston CC who has completed the NCDPS PREA Specialized Investigations: Sexual Abuse and Harassment training. Training records for the one (1) trained investigator was provided and verified completion of the required specialized training as well as annual PREA training. Interviews with the investigator confirmed that the specialized investigator training included interviewing techniques on sexual abuse victims, information on proper usage of Miranda and Garrity warnings, evidence collection and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

In accordance with the NCDPS Sexual Abuse and Harassment Coordinated Response Overview and interviews with trained investigative staff, when a Sexual Abuse/Sexual Harassment investigation is assigned to them, a preliminary administrative investigation is initiated. If at any point in the preliminary investigation the investigator feels a situation could be criminal, a referral is made to the Gaston County Police Department for further investigation and determination of criminal charges.

After reviewing agency policy and procedures, staff interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.35 Specialized training: Medical and mental health care Auditor Overall Determination: Meets Standard Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020)
- Training Record of Mental Health Staff member
- · Training Certificates for Medical staff member
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

· Medical and Mental Health practitioners

Findings:

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020) requires medical and mental health care practitioners to complete the mandated PREA training required for all NCDPS-Prisons staff or the mandated PREA training required for Volunteers, Contractors and Other Persons Providing Services to Offenders. In addition, all full and part-time medical and mental health care practitioners who work regularly in the facility are required to be trained in: Detecting and assessing signs of sexual abuse and sexual harassment; Preserving physical evidence of sexual abuse; Responding effectively and professionally to victims of sexual abuse and sexual harassment; and How to and whom to report allegations or suspicions of sexual abuse and sexual harassment.

A review of the training records of medical and mental health staff indicated completion of PREA: Sexual Abuse and Sexual Harassment 101 & 201 as well as PREA Sexual Abuse and Sexual Harassment Medical & Mental Health Staff Response. The facility reported that there was currently one (1) Medical staff who works regularly at the facility who received the training required by policy. In addition, one (1) mental health staff that works at multiple facilities also received the required training. Training records and training completion certificates confirmed training was completed by both the medical and mental health staff member. Medical and mental health staff sign the PREA Acknowledgement Form as well as the Cross Gender Announcement & Acknowledgement Form during their New Employee Orientation also.

Interviews conducted with medical and mental health staff confirmed that they completed the required training. They shared that the training included information on detecting and assessing signs of sexual abuse and sexual harassment, preserving any physical evidence of sexual abuse, responding effectively and professionally to sexual abuse and harassment and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment to. The Medical staff at the Gaston CC does not conduct forensic exams.

After reviewing agency policy and procedures and staff interviews this auditor finds this standard in compliance.

Corrective Action:

115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Policy TX-I13, Evaluation & Management of Transgender Offenders
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020)
- Risk to Sexual Victimization and Abusiveness Guide (revised 12/4/2020)
- Risk to Sexual Victimization and Abusiveness Screening Guide-Prisons (revised 4/27/2021)
- Memorandum from Director of Rehabilitative Services, dated 4/29/2021
- Screening Inventory training power point presentation
- · Offender Records
- Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- · Gaston CC Case Manager
- · Gaston CC Warden
- · Gaston CC PREA Compliance Manager
- · Random sample of Offenders

Findings:

NCDPS-Prisons Policy F. 3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Health Services Policy and Procedures Manual, Policy TX-I13, Evaluation & Management of Transgender Offenders, Gaston Correctional Center Standard Operating Procedure Ch. G. 0200 (Sexual Abuse and Harassment, dated 3/10/2020), NCDPS-Prisons Diagnostic Center Procedures 305 (Psychological and Psychiatric Referral, dated 01/01/2014) and the Risk to Sexual Victimization and Abusiveness Screening Guide-Prisons (revised 4/27/2021) were all reviewed. Policy F.3400 requires all offenders be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other offenders or sexually abusive toward other offenders. The policies also require that Diagnostic Services staff shall conduct screening to determine an offender's risk of being sexually abused by other offenders or their risk of being sexually abusive towards other offenders. The screening shall use an objective screening instrument that obtains the following minimum criteria to assess offenders for risk of sexual victimization: Whether the offender has a mental, physical, or developmental disability; The age of the offender; The physical build of the offender; Whether the offender has previously been incarcerated; Whether the offender's criminal history is exclusively nonviolent; Whether the offender has prior convictions for sex offenses against an adult or child; Whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; Whether the offender has previously experienced sexual victimization; The offender's own perception of vulnerability; and Whether the offender is detained solely for civil immigration purposes. Offenders sentenced to the NCDPS are never detained solely for civil immigration purposes as North Carolina General Statues do not permit. Additionally, the screening tool considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse (as known to the agency) in assessing offenders for risk of being sexually abusive. The policy also prohibits disciplining offenders for refusing to answer or for not disclosing complete information related to questions regarding whether the offender has a mental, physical, or developmental disability, whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming, whether the offender has previously experienced sexual victimization and the offender's own perception of vulnerability during the screening or assessment process.

Upon arrival to Gaston CC and within 72 hours, the Case Manager completes a screening inventory of the offender. The Offender Population Unified System (OPUS) automatically calculates if the offender is considered high-risk for victimization and/or high-risk for abusiveness based on the responses from the screening inventory. There were 177 offenders that entered the facility either through intake or transfer within the past twelve (12) months who were screened for risk of sexual victimization or risk of sexually abusing other offenders within 72 hours of their entry into the facility. Offender records were reviewed and all indicated that the offenders' intake screenings were all completed within 72 hours of their arrival at Gaston CC. The information gained from the screening for risk of victimization and abusiveness is strictly limited to staff on a "need to know basis" and is used in determining housing, bed, work, education and program assignments with the goal of keeping offenders who are high risk of being sexually victimized separated from those who are at high risk for being sexually abusive.

Recent revisions to the NCDPS-Prisons Risk Screening Guide now require completion of a 30-day reassessment of the offender's risk to sexual victimization and/or abusiveness is required and includes consultation with the offender. The screening upon transfer is utilized for this reassessment. Additional changes to the screening process include a screening upon transfer to another facility followed by an additional 30-day reassessment. The case manager screening link in the OPUS system alerts by turning red after 15 days of admission and remain red until the screening reassessment has been completed. Gaston CC provided examples of initial screening assessments as well as re-assessments being completed on a sample of the Gaston CC intake population. Reassessments are also to be completed when warranted due to a referral, request, incident of sexual abuse or when in receipt of additional information that is relevant to the offender's risk of sexual victimization or abusiveness.

After reviewing agency policy and procedures, information obtained through staff and offender interviews, recent updates to the screening instrument, review of additional documentation and observations made during the onsite portion of the audit, this auditor finds the facility has taken appropriate corrective action to be fully compliant with all provisions of the standard.

Corrective Action:

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020)
- Policy TX-I13, (Evaluation & Management of Transgender Offenders, dated 8/2018)
- Risk to Sexual Victimization and Abusiveness Guide (revised 12/4/2020)
- Gaston CC High-Risk Victim and High-Risk Aggressor Tracking Form reviewing Housing, Bed, Work, Education and Program Assignments
- Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- Gaston CC PREA Compliance Manager Interview
- Gaston CC Warden
- Gaston CC Case Management staff

Findings:

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020), Health Services Policy & Procedure Manual Policy TXI-13 (Evaluation and Management of Transgender Offenders August 2018) and the Risk to Sexual Victimization and Abusiveness Guide (revised 12/4/2020) requires the information used from the risk screening required by PREA Standard 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive. The agency and facility make individualized determinations about how to ensure the safety of each offender based in data gathered from the risk assessment, information from medical/mental health screenings, additional records reviews, information obtained from offender and observations made by staff. A transgender or intersex offender's own view with respect to his own safety is given serious consideration when making facility and housing placements decisions and programming assignments. A few areas that staff consider when assigning offenders is what is the specific housing area design, the level of staff supervision, presence of surveillance equipment and if an area is an isolated area. The policy does prohibit placing gay, bisexual, transgender or intersex offenders in dedicated housing units or wings solely on the basis of such identification or status. Reviews of offenders identified as high-risk abusiveness and identified as high-risk victimization is required to be completed weekly.

The Gaston CC Associate Warden (PCM) is responsible for reassessing the placement and programming assignments for each transgender or intersex offender at least twice each year to review any threats to safety experienced by the offender. The OPUS system automatically generates the standard required assessments and information within the OPUS system is limited to only those staff that need to know. There were no offenders identified as transgender or intersex that were assigned to the facility during the onsite audit so no interviews were conducted for offenders in this category.

Interviews conducted with the Associate Warden (PCM) indicated that the facility does take into consideration on a case-by-case basis whether an offender's housing and program assignment would ensure the offender's health and safety and whether the assignment would present management or security problems. There were no offenders identified as transgender or intersex that were assigned to the facility during the onsite audit so no interviews were conducted for offenders identified as transgender or intersex. While conducting the onsite tour, the auditor toured housing, bed, work and program areas. Staff explained that offenders who are identified as HRV are placed in closer proximity to the staff in the housing units, and away from those identified as HRA. Interviews confirmed that at intake, the results of the screening are used to determine housing and bed assignment.

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) states in part, "Transgender or intersex offenders shall be given the opportunity to shower separately from other offenders." Interviews with the PCM and staff involved in the risk screening indicated that offenders that identify as transgender or intersex are provided the opportunity to shower separately from other offenders. At Gaston CC offenders identified as transgender or intersex are provided the opportunity to shower at separate times than the other offenders.

There is a total of seven (7) living units at Gaston CC. The facility reported in the PAQ that there were seven (7) open bay dormitory style units that contained a dayroom area with tables/chairs/television/telephones and shower and bathroom areas

After reviewing agency policy and procedures, staff interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.43 **Protective Custody** Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist Interviews: • Gaston CC Warden • Gaston CC PREA Compliance Manager Interview Findings: NCDPS-Prisons Policy F. 3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires that offenders at high risk for sexual victimization shall not be placed in restrictive housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the offender in restrictive housing for less than 24 hours while completing the assessment. Gaston CC reported that there were no offenders who were at risk of sexual victimization who were held in involuntary segregated housing in the past twelve (12) months for one-twenty-four (24) hours awaiting completion of an assessment of alternative means. The Warden and the PREA Compliance Manager both reported they would transfer the offender as an alternative. The design and operations of the facility allow for a variety of

Policy also requires that offenders placed in restrictive housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility does have to restrict on offender's access to programs, privileges, education, or work opportunities, the facility shall document the opportunities that have been limited, the duration of the limitation and the reasons for such limitations. Any information regarding any such situations would be documented in the OPUS system. The assignment should not ordinarily exceed a period of thirty (30) days. The facility reported in the PAQ that there have been zero (0) offenders who were assigned to involuntary segregated housing for longer than 30 days while waiting alternative placement.

After reviewing agency policy and procedures, staff interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

options of housing if necessary.

115.51 Inmate reporting Auditor Overall Determination: Meets Standard Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020)
- Orientation Paperwork containing reporting information
- Ways to Report Posters
- Report Fraud, Waste, Abuse or Misconduct flyer
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- Random Sample of Offenders
- Random Sample of Staff
- Phoenix Counseling Center Representative

Findings:

NCDPS-Prisons Policy F. 3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Gaston Correctional Center Standard Operating Procedure Ch. G. 0200 (Sexual Abuse and Harassment, dated 3/10/2020) requires that multiple internal ways should be provided for offenders to privately report sexual abuse and sexual harassment, retaliation by other offenders or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Ways of reporting incidents of sexual abuse and harassment include reporting to any departmental employee/volunteer/contract staff, utilizing the administrative remedy process (grievance), writing the PREA Office, to a third party-including family members, friends, and outside organizations, a local rape crisis center, and/or utilizing the toll-free number for reporting directly to an external agency/entity (Project Inmate Reporting Sexual Abuse). While touring the facility, signage was observed in multiple areas in each housing unit/living unit. The signage included instructions and numbers that can be called to report incidents of sexual abuse/assault. Additional signage provided contact information for Offender reporting, Family & Friends Reporting, Employee Reporting and Employee Responsibilities. One of the numbers is automatically programmed into the Offender Calling System as (*63). This number was called by the auditor during the onsite portion of the audit and the auditor was able to speak with an individual on the other end of the line and did not get a recording. Third party reporting can be made via email, phone or letter. When offenders arrive at the facility, they are provided a document that explains how to report incidents anonymously by writing to the Warden and either Deputy Warden. The offenders are also provided a PREA External reporting number as a result of the Project Inmate Reporting Sexual Abuse partnership between Forgiven Ministry and the NC Department of Public Safety PREA Office. The offenders also have access to a Rape Crisis Center (Phoenix Counseling Center). The auditor interviewed staff from The Phoenix Counseling Center. The Phoenix Counseling representative indicated that there had been no calls from offenders from Gaston CC during the past 12 months requesting any emotional support services related to a sexual abuse or sexual harassment occurring at the facility.

When offenders participate in Orientation, they are provided a pamphlet regarding Sexual Abuse Awareness, to include different ways to report incidents of sexual abuse and sexual harassment. The pamphlet also explains the partnership between NCDPS-Prisons and Forgiven Ministry to provide external reporting for offenders that are victims of sexual abuse and sexual harassment. The form provides a telephone number to call as well as an explanation of the offender's rights in regard to sexual safety. Reports received by Forgiven Ministry are immediately forwarded to agency officials, allowing the offender to remain anonymous upon request.

The "PREA: Ways to Report" is a poster that was observed throughout the facility during the tour and includes methods for staff, offenders and visitors to report sexual abuse or sexual harassment.

Even though the facility does not house offenders detained solely for civil immigration purposes, policy still requires that offenders detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the US Department of Homeland Security.

Policy also requires that staff accept reports of sexual abuse and sexual harassment that are made verbally, in writing,

anonymously or from a third party. Each employee has a duty to report any and all violations and are to immediately notify their OIC and document verbal reports made to them through the Incident Reporting System. Policy also allows staff to privately report sexual abuse and sexual harassment of offenders. The ways for staff to report are defined in the policy and is also included on the Ways to Report posters that are prominently posted throughout all areas of the facility. The Ways to Report posters indicate that staff can report via their chain of command, sending an email or placing a call to the PREA Office, or contacting the NCDPS Fraud, Waste, Abuse or Misconduct Hotline.

Interviews with random offenders confirmed they were educated on how to report sexual abuse and sexual harassment utilizing the hotline numbers posted on each housing unit. Most offenders were aware of where to go to find reporting methods in their Orientation paperwork. Interviews with random staff confirmed they were all comfortable in reporting situations to their OIC and knew additional ways to report were on the posters.

After reviewing agency policy and procedures, staff and offender interviews, interviews with external entity and observations made during the onsite portion of the audit, this auditor finds the facility meets this standard based on the multiple reporting methods provided for the offender population and staff.

Corrective Action:

115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy G .0300 (Administrative Remedy Procedure, dated 8/01/13)
- NCDPS-Prisons Offender Rules and Policies Handbook
- Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- · Random Sample of Staff
- Random Sample of Offenders

Findings:

NCDPS-Prisons Policy G .0300 (Administrative Remedy Procedure, dated 8/01/13) allows offender to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident occurred. Policy requires all grievances that are filed regarding allegations of sexual abuse or sexual harassment be forwarded to the Warden for appropriate action in accordance with PREA. Immediate notification of the NCDPS PREA Office is also required. Offenders are educated and advised of the Administrative Remedy Procedure during their Orientation at all Diagnostic Centers. Offenders are provided both written material and an oral explanation of the procedure and provided the opportunity to ask questions regarding the grievance procedure. Offenders are permitted to request assistance in understanding the process and also in completing a grievance. Third parties are permitted to assist an offender in submitting a grievance regarding allegations of sexual abuse and are also permitted to submit such a grievance. Outside third parties may include other offenders, staff members, family members, attorneys and outside advocates. The policy allows that the alleged offender victim agree to have the grievance submitted on his behalf. If the offender declines to have the grievance processed on his behalf, the facility should document this refusal. The facility reported that there were no grievances alleging sexual abuse filed by offenders in the past twelve (12) months in which the offender declined third-party assistance, containing documentation of the offender's decision to decline.

The policy also explains that an offender can submit a grievance without submitting it to the staff member who is subject of the complaint. The policy does not allow the grievance to be referred to the staff member who is subject to the complaint.

NCDPS-Prisons utilizes a tiered grievance process. Policy requires that a decision be made within ninety (90) days (time period does not include time consumed by offenders in preparing any administrative appeal) on any portion of a grievance alleging sexual abuse and allows an extension of time to respond up to seventy (70) days. When an extension is requested, the offender should be notified in writing of the extension and provide a date when the decision will be made. Policy also requires that if at any level of the administrative remedy process, including the final level, the offender does not receive a response within the time provided for reply, including any properly noticed extension, the absence of a response shall be a denial at that level which the offender may appeal. The facility reported in the PAQ that there had been zero (0) grievance filed in the last twelve (12) months that alleged sexual abuse that reached final decision within ninety (90) days of being filed. None of these grievances required an extension.

If an emergency grievance alleges that an offender is subject to substantial risk for imminent sexual abuse, an initial response should be provided within 48 hours and final agency decision be issued within 5 days. Gaston CC reported that there were no emergency grievances alleging substantial risk of imminent sexual abuse filed in the past 12-months.

No reprisals are to be taken against any offender for a good faith use of or participation in the grievance procedure. The prohibition against reprisals should not be construed to prohibit discipline of offenders who do not use the system in good faith.

Interviews with random offenders confirmed the multiple ways an offender could report allegations of sexual abuse or sexual harassment, submitting a grievance was one of those ways. The offenders explained the grievance boxes on the housing units. None of the random offenders interviewed had ever filed a grievance regarding an allegation of sexual abuse or sexual harassment but said other grievances they have filed were responded to well withing the timeframes set out in policy. Random staff interviewed shared how an offender could place a grievance in the grievance box and assigned staff retrieved the contents of the mailbox.

After reviewing agency policy and procedures, staff and offender interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.
Corrective Action:
None

115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020)
- Memorandum of Understanding with Phoenix Counseling Center (dated 07/15/2020)
- Talking Points Inmate PREA Orientation Upon Admission Handout
- · Ways to Report Poster
- Inmate Brochure
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- Gaston CC PREA Compliance Manager
- Phoenix Counseling Center Representative
- · Random sample of Staff
- · Random sample of Offenders

Findings:

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020) requires the facility to provide victim offenders with access to outside victim advocates for emotional support services related to sexual abuse, PREA Support Persons and legal counsel. Mailing addresses and telephone numbers, including toll-free hotline numbers for local, state, or national victim advocacy or rape crisis organizations are provided to offenders during their intake and Orientation. Enabling reasonable communication between offenders and the organizations/agencies in as confidential manner as possible is also required per policy. The facility is required to inform the offenders prior to giving them access, of the extent to which such communication will be monitored and the extent to which reports of abuse will be forwarded to authorities with mandatory reporting laws.

There is a Memorandum of Understanding with Phoenix Counseling Services, signed 07/15/2020 by the Warden of Gaston CC and a Phoenix Counseling Services representative. Phoenix Counseling Services will provide free, confidential sexual abuse advocacy services for the Gaston CC offender population. The Phoenix Counseling Services crisis line telephone number is posted throughout the housing units for easy access. The auditor conducted a telephone interview with a representative from Phoenix Counseling Services and she indicated that Phoenix Counseling Services had not received any telephone calls in the past twelve (12) months from offenders at Gaston CC. The Phoenix Counseling Services representative explained that they are also contracted with the CaroMont Regional Medical Center so if an offender was taken for a forensic exam, Phoenix Counseling Services also provides advocates and support services during the forensic exam process. The SANE at CaroMont Regional Medical Center confirmed the partnership with Phoenix Counseling Services and advised they have a SAFE/SANE available on a 24-hour basis that would conduct a forensic exam at no financial cost to the offender victim.

Interviews with random staff and the PCM indicated the offenders are provided with a PREA brochure and orientation material that contained facility guidelines regarding PREA, information on how to report incidents of sexual abuse and sexual harassment, including telephone numbers of outside agencies. Spanish versions are provided to limited English proficient offenders. Offenders were knowledgeable of how to utilize the crisis hotline numbers and what type of services the Phoenix Counseling Services provided.

After reviewing agency policy and procedures, staff and offender interviews, interviews with representatives from Phoenix Counseling Services and CaroMont Regional Medical Center and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.54 Third-party reporting Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Inmate PREA Brochure · Ways to Report Poster · Talking Points Inmate Orientation • NCDPS-Website-PREA Information • Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist Interviews: · Random Sample of Staff Findings: NCDPS-Prisons Policy F. 3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), recognizes that third-party reporting can be made via email, phone or letter and can be made to any NCDPS-Prisons employee. Phone calls made to the PREA telephone number goes directly the PREA Office where the statewide PREA Coordinator who will in turn notify and inform the Warden. The NCDPS-Prisons website provides information to the general public regarding PREA, to include information regarding third-party reporting of sexual abuse and sexual harassment incidents. The auditor viewed the website and confirmed the information regarding third-party reporting. The website contained a link that would send an email to the NCDPS-Prison PREA Director. Staff are also provided a way to report offender sexual abuse anonymously through the Fraud, Waste, Abuse and Misconduct Hotline. The PREA Coordinator notifies the Warden of any information received and an

investigation into the allegations will be initiated.

Gaston CC has an MOU with Phoenix Counseling Services to provide for advocacy services as well as being an external entity that offenders could utilize to report allegations of sexual abuse and sexual harassment anonymously. In order for the Phoenix Counseling Services representative to notify the facility of the information shared with them, the offender must sign a consent form giving the Phoenix Counseling Services permission to contact the facility and report the allegation of sexual abuse or sexual harassment.

Random interviews with staff confirmed that they understand the requirement to accept allegations of sexual abuse and sexual harassment when a third-party may report an incident of sexual abuse and sexual harassment to them. Staff said that the "third-party" could be other offenders, staff members, attorneys, outside advocates, offender family members.

After reviewing agency policy and procedures, NCDPS Website, staff interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

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

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- Gaston CC Warden
- · Medical and Mental health practitioners
- · Random Sample of Staff

Findings:

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires all staff, employees and volunteers to immediately report any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility to their immediate supervisor or the Officer in Charge (OIC) of the shift. As well as reporting incidents, staff should also report any retaliation against offenders or staff who report incidents and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. These reports also go to the immediate supervisor or OIC of the shift. The reporting of third-party and anonymous reports is included an are reported to the designated investigators. Staff are prohibited from revealing any information related to a sexual abuse incident to anyone other than to the extent necessary to make treatment, investigation and other security and management decisions. Mental health and medical staff are also required to report incidents of sexual abuse and informing the offender of the practitioner's duty to report at the initiation of services. If the facility ever has an alleged victim under the age of 18 or that was considered a vulnerable adult under state or local vulnerable persons statute, a report to the North Carolina Department of Social Services is required.

Random staff interviews, indicated staff understood their responsibility to report any knowledge, suspicion or information of sexual abuse or sexual harassment. Staff also understood that any information related to sexual abuse or sexual harassment is to be confidential and not be shared with anyone other than those that need to know. Staff said they would report to their supervisor or the OIC verbally and submit a written report. Medical and mental health staff also understood their responsibility to report any knowledge, suspicion or information of sexual abuse or harassment to facility supervisors and explained they would notify the offender of their duty to report at the initiation of any services they would provide to the offender. Medical and mental health staff reported they would utilize confidentiality appropriately in situations concerning sexual abuse and sexual harassment. Through an interview with the Warden, he advised that any reports of allegation of sexual abuse or sexual harassment that are reported through a third-party would be referred to the appropriate investigator and would be processed as any other allegation.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination:
	Information or Documents Reviewed:
	 NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) PREA Standards Compliance Checklist
	Interviews:
	 Gaston CC Warden Gaston CC PREA Compliance Manager Interview Random Sample of Staff
	Findings:
	NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), explains the agency's protection duties when the staff learns that an offender is subject to a substantial risk of imminent sexual abuse and requires immediate staff action be taken to protect the offender.
	During the interviews with random staff, they all reported that any information they received that alleges an offender is at substantial risk of imminent sexual abuse and they would all react and take immediate action by separating the alleged victim from the abuser to ensure the safety of the alleged victim. The Warden and the PCM both reported that there were no reports of substantial risk of imminent sexual abuse that required immediate action on staff's behalf in the past twelve (12) months.
	After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.
	Corrective Action:

115.63 Reporting to other confinement facilities Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist Interviews: • Gaston CC Warden • Gaston CC PREA Compliance Manager Interview • Gaston CC PREA Support Person Findings: NCDPS-Prisons Policy F. 3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires that when Gaston CC receives an allegation that an offender was sexually abused while confined at another facility, the head of the facility that received the allegation is required to notify the head of the facility or agency where the alleged abuse occurred. The notification to this other agency or facility should occur as soon as possible, but no later than 72 hours after receiving the allegation. The notification is documented on a memorandum and uploaded into the correspondence tracking system (CTS). If Gaston CC is notified from another facility or agency that an allegation of sexual abuse or sexual harassment has been

During the interview with the Warden, he shared that if an offender reports an incident of sexual abuse/assault that occurred at another agency/facility, he (Gaston CC Warden) would contact the other agency/facility staff.

Both the Warden and the PCM reported that there were no reports received from other agencies or facilities reporting that an offender alleged sexual abuse wile assigned to Gaston CC.

After reviewing agency policy and procedures, staff and offender interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

reported, the allegation would be investigated immediately.

115.64 Staff first responder duties Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist Interviews: • Gaston CC PREA Compliance Manager Interview · Security and Non-Security First Responders Findings: NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires first responders to ensure that the alleged offender victim is separated from the alleged offender perpetrator. If the abuse occurred within a time period that allows for the collection of evidence, ensure evidence is preserved and protected by securing the scene and requesting that the alleged offender victim not take any action which may destroy physical evidence, such as brushing teeth, urinating or defecating, smoking, showering, changing clothes or eating and drinking, ensure evidence is preserved by securing the scene and requesting that the alleged offender perpetrator not take any action which may destroy physical evidence, such as brushing teeth, urinating or defecating, smoking, showering, changing clothes or eating and drinking. The Officer in Charge (OIC)/ Senior Person in Charge or immediate supervisor should be notified as soon as possible. If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any

Interviews were conducted with random staff and Staff First Responders (security and non-security) and all staff were able to recite First Responder responsibilities in accordance with facility policy when it is learned an offender was sexually abused. Staff produced a laminated credit-card style information card that detailed First Responder duties when they learn an offender was sexually abused. Staff all reported they attended the required training upon being hired and then attended training each year after they were hired. Training records were reviewed and indicated that staff attended the required training and learned of the proper responses when learning an offender was sexually abused.

actions that could destroy physical evidence, and then notify security staff. The offender should see medical and mental

The PCM reported that there no incidents reported to security or non-security staff members that an offender had been sexually abused.

After reviewing agency policy and procedures, staff interviews and offender interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

health staff as soon as possible.

115.65	Coordinated response	
	Auditor Overall Determination: Meets Standard	
	Auditor Discussion	
	The following evidence was analyzed in making the compliance determination:	
Information or Documents Reviewed:		
	 NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020) Gaston Correctional Center Standard Operating Procedure Ch. G .0100 (PREA Coordinated Response Plan, dated 3/10/2020) Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) PREA Standards Compliance Checklist Interviews:	
	 Gaston CC Warden Random sample of staff 	
	Findings:	
	NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020) and Gaston Correctional Center Standard Operating Procedure Ch. G .0100 (PREA Coordinated Response Plan, dated 3/10/2020, identifies the facility's written coordinated response and actions to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators and facility leadership.	
	The Warden shared that he as well as the staff assigned to the facility are confident in their knowledge of coordinated actions	

The Warden shared that he as well as the staff assigned to the facility are confident in their knowledge of coordinated actions to take when a situation of sexual abuse is reported to them. All staff are issued a card that details their responsibilities as first responders to a report of sexual abuse allegations. Random staff interviews confirmed that staff were aware of the proper steps to protect an offender alleging sexual abuse/assault, securing and preserving evidence, requests made to both the offender victim and offender perpetrator to not take any actions that would destroy evidence, notification to the OIC/supervisor on duty/their supervisor, ensuring offender victim is seen by medical staff and documentation of the incident prior to the conclusion of their shift. The Response Plan was reviewed and included a more detailed step-by-step instructions regarding first responder responsibilities, evidence collection procedures, documentation required, notifications required, medical responsibilities, investigator responsibilities and administration responsibilities.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.66 Preservation of ability to protect inmates from contact with abusers Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist Interviews: · Gaston CC Warden • PREA Program Coordinator • Human Resources staff Findings: NCDPS does not engage in a collective bargaining agreement with their employee workforce. There has been no collective bargaining agreement entered into that limits the agency's ability to remove alleged staff sexual abusers from contact with any offenders pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. NCDPS does not allow such entities to restrict the ability to terminate an employee or remove a staff member who has been alleged to sexually abused or sexually harassed an offender from having contact with an offender pending the outcome of an investigation or of a determination of whether to and to what extent discipline is warranted. The Human Resources staff and the Warden both confirmed collective bargaining is not utilized within NCDPS. A written summary of an interview conducted by certified PREA Auditor Dorothy Xanos earlier in the audit cycle was reviewed. The summary review allowed this auditor to verify that the PREA Program Coordinator reported that collective bargaining is not utilized in the NCDPS.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and

observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

115.67 Agency protection against retaliation Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- LMS PREA Support Person Training Curriculum
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- Gaston CC Warden
- Gaston CC PREA Compliance Manager Interview
- Gaston PREA Support Person

Findings:

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires the protection and monitoring of offenders and staff who have reported sexual abuse and sexual harassment or who have cooperated in a sexual abuse or sexual harassment investigation. NCDPS policies and procedures prohibit retaliation against any staff or offender for making a report of sexual abuse as well as retaliation against a victim who has suffered from abuse. Requires multiple protections such as housing changes or transfers for offender victims or abusers, removal of the alleged staff or offender abusers from contact with victims, and emotional support services for offenders or staff who fear retaliation are available. Requires monitoring for a minimum of ninety (90) days, with periodic status checks, and provides protections for any other individual who cooperates with an investigation. The monitoring at a minimum will take place for a period of 90 days or longer, as needed. This monitoring would include offender disciplinary reports, housing and program changes, negative performance reports as well as reassignments of staff.

The PCM confirmed that retaliation against staff or offenders making an allegation of offender sexual abuse or sexual harassment is prohibited. The PCM reported that he is charged with monitoring staff for potential retaliation against them and would document the information on the Staff (OPA-I22) form. The PCM confirmed also that there is one (1) PREA Support Person assigned to Gaston CC that are responsible for offender monitoring for potential retaliation. During an interview with PSP, she explained that the role of the PREA Support Person is to serve as an advocate to link services (community base advocates or mental health professionals) and support to offenders who report sexual abuse and sexual harassment by another offender, staff member, contractor or volunteer. Offenders are met with immediately and every other week thereafter for a minimum of 90 days and up to 180 days. PSPs monitor retaliation by monitoring changes in work assignments, education or vocational changes, offender disciplinary reports, housing and program changes, negative performance reports as well as reassignments of staff.

When the outcome of the investigation has been determined to be unfounded, retaliation monitoring may be terminated prior to the 90-day minimum requirement only if approved by the facility administrator. Upon completion of the investigation, the PCM and/or the PSP complete a "PREA Sexual Abuse and Harassment Retaliation Report" form [Staff (OPA-I22) or Offender (OPA-I24)].

The PCM and the Warden both reported that there had been no incidents of retaliation of either staff or offenders in the past twelve (12) months.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.68 Post-allegation protective custody Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist Interviews: · Gaston CC Warden • Gaston CC PREA Compliance Manager Interview Findings: NCDPS-Prisons Policy F. 3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires that offenders identified as victims of sexual abuse shall not be placed in involuntary restrictive housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. Also, the policy contained information on post-allegation protective custody or guidelines for moving an offender to another housing area or another facility as a last measure to keep offenders who alleged sexual abuse safe and only until an alternative means for keeping the offender safe can be arranged. It allows for the temporary holding, less than twenty-four (24) hours, in involuntary segregated housing or in temporary protective custody only if the facility

than thirty (30) days while awaiting an alternative placement.

An interview with the Warden and the PCM indicated the facility does not have restrictive housing and if there was a result of an allegation being identified as a high risk for sexual victimization, the offender would be transferred to another facility. Also, the Warden's interview indicated there has been no transfer of any offenders resulting of an allegation or as being identified

cannot conduct such an assessment immediately. If an offender is placed in restrictive housing, the offender is seen every seven (7) days by the mental health staff who documents the status. An "Administrative Restrictive Housing – Protective Custody" form is required to be completed when an offender is placed into the restrictive housing unit. There were zero (0) offenders who alleged to have suffered sexual abuse who were held in involuntary segregated housing in the past twelve (12) months for one to 24 hours awaiting completion of an assessment, that were assigned to restrictive housing for longer

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

as high risk for sexual victimization in the past twelve (12) months.

115.71 Criminal and administrative agency investigations Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020)
- Gaston Correctional Center Standard Operating Procedure Ch. G .0100 (PREA Coordinated Response Plan, dated 3/10/2020)
- NCDPS Specialized Investigations: Sexual Abuse and Harassment Training Lesson Plans
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

· Gaston CC Investigator

Findings:

NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Gaston Correctional Center Standard Operating Procedure Ch. G.0200 (Sexual Abuse and Harassment, dated 3/10/2020) Gaston Correctional Center Standard Operating Procedure Ch. G.0100 (PREA Coordinated Response Plan, dated 3/10/2020) requires that investigations into allegations of sexual abuse and sexual harassment, shall be conducted promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. Policy also requires that sexual abuse and sexual harassment investigations shall be conducted by staff that has received special training in sexual abuse investigations. Interviews with Gaston CC Investigator confirmed their attendance at the NCDPS Specialized Investigations: Sexual Abuse and Harassment training. Gaston CC currently has one (1) staff who has attended the Investigator training. All alleged incidents of sexual abuse or harassment are referred to the local law enforcement office, Gaston County Police Department (GCPD) for criminal investigations. When an outside agency investigates sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. The Investigator reported that they become the contact person for the Gaston County Police Department. In addition, staff refer all allegations of sexual abuse and harassment to the Regional Office and the NCDPS PREA Office for completion of an administrative investigation. The facility's PREA investigator could be assigned to conduct the administrative investigation. Allegations involving staff shall be reported to the Office of Special Investigation in accordance with NCDPS-SI-100 OSI Authority to Conduct Investigations Policy.

Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data including video and/or audio recordings; shall interview alleged victims, suspected perpetrators, and witnesses. The Investigator should also review prior complaints and reports of sexual abuse involving the suspected perpetrator, included in the incident package and considered when determining credibility of the allegations. When the quality of evidence appears to support criminal prosecution, the Department of Public Safety sexual abuse and harassment investigators shall only be permitted to continue interviews after consulting with local law enforcement agency, who in turn, consults with local prosecutors, as to whether interviews may be an obstacle for subsequent criminal prosecution.

The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as offender or staff. Polygraph examinations or other truth-telling devices are not required as a condition for proceeding with the investigation of an allegation of sexual abuse. During the interviews with the Investigator, they determine the credibility of the subject of an interview depending on their ability to provide verifiable details that contribute to the veracity of their story. The more verifiable details they provide, the more it contributes to the veracity of their story. The investigator's questions need to also address things that only appear to be secondary to the line of questioning, but are key to establishing the credibility of their narrative. The Investigator explained they like to measure whether the subject's non-verbal indicators of truthfulness align with their verbal indicators that they are being truthful.

The policies also require that investigations include an effort to determine whether staff actions or failures to act contributed to the abuse. Administrative Investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Criminal Investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and

documentary evidence with all documentary evidence attached where feasible. Substantiated allegations of conduct that appears criminal shall be referred for prosecution.

According to the PAQ, and verification from interviews with the PCM and investigator, confirm there were zero (0) substantiated allegations of conduct that appeared to be criminal that were referred for prosecution since the last PREA audit

All written investigation reports will be retained as long as the alleged abuser is incarcerated or employed by the agency, plus five (5) years. The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination:
	Information or Documents Reviewed:
	 NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) PREA Standards Compliance Checklist
	Interviews:
	Gaston CC Investigator
	Findings:
	NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires that when a facility investigates an allegation, the facility shall impose no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The preponderance of the evidence is a lesser standard of proof than, "beyond a reasonable doubt," which is required to convict in a criminal trial. This standard is satisfied if the evidence shows that it is more probable than not that an event occurred.
	The investigator shared that when they conduct investigations, they seek the facts and make decisions and conclusions based on these facts. The Investigator routinely identify in their investigative reports if they make a decision based on the preponderance of evidence with further explanation.
	After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.
	Corrective Action:

115.73 Reporting to inmates Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist Interviews: · Gaston CC Investigator · Gaston CC PREA Compliance Manager Findings: NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), w requires any offender who makes an allegation that he or she suffered sexual abuse is informed in writing. Also, the policy contains the process for notifying offenders whether the allegation proves substantiated, unsubstantiated or unfounded following an investigation. The policy further requires following an offender's allegation a staff member has committed sexual abuse against the offender, the facility informs the offender unless the allegations are "unfounded" whenever the staff member is no longer posted within the offender's housing unit; the staff member is no longer employed at the facility; the staff member has been indicted on a charge related to sexual abuse within the facility; or the agency learns that the staff member has been convicted on a charge

Interviews with the investigator and the PCM confirmed all investigation outcomes, whether the allegation proves substantiated, unsubstantiated or unfounded following an investigation, are completed by the facility investigator and the documentation is maintained with the investigation. The interview with the PCM confirmed there has been zero (0) reported investigations of alleged staff or offender's inappropriate sexual behavior that occurred in the facility in the past twelve (12) months which was investigated by facility investigators.

related to sexual abuse within the facility. Results of indictments or criminal convictions of Gaston CC staff that Gaston County Police Investigators become aware of will be shared with the Warden. The Warden will then inform the offender whenever the facility learns the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.76 Disciplinary sanctions for staff Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Policy A .0200 (Conduct of Employees, dated 2/1/2016) • Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist Interviews: · Gaston CC Warden · Gaston CC Human Resources Staff Findings: NCDPS-Prisons Policy F. 3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), NCDPS-Prisons Policy A .0200 (Conduct of Employees, dated 2/1/2016), require that all disciplinary actions must be approved through Facility Head. Additionally, the policy requires that staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff

with similar histories. 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, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

Staff who are terminated or who resign for a violation of the sexual abuse and sexual harassment policies shall be informed of the NCDPS's reporting the employment action to any relevant licensing bodies and to law enforcement agencies, unless the activity was clearly not criminal. The policy also requires that the violation be reported to the NCDPS PREA Office and

Interviews with the Warden and the Human Resources Staff both reported that there had been no staff from Gaston CC who violated agency sexual abuse or sexual harassment policies in the past twelve (12) months.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

law enforcement if the violation is criminal in nature. All disciplinary sanctions are maintained in the employee's human resources office in accordance with procedures. Resigning prior to disciplinary procedures does not necessarily mean the

Corrective Action:

employee will escape sanctions.

115.77 Corrective action for contractors and volunteers Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Policy F .0604 (Community Volunteer Program, dated 7/01/2010) • Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated PREA Acknowledgement Forms of volunteers/contractors • Volunteer Training Curriculum · Volunteer training attendance roster • Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist Interviews: • Gaston CC Warden • Gaston CC PREA Compliance Manager Random Volunteers

Findings:

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), NCDPS-Prisons Policy F .0604 (Community Volunteer Program, dated 7/01/2010) and Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020) require that any contractor or volunteer who engages in sexual abuse shall be immediately prohibited from contact with offenders and shall be reported to law enforcement, unless the activity was clearly not criminal, and to relevant licensing bodies. In addition, this should also be reported to the NCDPS PREA Office. The facility should also take any appropriate remedial measures shall be considered whether to prohibit further contact with offenders in the case of any other violation of sexual abuse or sexual harassment policies. If an allegation of sexual abuse in which a volunteer or contracting agent is the alleged abuser is substantiated, the volunteer or contracting agent shall be terminated from the relationship with NCDPS.

Interviews with the Warden and PCM both confirmed there were no situations in the past twelve (12) months where a volunteer or contractor was alleged to have violated the sexual abuse or sexual harassment policies and procedures. Just like employees, volunteers and contractors are required to sign the "PREA Acknowledgement Form" upon completion of their required training.

After reviewing agency policy and procedures, staff and volunteer interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.78 Disciplinary sanctions for inmates Auditor Overall Determination: Meets Standard

Information or Documents Reviewed:

Auditor Discussion

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- NCDPS-Prisons Policy B .0200 (Offender Disciplinary Procedures, dated 11/03/2020)
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)

The following evidence was analyzed in making the compliance determination:

• PREA Standards Compliance Checklist

Interviews:

- Gaston CC Warden
- Gaston CC PREA Compliance Manager Interview

Findings:

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), NCDPS-Prisons Policy B .0200 (Offender Disciplinary Procedures, dated 11/03/2020) requires that an offender shall be subject to disciplinary sanctions pursuant to formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual abuse or following a criminal finding of guilt for offender-on-offender sexual abuse. Requires that sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories. The disciplinary process should consider whether an offender's mental disabilities or mental health illness contributed to the offender's behavior when determining the type of sanction, if any, should be imposed.

Policy also requires that if the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for any abuse, the facility should consider whether to require the offender to participate in such interventions as a condition of access to programming or other benefits. Gaston CC does not have such programming but recommendations could be made for the offender to become involved in upon transfer.

For the purpose of disciplinary action, policy requires that if a report of sexual abuse is made in good faith based upon a reasonable belief that the alleged conduct occurred, shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Policy also prohibits disciplining an offender victim for sexual contact with staff unless a finding that the staff member did not consent to such contact. NCDPS-Prisons Policy B .0200 (Offender Disciplinary Procedures, dated 11/03/2020) identifies that committing, soliciting, or inciting others to commit any sexual act or indecently exposing oneself, or touching the sexual or other intimate parts of oneself or another person for the purpose of sexual gratification as a Class A offense.

An interview with the Warden explained that formal disciplinary hearings are held where appropriate sanctions are assigned. If necessary, consultation with mental health staff would take place prior to the hearing. The Warden shared that the offender can be sanctioned to restrictive housing, loss of sentence credits, extra duty, loss of privileges, limited trust fund withdrawals and demotion in custody. Criminal charges could also be considered. The PAQ and the Warden both reported that there had been zero (0) incidents of criminal findings of guilt for offender-on-offender sexual abuse that occurred in the facility as well as zero (0) administrative findings of offender-on-offender sexual abuse that occurred in the facility.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.81 Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- Diagnostics Procedures Manual, Procedure 305.3 (Psychological and Psychiatric Referral, dated 12/4/2018)
- NCDPS-Prisons Health Services Policy and Procedure CP 18 (Sexual Abuse, dated 2/2014)
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- · Gaston CC Medical and Mental Health Staff
- · Gaston CC Warden
- Gaston CC PREA Compliance Manager

Findings:

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Diagnostics Procedures Manual, Procedure 305.3 (Psychological and Psychiatric Referral, dated 12/4/2018), Health Services Policy and Procedure CP 18 (Sexual Abuse, dated 2/2014) stipulates that if offenders disclosed any prior sexual victimization during the screening for risk of victimization and abusiveness, whether it occurred in an institutional setting or in the community, staff is to ensure that the offender if offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. If the screening for risk of victimization and abusiveness indicates that a prison offender has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff is to ensure that the offender if offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening. 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 necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the offender is under the age of 18.

While onsite at the facility, intake screening staff demonstrated how the intake screening tool in the OPUS database is utilized. If, during the screening, an offender responds to certain questions in an affirmative manner, an automated referral is made to medical and/or mental health staff. All offenders who reported prior victimization received the follow up medical or mental health care.

Interviews with Medical and Mental Health staff and documentation reviewed, disclosed they complete their assessments in the HERO system. Mental Health staff also complete a Mental Health Assessment and Treatment Plan form, as well as informed consent disclosures and release of information forms. A variety of other admissions documentation is also completed during the offender's intake. When a referral is made as a result of an initial intake screening, Medical and Mental Health staff log appropriate information on the Medical or Mental Health Referral Log Sheet. When an offender is referred to Medical or Mental Health staff, they log the offender's name, the date of the referral, who made the referral, date they were seen by Medical or Mental Health staff and what the plan is for the that particular offender.

Interviews with the Warden and the PCM confirmed there are no offenders under the age of eighteen (18) housed at the facility.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- NCDPS-Prisons Health Services Policy and Procedure CP 18 (Sexual Abuse, dated 2/2014)
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

- · Gaston CC Medical and Mental Health Staff
- Representative from Caromont Regional Medical Center
- Representative from Phoenix Counseling Services
- PREA Support Person

Findings:

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and Health Services Policy and Procedure CP 18 (Clinical Practice Guidelines, dated 2/2014) requires offender victims receive timely unimpeded access to emergency medical treatment and crisis intervention. Arrangements are to be promptly made to have the alleged offender-victim examined by medical services. Medical and Mental health staff document the timeliness of emergency medical treatment and crisis intervention services that are provided. Provisions of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis. Medical Services will ensure that an offender victim receives medical follow-up and is offered a referral for mental health services. All care for sexual abuse will be provided at no cost to the offender.

Documentation and an interview with the representative from Caromont Regional Medical Center, confirmed that Caromont Regional Medical Center SAFE/SANE staff provide emergency care and the forensic medical exam at no cost to the victim. Phoenix Counseling Services, has a Memorandum of Understanding to provide confidential emotional support services to the offenders at Gaston CC. In addition, a PREA Support Person, could also be made available to provide victim advocate services. Gaston CC has one (1) staff trained as a PREA Support Person (PSP) who links the offender with services of community-based advocates or mental health professionals and provides confidential support to offenders who report sexual abuse and harassment.

Medical staff and mental health staff all report that any sexual abuse victim receives timely and unimpeded access to emergency medical treatment and crisis intervention services. Once medical staff learn of a sexual abuse, they act immediately. Medical staff assess and perform a visual exam on the victim offender for any life-threatening injuries that need immediate treatment prior to the victim offender being transported to the emergency department. Refusals for treatment by the victim offender will be handled in accordance with Health Services Policy. All treatment is documented in the offender's

Non-medical staff (First Responders) who learn of an allegation of sexual abuse are trained to follow the Coordinated Response Plan.

After reviewing agency policy and procedures, staff and outside agency representative interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

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

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

Information or Documents Reviewed:

- NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019)
- NCDPS-Prisons Health Services Policy and Procedure CP 18 (Sexual Abuse, dated 2/2014)
- NCDPS-Prisons Health Services Policy and Procedure CC-8 (After Care Planning for Offenders in Healthcare Services, dated 11/2007)
- Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

· Gaston CC Medical & Mental Health Staff

Findings:

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and Health Services Policy and Procedure CP 18 (Clinical Practice Guidelines) and NCDPS-Prisons Health Services Policy and Procedure CC-8 (After Care Planning for Offenders in Healthcare Services, dated 11/2007) requires that the facility offer medical and mental health care for sexual abuse victims and abusers. When an offender victim is evaluated and treated, it should include follow-up services, treatment plans and referrals for follow-up care upon release, transfer or placement in other facilities. The facility is required to provide such victims with medical and mental health services consistent with the community level of care. The policies require the facilities to offer follow-up treatment that may include screening, including follow-up care for sexually transmitted infections and other communicable diseases and any other counseling or assistance as requested. Requires treatment services to be free of financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Once an investigation has been completed and an offender has been determined to be an offender-on-offender abuser, within sixty (60) days, a mental health clinician will attempt to conduct an evaluation and offer treatment when deemed appropriate.

Interviews with the medical staff confirmed that victims are offered a sexual assault assessment, individual counseling, referral to the psychiatrist, medications as ordered by the physician, laboratory testing for STD and HIV and follow-up. Victims of sexual abuse will be transported to Caromont Regional Medical Center to receive treatment and the physical evidence can be gathered by a certified SAFE/SANE medical examiner. The mental health staff interviews indicated their plan for services would include individual or group treatment, including trauma resolution and PTSD, as well as follow-up. Also, the mental health staff would conduct mental health evaluations of all known offender-on-offender abusers and offer treatment services within fourteen (14) days. Mental health staff also reported that all offenders receive a mental health evaluation during their first few weeks at the facility.

Sexual abuse victims will be considered for referral of continued care at release from custody, in accordance with policy, NCDPS-Prisons Health Services Policy and Procedure CC-8 (After Care Planning for Offenders in Healthcare Services, dated 11/2007).

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.86 Sexual abuse incident reviews Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Gaston Correctional Center Standard Operating Procedure Ch. G .0200 (Sexual Abuse and Harassment, dated 3/10/2020) • Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist Interviews: Gaston CC Warden • Gaston CC PREA Compliance Manager Interview/Associate Warden · Gaston CC Program Director · Gaston CC Investigator · Gaston CC Medical Staff Findings: NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires that a Post Incident Review/sexual abuse incident review for all substantiated and unsubstantiated allegations of sexual abuse. The

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires that a Post Incident Review/sexual abuse incident review for all substantiated and unsubstantiated allegations of sexual abuse. The review is to be completed within thirty (30) days of the conclusion of any sexual abuse investigation. The review process involves staff from upper management officials, investigators, medical or mental health practitioners and the PCM. The review team is tasked with reviewing the situation and 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; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status or perceived status; or gang affiliation; or motivated or otherwise caused by other group dynamics in 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 the different shifts; and assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. Policy also requires completion of a written report of its findings that includes any recommendations for improvement and any reasons recommendations were not implemented.

Members of the Post Incident Review committee at Gaston CC include the Warden, Associate Warden/PCM, Gaston CC Program Director, Gaston CC Medical staff, and the Gaston CC PREA Investigator. During the PIR, a brief summary of the incident is shared, discussion about those things that went well during the process and those that did not. All components of the standard are considered during the PIR with discussion on each. The PCM confirmed there had been zero (0) investigations of alleged staff or offender sexual abuse that occurred in the facility in the past twelve (12) months.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

115.87 **Data collection** Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) NCDPS-Website • 2019 Annual Sexual Abuse Report • 2019 Survey of Sexual Violence • Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) PREA Standards Compliance Checklist Interviews: • Gaston CC PREA Compliance Manager Interview Findings: Review of NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) indicates the policy addresses the standard by requiring collection of accurate, uniform data for every allegation of sexual abuse at every facility under its direct control and also from contractors who house NCDPS offenders using a standardized instrument and set of definitions and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. The agency requires uniform data for every allegation of sexual abuse to be documented in OPUS by all NCDPS facilities. The policy requires that 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

A written summary of an interview with the PREA Director conducted by certified PREA Auditor Dorothy Xanos earlier in the audit cycle was reviewed. The summary review allowed this auditor to verify that the PREA Director ensures the agency maintains, reviews and collects data needed from all available incident-based documents, including reports, investigation files and sexual abuse incident reviews. The data collected was sufficient and allowed the agency to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The information gained is published on the agency website annually.

conducted by the Department of Justice. The agency is required to provide all such data from the previous calendar year to

the US Department of Justice no later than June 30 of each year.

After reviewing agency policy, information gained through the interview with the PREA Coordinator and review of the Annual Reports and SSV, the auditor finds this standard in compliance.

Corrective Action:

115.88 Data review for corrective action Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • 2019 Annual Sexual Abuse Report NCDPS-Website-PREA Information • Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist Interviews: NCDPS PREA Director • Gaston CC PREA Compliance Manager Interview Findings: NCDPS-Prisons Policy F. 3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires the agency to collect and review data in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training by identifying problem areas, taking corrective action and preparing an annual report of its findings and corrective actions for each facility and the agency as a whole. The annual report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in addressing

sexual abuse. The agency redacts specific material from the reports when publication would present a clear and specific threat to facility safety. Annual reports are made available to the public on the NCDPS website.

A written summary of an interview with the PREA Director conducted by certified PREA Auditor Dorothy Xanos earlier in the audit cycle was reviewed. The summary review allowed this auditor to verify that the PREA Director reviews the collected and aggregated data, a comparison is conducted and an assessment of the agency's progress in addressing sexual abuse. The PREA Director is responsible for gaining the signatures of the NCDPS Secretary and ensuring the annual report is placed on the agency website.

After reviewing agency policy, information gained through the interview with the PREA Director and review of additional documentation, the auditor finds this standard compliant.

Corrective Action:

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination:
	Information or Documents Reviewed:
	 NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) 2019 Annual Sexual Abuse Report NCDPS-Website-PREA Information
	Gaston CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) DREA Standards Compliance Charletist
	PREA Standards Compliance Checklist Intervious
	Interviews:
	NCDPS PREA Director
	Findings:
	NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires the agency ensures that data collected of allegations of sexual abuse is securely retained, and makes information readily available to the public through an annual report on its website. Prior to making the report public, personal identifiers should be removed. NCDPS-Prisons policy requires that the sexual abuse data collected be retained for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.
	A written summary of an interview with the PREA Director conducted by certified PREA Auditor Dorothy Xanos earlier in the audit cycle was reviewed. The agency ensures collected data is securely retained in the OPUS or TROI data systems and is there indefinitely. Personal identifiers are removed.
	After reviewing agency policy, information gained through the interview with the PREA Director and review of additional documentation, the auditor finds the facility in compliance with the standard.
	Corrective Action:

115.401 Frequency and scope of audits Auditor Overall Determination: Meets Standard **Auditor Discussion** The following evidence was analyzed in making the compliance determination: Information or Documents Reviewed: • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) NCDPS Website • NCDPS Sexual Abuse Annual Reports • Gaston CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist Interviews: None Findings: The NCDPS Website (NC DPS: Prison Rape Elimination Act) contains PREA audit reports from the first, second and third PREA Audit cycles. The first PREA Audit Cycle was from August 2013-August 2016 with a total of forty-six (46) audits reports being placed on the website. The second PREA Audit Cycle was from August 2016-August 2019 with seventy-seven (77) audit reports being completed. The third PREA Audit Cycle is current and began August 2019-August 2022. There were 14 audits completed the first year of the third PREA Audit Cycle (August 2019-August 2020). The NCDPS has a total of sixtynine (69) facilities (55 prisons, 10 juvenile facilities and 4 community confinement facilities). After completing a comparison,

Gaston CC was one of the facilities scheduled during the first year of PREA Audit Cycle three. While at Gaston CC, the auditor was allowed access to all areas of the facility. The facility provided any documentation this auditor requested without hesitation. The staff and offender interviews were able to be held in a comfortable, private area.

each facility had been audited at least once during the most recent second cycle. The website also contained NCDPS Sexual

During the audit tour, the auditor observed pre-audit notices posted throughout every area of the facility. The notices were posted January 11, 2021 with photos and locations of the posting being sent in an email. The notices included an address of where offenders were permitted to send confidential correspondence to the auditor in the same manner as sending legal mail to the courts or legal.

After reviewing agency policy and procedures, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

Abuse Annual Reports.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination:
	Information or Documents Reviewed:
	NCDPS Website
	Interviews:
	• None
	Findings:
	The auditor reviewed the North Carolina Department of Public Safety (NCDPS) web page at https://www.ncdps.gov/Adult-Corrections/Prison-Rape-Elimination-Act containing the PREA audit reports for both the first and second PREA review cycle. The first PREA audit review cycle had forty-three (43) PREA audit reports completed from August 2013 – August 2016. The second PREA audit review cycle had seventy-seven (77) PREA audit reports completed from August 2016 through August 2019. The third PREA Audit cycle began August 2019 and goes through August 2022. To date, nineteen (19) Final Audit Reports were placed on the website.
	After a review of the agency's website this auditor finds this standard in compliance.
	Corrective Action:
	None

Appendix: Provision Findings			
115.11 (a)	5.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator		
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes	
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes	
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator		
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes	
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes	
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes	
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator		
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes	
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes	
115.12 (a)	Contracting with other entities for the confinement of inmates		
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes	
115.12 (b)	Contracting with other entities for the confinement of inmates		
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes	

115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

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

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

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d) (8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

Protective Custody	
Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
Protective Custody	
Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
Does such an assignment not ordinarily exceed a period of 30 days?	yes
Protective Custody	
If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
Protective Custody	
In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
Inmate reporting	
Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) If the facility restricts access to programs, privileges, education, or work opportunities. If the facility restricts access to programs, privileges, education, or work opportunities.) Protective Custody Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? Does such an assignment not ordinarily exceed a period of 30 days? Protective Custody If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety? If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? Protective Cust

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from 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

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

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

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (I)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unlounded? It should be substantiated to the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agencyfacility is responsible for conducting administrative and criminal investigations.) It should be a substantiated to inform the investigation against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit? Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident 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 against the resident, unless the agency has that the staff member has been indicted on a charge related to sexual abuse against 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 within the f	115.72 (a)	Evidentiary standard for administrative investigations	
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			yes
Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	115.76 (b)	Disciplinary sanctions for staff	
		Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services		
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes	
115.82 (d)	Access to emergency medical and mental health services		
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes	
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes	
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes	
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes	
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na	
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na	
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes	
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes	
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes	
115.86 (a)	Sexual abuse incident reviews		
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes	

115.86 (b)	Sexual abuse incident reviews		
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes	
115.86 (c)	Sexual abuse incident reviews		
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes	
115.86 (d)	Sexual abuse incident reviews		
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes	
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes	
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes	
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes	
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes	
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes	
115.86 (e)	Sexual abuse incident reviews		
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes	
115.87 (a)	Data collection		
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes	
115.87 (b)	Data collection		
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes	
115.87 (c)	Data collection		
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes	
115.87 (d)	Data collection		
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes	
115.87 (e)	Data collection		
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na	
115.87 (f)	Data collection		
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes	

115.88 (a)	Data review for corrective action		
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes	
115.88 (b)	Data review for corrective action		
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes	
115.88 (c)	Data review for corrective action		
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes	
115.88 (d)	Data review for corrective action		
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes	
115.89 (a)	Data storage, publication, and destruction		
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes	
115.89 (b) Data storage, publication, and destruction			
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes	
115.89 (c)	Data storage, publication, and destruction		
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes	
115.89 (d)	Data storage, publication, and destruction		
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes	
115.401 (a)	Frequency and scope of audits		
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes	

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