

PREA Facility Audit Report: Final

Name of Facility: Franklin Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: 06/01/2021

Date Final Report Submitted: 12/24/2021

| Auditor Certification | |
|---|--------------------------------------|
| The contents of this report are accurate to the best of my knowledge. | <input checked="" type="checkbox"/> |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review. | <input checked="" type="checkbox"/> |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. | <input checked="" type="checkbox"/> |
| Auditor Full Name as Signed: Trish Brockman-Bernhards | Date of Signature: 12/24/2021 |

| AUDITOR INFORMATION | |
|-------------------------------------|---------------------------|
| Auditor name: | Brockman-Bernhards, Trish |
| Email: | trishbernards@gmail.com |
| Start Date of On-Site Audit: | 04/15/2021 |
| End Date of On-Site Audit: | 04/16/2021 |

| FACILITY INFORMATION | |
|-----------------------------------|---|
| Facility name: | Franklin Correctional Center |
| Facility physical address: | 5918 NC-39, Bunn, North Carolina - 27508 |
| Facility Phone | |
| Facility mailing address: | P. O. Box 155, Bunn, North Carolina - 27508 |

| Primary Contact | |
|--------------------------|---------------------------|
| Name: | Genethia S Debrow |
| Email Address: | genethia.debrow@ncdps.gov |
| Telephone Number: | 919-496-6119 |

| Warden/Jail Administrator/Sheriff/Director | |
|--|-------------------------|
| Name: | Timothy Mckoy |
| Email Address: | timothy.mckoy@ncdps.gov |
| Telephone Number: | 919-496-6119 |

| Facility PREA Compliance Manager | |
|----------------------------------|---------------------------|
| Name: | Genethia Debrow |
| Email Address: | genethia.debrow@ncdps.gov |
| Telephone Number: | O: (919) 410-3476 |

| Facility Health Service Administrator On-site | |
|---|---------------------------|
| Name: | Janice Holloway |
| Email Address: | janice.holloway@ncdps.gov |
| Telephone Number: | 919-496-6119 |

| Facility Characteristics | |
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| Designed facility capacity: | 480 |
| Current population of facility: | 408 |
| Average daily population for the past 12 months: | 428 |
| Has the facility been over capacity at any point in the past 12 months? | No |
| Which population(s) does the facility hold? | Males |
| Age range of population: | 20+ |
| Facility security levels/inmate custody levels: | Medium |
| Does the facility hold youthful inmates? | No |
| Number of staff currently employed at the facility who may have contact with inmates: | 175 |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 10 |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility: | 0 |

| AGENCY INFORMATION | |
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| 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: | 9197332126 |

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

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

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

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

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| 1. Start date of the onsite portion of the audit: | 2021-04-15 |
| 2. End date of the onsite portion of the audit: | 2021-04-16 |

Outreach

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| 10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| a. Identify the community-based organization(s) or victim advocates with whom you communicated: | Safe Space Domestic Violence and Sexual Assault Program staff Maria Parham Franklin Hospital SAFE/SANE Just Detention International RAINN (the Rape, Abuse & Incest National Network) |

AUDITED FACILITY INFORMATION

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| 14. Designated facility capacity: | 480 |
| 15. Average daily population for the past 12 months: | 428 |
| 16. Number of inmate/resident/detainee housing units: | 5 |
| 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees? | <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility) |

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

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

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| 36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit: | 412 |
| 38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit: | 1 |
| 39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit: | 2 |
| 40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit: | 0 |

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| 41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit: | 0 |
| 42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit: | 0 |
| 43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit: | 4 |
| 44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit: | 0 |
| 45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit: | 20 |
| 46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit: | 1 |
| 47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit: | 0 |
| 48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations): | The facility reported that NCDPS has a specialized facility for offenders who are LEP, thus no LEP offenders are housed at the facility. Offenders were not only selected based on their particular targeted status but also on their assigned housing unit to ensure that all targeted interviews were not from one assigned area. |
| Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit | |
| 49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit: | 175 |
| 50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees: | 74 |
| 51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees: | 3 |
| 52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit: | Staff present at the facility during the onsite portion of the audit included custody personnel, counselors, training staff, contract staff that work at the Sign Shop, security and non-security first responders, medical staff, administrative staff (human resources) and staff who supervise offenders the segregation unit. Staff onsite were representative of various age groups, race, rank, correctional experience level and education level. |
| INTERVIEWS | |
| Inmate/Resident/Detainee Interviews | |

| Random Inmate/Resident/Detainee Interviews | |
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| 53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed: | 22 |
| 54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply) | <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None |
| 55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse? | The interviewed offenders were selected from the four (4) general population housing units as well as the one (1) Restrictive Housing Unit. The auditor requested that the facility provide an offender roster that separated the population by housing unit. The roster provided the offenders gender, age, race, sentence structure, population status and some specialized items to note such as threat level, gang affiliation and conflicts. |
| 56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation): | The auditor attempted to interview four offenders from each housing unit, including restrictive housing. |
| Targeted Inmate/Resident/Detainee Interviews | |
| 58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed: | 15 |
| As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0". | |
| 59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol: | 0 |

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| <p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>1</p> |
| <p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>2</p> |
| <p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>0</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>The facility provided information that LEP identified offenders were not assigned to the facility. After gaining clarification from staff, they explained that it was those offenders that speak no English are assigned. There are however offenders that speak English as well as Spanish but prefer to converse in one or the other language.</p> |
| <p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>0</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>Through interviews with medical staff as well as other offenders, this auditor was able to verify there were no offenders assigned to Franklin CC that were Deaf or hard of hearing.</p> |
| <p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>0</p> |

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| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>The auditor asked multiple staff to identify the top three offenders who they thought were Limited English proficient. When the auditor interviewed these individuals, they were able to converse in a manner that the auditor felt they understood what the auditor was asking as well as the auditor being able understand them clearly. These individuals also confirmed individuals who spoke broken English and had trouble communicating in the English language were not assigned to Franklin CC.</p> |
| <p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p> | <p>3</p> |
| <p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p> | <p>1</p> |
| <p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p> | <p>7</p> |
| <p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p> | <p>1</p> |
| <p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p> | <p>0</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>Offenders interviewed as reporting sexual abuse all reported they were not segregated but separate via dorm assignment from the alleged perpetrator.</p> |

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| 70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews): | The auditor did interview more LGBTI offenders than required due to no youthful offenders assigned to the facility as well as segregated offenders. |
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Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

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| 71. Enter the total number of RANDOM STAFF who were interviewed: | 20 |
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| 72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply) | <input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None |
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| If "Other," describe: | The auditor interviewed both male and female staff as well as supervisory, administrative and line staff. |
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| 73. Were you able to conduct the minimum number of RANDOM STAFF interviews? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
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| 74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation): | The auditor interviewed a variety of staff from a cross section of work assignments, supervisors and line staff, males and females and staff of various races. |
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Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

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| 75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors): | 14 |
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| 76. Were you able to interview the Agency Head? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
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| 77. Were you able to interview the Warden/Facility Director/Superintendent or their designee? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
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| 78. Were you able to interview the PREA Coordinator? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
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| <p>79. Were you able to interview the PREA Compliance Manager?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p> |
| <p>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</p> | <p><input checked="" type="checkbox"/> Agency contract administrator</p> <p><input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</p> <p><input type="checkbox"/> Line staff who supervise youthful inmates (if applicable)</p> <p><input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable)</p> <p><input checked="" type="checkbox"/> Medical staff</p> <p><input checked="" type="checkbox"/> Mental health staff</p> <p><input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches</p> <p><input checked="" type="checkbox"/> Administrative (human resources) staff</p> <p><input checked="" type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</p> <p><input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations</p> <p><input type="checkbox"/> Investigative staff responsible for conducting criminal investigations</p> <p><input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness</p> <p><input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation</p> <p><input checked="" type="checkbox"/> Staff on the sexual abuse incident review team</p> <p><input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation</p> <p><input checked="" type="checkbox"/> First responders, both security and non-security staff</p> <p><input checked="" type="checkbox"/> Intake staff</p> <p><input checked="" type="checkbox"/> Other</p> |

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| <p>If "Other," provide additional specialized staff roles interviewed:</p> | <p>The auditor was able to interview two staff who were identified and trained by the NCDPS as PREA Support Persons. These individuals are trained to provide advocacy services to offender victims. Staff from the Safe Space Domestic Violence and Sexual Assault Program as well as the Maria Parham Franklin Hospital SANE representative were interviewed and verified that no offenders from Franklin CC had placed calls, requested advocacy services or were provided a forensic examination at their facilities.</p> |
| <p>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |
| <p>a. Enter the total number of VOLUNTEERS who were interviewed:</p> | <p>4</p> |
| <p>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</p> | <p><input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input checked="" type="checkbox"/> Other</p> |
| <p>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |
| <p>a. Enter the total number of CONTRACTORS who were interviewed:</p> | <p>3</p> |
| <p>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p> | <p><input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input checked="" type="checkbox"/> Other</p> |
| <p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p> | <p>Specialized staff were selected and interviewed based on their subject matter expertise in various areas. Interviews with volunteers were conducted via telephone due to the current restrictions in place due to the Covid 19 pandemic. One religious volunteer, one Narcotics Anonymous volunteer, one Release/Re-Entry services volunteer and one Alcoholics Anonymous volunteer were interviewed. Three staff from the Sign Shop were also interviewed. These individuals are employed by Prison Industries and are considered contracted staff.</p> |

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: discussions related to testing critical functions are expected to be included in the relevant Standard-specific overall determination narratives.

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

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| 85. Reviewing/examining all areas of the facility in accordance with the site review component of the audit instrument? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
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| 86. Testing and/or observing all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., intake process, risk screening process, PREA education)? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
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| 87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
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| 88. Informal conversations with staff during the site review (encouraged, not required)? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
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| 89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations). | <p>A complete guided tour of the entire facility was conducted and included visiting the main gatehouse, main administrative building, Clothes House, Maintenance, Operations building, Kitchen, Medical, Multi-Purpose/Recreation building, Restrictive Housing, Sign Shop and all general population Housing Units.</p> <p>The auditor was allowed unimpeded access to any area of the facility.</p> <p>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.</p> <p>Franklin CC has sixty-three (63) cameras. Camera placement was internal and external included stationary and PTZ cameras. The cameras are monitored in the Operations Room and have an approximate 30-day recording capability.</p> <p>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.</p> |
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Documentation Sampling

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

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| <p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
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| <p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p> | <p>The auditor reviewed the "Daily Narrative" forms containing PREA related documentation (unannounced rounds, PREA related discussions held at shift briefings & cross gender announcements). Employee personnel files were maintained in the Human Resources Office. The criminal background records check documentation was maintained in the employee personnel files.</p> <p>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.</p> <p>Training files were reviewed on the same staff.</p> <p>The auditor reviewed documentation from eight (8) offender files. Some documentation in the files included offender education participation acknowledgement forms. Intake Screening information and PREA allegation and investigation information was observed on the agency OPUS computer data collection system.</p> <p>The case management staff made very precise contact note entries concerning an offender's arrival date at the facility as well as the Orientation the offenders attended.</p> <p>The auditor reviewed two electronic medical and mental health files. These files are electronically maintained. The Auditor was provided with information on where medical or mental health staff would make entries in the electronic record. There were no medical or mental health files to review that were based upon sexual abuse investigations.</p> |
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

| | # of sexual abuse allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|--------------------------------------|-------------------------------|------------------------------|------------------------------------|---|
| Inmate-on-inmate sexual abuse | 5 | 0 | 5 | 0 |
| Staff-on-inmate sexual abuse | 6 | 0 | 6 | 0 |
| Total | 11 | 0 | 11 | 0 |

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

| | # of sexual harassment allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|---|------------------------------------|------------------------------|------------------------------------|---|
| Inmate-on-inmate sexual harassment | 4 | 0 | 4 | 0 |
| Staff-on-inmate sexual harassment | 5 | 0 | 5 | 0 |
| Total | 9 | 0 | 9 | 0 |

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

| | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|-------------------------------|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual abuse | 0 | 1 | 9 | 1 |
| Staff-on-inmate sexual abuse | 0 | 0 | 0 | 0 |
| Total | 0 | 1 | 9 | 1 |

Sexual Harassment Investigation Outcomes

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

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

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

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

| | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|------------------------------------|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual harassment | 0 | 2 | 6 | 0 |
| Staff-on-inmate sexual harassment | 0 | 1 | 0 | 0 |
| Total | 0 | 3 | 6 | 0 |

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

| | |
|---|---|
| 98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled: | 20 |
| 99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? | <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files) |

Inmate-on-inmate sexual abuse investigation files

| | |
|--|----|
| 100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled: | 11 |
|--|----|

| | |
|---|--|
| 101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations? | <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) |
| 102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations? | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) |
| Staff-on-inmate sexual abuse investigation files | |
| 103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled: | 0 |
| 104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations? | <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files) |
| 105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations? | <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files) |
| Sexual Harassment Investigation Files Selected for Review | |
| 106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled: | 9 |
| 107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files) |
| Inmate-on-inmate sexual harassment investigation files | |
| 108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled: | 8 |

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|--|--|
| <p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p> |
| <p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p> |
| <p>Staff-on-inmate sexual harassment investigation files</p> | |
| <p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p> | <p>1</p> |
| <p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p> |
| <p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p> |
| <p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p> | <p>No text provided.</p> |
| <p>SUPPORT STAFF INFORMATION</p> | |
| <p>DOJ-certified PREA Auditors Support Staff</p> | |
| <p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> |
| <p>Non-certified Support Staff</p> | |
| <p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> |

AUDITING ARRANGEMENTS AND COMPENSATION

| | |
|---|---|
| 121. Who paid you to conduct this audit? | <p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input checked="" type="radio"/> Other</p> |
| Identify the name of the third-party auditing entity | DX Consultants LLC |
| Identify the entity by name: | DX Consultants |

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.

| | |
|--------|--|
| 115.11 | 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)
- NCDPS-Prisons Policy F.1600 (Management of Security Posts, dated 8/12/2019)
- NC General Statute 14-27.7 Poster (Intercourse and sexual offenses with certain victims; consent no defense)
- NCDPS-Prisons Policy B.200 (Offender Discipline Procedure, dated 8/10/2018)
- NCDPS-Prisons Organization Chart (dated 2/9/2021)
- NCDPS website
- NCDPS-Prisons form OPA-A16, Designation of PREA Compliance Manager (dated 7/13/2020)
- Franklin CC PREA Audit : Pre-Audit Questionnaire (Prisons and Jails)
- PREA Standards Compliance Checklist

Interviews:

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

Findings:

This auditor reviewed the North Carolina DPS-Prisons policy that addresses the department's support of the Prison Rape Elimination Act. The Franklin Correctional Center (Franklin CC), 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 clearly outlines the agency'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. NDPS-Prisons Policy B.200 (Offender Discipline Procedure, dated 8/10/2018) details sanctions that may be assessed to offenders found guilty of sexual assaultive behavior.

NCDPS-Prisons 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 in-service 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 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 Franklin Correctional Center has appointed the Captain as the current PCM. The PREA Compliance Manager at the Franklin Correctional Center addresses all PREA concerns that occur throughout the facility. She 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 Franklin Correctional Center, this auditor believes the facility "meets" this standard.

Corrective Action:

None

| | |
|--------|---|
| 115.12 | Contracting with other entities for the confinement of inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Memorandum of Agreement with Center for Community Transitions • Memo from NCDPS PREA Director, dated 10/02/2019 • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • PREA Director (Coordinator) • Agency Contract Administrator <p>Findings:</p> <p>This standard is Not Applicable to the Franklin Correctional Center specifically as Franklin 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.</p> <p>Based on interviews, documentation provided and observation of operations at the Franklin Correctional Center, this auditor believes the facility "meets" this standard.</p> <p>Corrective Action:</p> <p>None</p> |

| | |
|--------|---|
| 115.13 | Supervision and monitoring |
| | <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • North Carolina General Statute 143B-709 Security Staffing • 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) • Franklin CC Staff Plan Analysis PREA Review, dated 8/24/2021 • Post Adjustment tracking form 2021 • Prisons Post Chart Review for Franklin CC, dated 8/11/2021 • Franklin CC Daily Shift Narratives documenting Unannounced Rounds covering multiple posts/shifts • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC Interim Warden • PREA Director (Coordinator) • Intermediate or Higher-Level Staff • Franklin CC PREA Compliance Manager <p>Findings:</p> <p>Review of the North Carolina State Statute 143B-709, NCDPS-Prisons Policy F .1600 (Management of Security Posts, dated 8/12/2019) 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.</p> <p>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 August 2021. The August 2021 proposed staffing plan was also submitted. Interviews with the Interim 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.</p> <p>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.</p> <p>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. Staffing on essential posts is maintained. Unannounced rounds are clearly documented on the Daily Shift Narratives of each housing unit/areas and over multiple shifts and rotations. 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 and documented on the Daily Shift Narrative. This auditor's review of logs from all areas confirmed unannounced rounds were being made by higher level supervisory staff on all shifts.</p> <p>State statute requires a staffing analysis every 3 years, while the agency policy requires an annual review of the staffing plan. Facility Post Charts are developed in accordance with the staffing plan and reviewed annually. Deviations from the staffing plan are required to be documented. The auditor was initially unable to find the facility in compliance with this standard as adequate documentation was not provided that would indicate staffing at the facility is reviewed. Documentation has since been provided indicating the annual review of the facility staffing plan as well as facility post charts indicating staffing levels are adequate and ensure high levels of safety and security.</p> <p>After thorough review of policies, SOPs, other supporting documents, interviews conducted, and observations, this auditor has determined the agency and the facility has now met the requirements of this standard based on the above information.</p> <p>Corrective Action:</p> <p>None.</p> |

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| 115.14 | Youthful inmates |
| | <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Franklin CC Facility Offender Roster • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC Interim Warden • Franklin CC PREA Compliance Manager • Intake staff <p>Findings:</p> <p>The review of NDCPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment Policy, 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.</p> <p>While youthful offenders are not assigned to the Franklin CC, the agency does provide specialized housing for youthful offenders at other NCDPS-Prison 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.</p> <p>Franklin Correctional Center does not house youthful offenders. Offenders housed at Franklin CC are 21 years old or older. Interviews with the Interim Warden, Intake staff and the PREA Compliance Manager confirmed there are no youthful offenders housed at Franklin CC as there are no offenders under the age of 18 able to be assigned to Franklin CC. Facility offender rosters also confirmed there are no offenders under the age of 21 assigned to Franklin CC. The youngest offender assigned and interviewed was 21 years old.</p> <p>After thorough review of policies, 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.</p> <p>Corrective Action:</p> <p>None</p> |

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| 115.15 | Limits to cross-gender viewing and searches |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F .0100 (Operational Searches, dated 8/12/2019) • NCDPS-Prisons Policy F .1600 (Management of Security Posts, dated 8/12/2019) • NCDPS-Prisons Policy B.0300 (Offender Conduct Rules, dated 8/12/2019) • NCDPS Safe Search Practices Training Curriculum, dated 07/01/2019 • Franklin CC SOP, Gender Specific Post, dated 4/15/2021 • Training Records for Franklin CC staff for Safe Search Practices Training • Cross Gender Announcement & Acknowledgement forms (OPA T.30.pdf) • Cross Gender Announcement Poster • Cross Gender Announcement Memo 2021 Update for Prisons • Daily Shift Narratives (1A, 1B, 2A & 2B shifts) • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC PREA Compliance Manager • Random sample of Staff • Random sample of Offenders <p>Findings:</p> <p>Review of the NCDPS-Prisons Policy F .1600 (Management of Security Posts, dated 8/12/2019) and NCDPS-Prisons Policy F .0100 (Operational Searches, dated 8/12/2019) prohibits any cross-gender strip search or visual body cavity searches by staff of the opposite gender. 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. NCDPS-Prisons Policy B.0300 (Offender Conduct Rules, dated 8/12/2019) also requires offenders to cover themselves appropriately throughout specified areas of the facility. B.0300 also requires that offenders not be supervised by officers of the opposite gender while showering or in the toilet area unless appropriate privacy screening is provided to obscure from view the offender's breasts, genitalia and buttocks. Staff of the opposite gender are also required to announce their presence when entering a housing area and document such announcement on the shift log. An announcement over the public announcement system is also made at the beginning of each shift indicating that staff of the opposite gender will be working in certain work areas.</p> <p>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.</p> <p>Offender interviews indicated that offenders felt they had the 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 Dorm 1 (A & B), Dorm 2 (C, D, E & F), Dorm 3 (G, H, I, & J) and Dorm 4 (K, L, M, & N) did not have the ability to shower, perform bodily functions and change their clothing without non-medical staff of the opposite gender viewing them. Placement of shower curtains and partial door coverings allowed for privacy of toilet areas and shower areas if a staff member were standing at the entrance of the bathroom area but each living area had an opening by the staff desk area where any staff, including staff of the opposite gender could see an offender in a state of undress and even showering. Since the audit, modifications have been made by the facility to these openings to obscure staff's vision of the shower and bathroom areas. The shower placements in segregation were located by the entrance/exit into two of the wings and were open for staff of the opposite gender to view. The door design was bars and there was no method available for an offender to take a shower without staff of the opposite gender seeing them in a state of undress and/or naked and in full view. Coverings have since been created to ensure staff were not able to see an offender while showering.</p> <p>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</p> |

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 indicated that not all staff had completed the Safe Search training for 2020. Additional training records were provided after the audit that indicate that all staff at Franklin CC completed the required Safe Search 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 also 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 staff are not allowed to 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, training curriculum, additional training records and visually observing the showers and bathroom areas of the facility, this auditor now finds this standard in compliance.

Corrective Action:

None

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|--------|--|
| 115.16 | Inmates with disabilities and inmates who are limited English proficient |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • 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) • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Intake Staff • Franklin CC PREA Compliance Manager • Random sample of Staff • Inmates identified with Disabilities or who are LEP <p>Findings:</p> <p>Review of the NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), 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.</p> <p>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.</p> <p>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.</p> <p>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 Franklin 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. Individuals that are not English-proficient are not transferred to Franklin CC thus the facility does not have a Spanish-version</p> |

Offender Orientation Packet.

During the on-site visit, one (1) physically disabled (ADA standard) offender, zero (0) limited English proficient offenders as there were no LEP offenders among the population and one (1) offender with cognitive disabilities were identified, interviewed and reported that they remembered being asked question 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, 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. Some staff reported that if an offender was LEP, he would more than likely be assigned to an LEP facility.

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

Corrective Action:

None

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| 115.17 | Hiring and promotion decisions |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1086 297">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1461 734" style="list-style-type: none"> • 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 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 • Franklin Correctional Center Background Check Tracking Log • NEO Manual • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="240 768 363 795">Interviews:</p> <ul data-bbox="284 846 1059 873" style="list-style-type: none"> • Administrative Specialist I (responsible for Human Resources duties onsite) <p data-bbox="240 907 347 934">Findings:</p> <p data-bbox="240 963 1490 1451">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. Franklin Correctional Center performs criminal background records checks on any potential new employee and contractor as well as individuals seeking promotion. Policy also requires background records checks be 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.</p> <p data-bbox="240 1485 1453 1615">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.</p> <p data-bbox="240 1648 1481 1906">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 fifty-one (51) individuals were hired who may have contact with offenders. In addition to employee applicants, seven (7) criminal background checks were completed on contracted staff over the past twelve (12) months. 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.</p> <p data-bbox="240 1939 1477 2161">The document utilized to track when current employees and contractors are due for the five (5) year re-check of criminal records was provided. The process to initiate the five (5) year criminal records check was explained. There was no indication that the five (5) year criminal records check were being completed. A selection of five (5) employee HR files were reviewed. There are contract staff employed by the facility and a sample of their HR files reviewed. Three (3) of the five (5) employee files reviewed also contained appropriate administrative paperwork for promotional purposes. It was reported 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</p> |

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, this auditor initially did not find this standard to be in compliance because the facility was not able to provide documentation that the 5-year criminal history check had been completed on current employees and contract staff prior to and during the on-site audit. Franklin CC staff have since conducted the required 5-year criminal history checks and provided an updated tracking form indicating such. With the additional information provided, this auditor finds this standard in compliance.

Corrective Action:

None

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| 115.18 | Upgrades to facilities and technologies |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1289 504" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Franklin CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="242 533 363 562">Interviews:</p> <ul data-bbox="284 611 716 640" style="list-style-type: none"> • Franklin CC PREA Compliance Manager <p data-bbox="242 669 347 698">Findings:</p> <p data-bbox="242 725 1481 920">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.</p> <p data-bbox="242 949 1490 1245">The Franklin CC did have modifications/construction to its existing facility since August 20, 2012 or since the last PREA Audit in 2018. The facility entrance/exit electronic sallyport was created. Franklin CC has 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. The facility installed a new digital video recorder and cameras had to be replaced when damaged in a lightning storm. Presently Franklin CC has adequate cameras installed in living units and strategically placed in areas. Monitors are available in the Main Control. The auditor viewed the camera locations from the control rooms and observed that the viewing capability protects offenders against being viewed by staff of the opposite gender. Franklin CC has sixty-three (63) cameras. Camera placement was internal and external included stationary and PTZ cameras. The cameras are monitored in supervisory offices and have an approximate 30-day recording capability.</p> <p data-bbox="242 1274 1481 1337">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.</p> <p data-bbox="242 1366 440 1395">Corrective Action:</p> <p data-bbox="242 1424 300 1453">None</p> |

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| 115.21 | Evidence protocol and forensic medical examinations |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • North Carolina General Statute 143B-1200 (Assistance Program for Victims of Rape and Sexual Offenses) • North Carolina General Statute 114-12 (State Bureau of Investigation created; powers and duties) • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS Office of Special Investigations Policy DPS-SI-100 (OSI Authority to Conduct Investigations, dated 3/25/2019) • NCDPS Training Curriculum, Specialized Investigations: Sexual Abuse and Harassment, dated 1/31/2013 • Memorandum of Understanding between Franklin CC and Maria Parham Franklin Hospital, dated 1/8/2021 • Agreement between Bunn Police Department and Franklin CC • Agreement between Franklin County Sheriff's Department and Franklin CC • NCDPS-Prisons, Health Services Policy & Procedures, Policy # CP-18 (Sexual Abuse, dated 2/2014) • NCDPS PREA Evidence Chain of Custody Form • Form OPA I20 Incident Scene Tracking Log • Memorandum of Understanding with Safe Space Domestic Violence and Sexual Assault Program, dated 1/24/2019 • Memorandum to LEO, dated 9/23/2019 • PREA Support Person Training Modules on LMS • Designation of PREA Support Persons, dated 3/16/2021 • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC's PREA Compliance Manager • SANE from Maria Parham Franklin Hospital • Safe Space Domestic Violence and Sexual Assault Program representative • Staff designated as PREA Support Person • Random sample of staff <p>Findings:</p> <p>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), 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 specialized training that provides the skills and knowledge necessary to investigate Sexual Abuse and Harassment allegations that are made. These investigators are also required to complete the same PREA training (SAH 101 and SAH 102) courses that all staff are required to complete. NCDPS-Prisons investigators only conduct administrative investigations. The Bunn Police Department or Franklin County Sheriff's Department would conduct an investigation involving potential criminal allegations. 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 Memorandum of Understanding is in place between the Bunn Police Department or Franklin County Sheriff's Department and the Franklin Correctional Center for completing PREA investigations that are potential criminal cases.</p> <p>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.</p> <p>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 currently utilizes the Maria Parham Franklin Hospital to conduct all forensic exams. An interview with the SANE at the Maria Parham Franklin Hospital indicated they are responsible for conducting all</p> |

forensic exams from Franklin 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 Franklin CC. Any evidence collected from a forensic exam is sent to the state's crime lab. Maria Parham Franklin Hospital has a SANE on call after normal operating hours.

The facility was successful in securing a Memorandum of Understanding with a victim advocacy services from a rape crisis center for potential sexual assault victims. A MOU is in place with the Safe Space Domestic Violence and Sexual Assault Program, dated 01/24/2019. The Safe Space Domestic Violence and Sexual Assault Program 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 information from the Safe Space Domestic Violence and Sexual Assault Program during their orientation. A telephonic interview was held with a representative from the Safe Space Domestic Violence and Sexual Assault Program. She indicated there had been no calls from offenders assigned to Franklin 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. Franklin CC currently has designated four (4) staff. These staff were 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 Franklin CC.

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. It was noted in the memorandum "that it is the desire of the NCDPS that all assisting law enforcement entities also adhere to listed requirements to include offering all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by SAFEs or SANEs where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs and SANEs."

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

Corrective Action:

None

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| 115.22 | Policies to ensure referrals of allegations for investigations |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS Website • Investigation packets • Memorandum from Commissioner of Division of Adult Corrections and Juvenile Justice (dated September 23, 2019) to the North Carolina Sherriff's Association • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC PREA Investigator • Franklin CC Interim Warden and Associate Warden <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) 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 or State Bureau of Investigations (SBI) for investigation and consideration for criminal prosecution. Franklin CC staff assigned to investigate allegations of sexual abuse or sexual harassment are required to attend the 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 Bunn Police Department, Franklin County Sheriff's Department or the State Bureau of Investigations (SBI). A Mutual Aid Agreement is in place with the Bunn Police Department, Franklin County Sheriff's Department and the Franklin Correctional Center for completing all PREA investigations that are potential criminal cases. The Bunn Police Department and Franklin County Sheriff's Department provide investigative services on a 24-hour basis for allegations of sexual abuse has the legal authority to conduct criminal investigations in the facility.</p> <p>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. The Auditor reviewed the North Carolina Department of Public Safety website. The NCDPS website includes a link to access the agency's Offender Sexual Abuse and Sexual Harassment policy. The policy includes the agency's responsibilities while investigating allegations of sexual abuse and sexual harassment. The policy informs all allegations that appear to be criminal in nature are referred to the local law enforcement agency. The public is informed of the agency's zero-tolerance towards sexual abuse and sexual harassment.</p> <p>Franklin CC reported twenty-one (21) allegations of sexual abuse and sexual harassment resulting in an administrative investigation in the past twelve (12) months. There was one (1) allegation of sexual abuse and sexual harassment referred for criminal investigation in the past twelve (12) months. None of which were substantiated. The PCM tracks all of the sexual abuse and sexual harassment investigations at the facility.</p> <p>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 Interim 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 Bunn Police Department, Franklin County Sheriff's Department or SBI. The facility investigator acts as a liaison with outside investigator as well as keeping the Warden</p> |

updated on the progress of the sexual abuse investigation.

No Department of Justice component is responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in the Franklin Correctional Center.

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:

None

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| 115.31 | Employee training |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1086 297">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 644 358">Information or Documents Reviewed:</p> <ul data-bbox="280 409 1289 801" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Policy A.0900 (Employee Training, dated 1/7/2021) • New Employee Orientation Manual (June 6/25/2020) • NCDPS PREA: Sexual Abuse and Sexual Harassment 101 Training Curriculum (rev. 7/1/2019) • NCDPS PREA: Sexual Abuse and Sexual Harassment 201 Training Curriculum (rev. 7/1/2018) • NCDPS PREA: Staff and Offender Relationships Training Curriculum (rev 7/01/2019) • Learning Management Systems Instructions • Franklin CC Staff Training Records • Staff PREA Informational Poster • OPA-T10 Form-PREA Orientation Acknowledgment Form • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="240 835 363 862">Interviews:</p> <ul data-bbox="280 913 552 940" style="list-style-type: none"> • Random sample of Staff <p data-bbox="240 974 347 1001">Findings:</p> <p data-bbox="240 1028 1485 1391">In accordance with the NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and NCDPS-Prisons Policy A.0900 (Employee Training, dated 1/7/2021) require that all new employees should 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.</p> <p data-bbox="240 1424 1485 1615">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 that were reviewed. 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.</p> <p data-bbox="240 1648 1485 1906">All staff receive Sexual Abuse and Harassment 101 refresher training every two years and Sexual Abuse and Harassment 201 refresher information during the alternate years 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. Upon completion of courses staff acknowledge their completion through an electronic signature or completing the required test or course evaluation.</p> <p data-bbox="240 1939 1485 2029">After reviewing agency policy and procedures, staff interviews, and observations made during the onsite portion of the audit there is sufficient evidence to find the facility in compliance. The auditor was provided updated training records for staff indicating completion of the PREA SAH-101 and PREA SAH-201 training by Franklin CC staff.</p> <p data-bbox="240 2063 440 2089">Corrective Action:</p> <p data-bbox="240 2123 300 2150">None</p> |

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| 115.32 | Volunteer and contractor training |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1461 734" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • PREA Sexual Abuse and Harassment 101 Training Curriculum, dated 7/1/2019 • Volunteer PREA Brochure • PREA Information for Person (s) with Direct and Indirect Contact with Offenders Acknowledgement Forms • Volunteers Training Packets-that include Volunteer Application, Volunteer Training Acknowledgement Checklist, Volunteer Orientation/Training Information Packet, Undue Familiarity Guidelines, Non-Disclosure Agreement, PREA form OPA-T10 • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="242 766 363 795">Interviews:</p> <ul data-bbox="284 846 675 875" style="list-style-type: none"> • Random Volunteers and Contractors <p data-bbox="242 904 347 934">Findings:</p> <p data-bbox="242 958 1485 1391">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), 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 as well as signing the Volunteer Orientation Form indicating completion of the full Orientation Program. The facility reported in its PAQ that (74) volunteers and (10) contract staff have been trained in agency policies and procedures regarding sexual abuse and sexual harassment prevention, detection and response policies and procedures. Due to the recent Covid 19 restrictions, there has been no volunteer trainings conducted over the last 12 months so several volunteers/contractors have expired statuses but as soon as the facility is able to, Volunteer Orientation and training will begin again. Interviews with volunteers/contractors indicated they had received training on their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response.</p> <p data-bbox="242 1420 1485 1783">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. Telephonic interviews with one (1) each Religious volunteer, Narcotics Anonymous, Release/Re-Entry Services and Alcoholics Anonymous were conducted. These volunteers all confirmed they completed the Sexual Abuse and Harassment 101 training and attended the Volunteer Orientation. They also openly shared their knowledge about NCDPS zero tolerance and their duty to report sexual abuse and harassment.</p> <p data-bbox="242 1812 1461 1872">After reviewing agency policy and procedures, staff/volunteer interviews, documentation and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.</p> <p data-bbox="242 1901 440 1930">Corrective Action:</p> <p data-bbox="242 1960 300 1989">None</p> |

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| 115.33 | Inmate education |
| | <p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1310 801" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Offender PREA Brochure (English and Spanish, dated 2/04/2014) • Translation and Interpretation Services Contract for period Oct 7, 2019 thru March 14, 2022 • Franklin CC Orientation • Offender PREA Education Acknowledgement Form (English and Spanish Versions) • Education Upon Transfer Email (dated 8/2/2013) • Ways to Report Poster • External Reporting Agency (Forgiven Ministries) Memo from PREA Director, dated 6/08/2018 • Examples of Franklin CC Transfer List with Offender PREA and Orientation Acknowledgement forms • Offender Records Files reviewed on site • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="240 833 363 860">Interviews:</p> <ul data-bbox="284 911 604 972" style="list-style-type: none"> • Orientation Staff • Random sample of Offenders <p data-bbox="240 1003 347 1030">Findings:</p> <p data-bbox="240 1061 1437 1218">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires 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. The Pre-Audit Questionnaire indicates that there were (574) offenders all of which received education on PREA's zero-tolerance policy and reporting methods for sexual abuse and sexual harassment incidents.</p> <p data-bbox="240 1249 1485 1615">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. Within 30 days of the offender's arrival at Franklin CC, a comprehensive education orientation is provided again to offenders by Case Management Staff in the Multi-purpose Building. 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. The facility orientation is in written and video formats. Upon completion of the comprehensive education, all offenders sign the Offender Acknowledgement Form acknowledging they attended PREA Orientation. The offender receives a copy of the Offender Acknowledgement Form while the original is maintained in the Offender Records File. Case Management staff also make a notation in the offender's Case Manager Note section in the OPUS system.</p> <p data-bbox="240 1646 1485 1839">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. Covid 19 has delayed some participants face to face contact education but as soon as possible after being released from quarantine or isolation status, the appropriate conversations are held. PREA posters were highly visible in all areas of the facility and information was in the Orientation Booklet all offenders are all provided.</p> <p data-bbox="240 1870 1461 1930">After reviewing agency policy and procedures, staff and offender interviews, and documentation provided this auditor finds this standard in compliance.</p> <p data-bbox="240 1962 440 1989">Corrective Action:</p> <p data-bbox="240 2020 304 2047">None</p> |

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| 115.34 | Specialized training: Investigations |
| | <p data-bbox="242 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 273 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 331 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1465 636" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons PREA: Sexual Abuse and Sexual Harassment Investigations for the Office of Special Investigations curriculum, dated 7/01/2017 • OPUS Incident Reporting Lesson Plan: PREA Investigation (March 2011) • NCDPS Specialized Investigations: Sexual Abuse and Harassment Lesson Plan, dated 1/31/2013 • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="242 667 363 694">Interviews:</p> <ul data-bbox="284 745 612 772" style="list-style-type: none"> • Franklin CC Investigative Staff <p data-bbox="242 804 347 831">Findings:</p> <p data-bbox="242 860 1469 1055">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) 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.</p> <p data-bbox="242 1084 1485 1379">The NCDPS Specialized Investigations: Sexual Abuse and Harassment training lesson plans were 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 are currently five (5) staff currently assigned to the Franklin CC who have completed the NCDPS PREA Specialized Investigations: Sexual Abuse and Harassment training. Training records for the five (5) trained investigators was provided and verified completion of the required specialized training at various dates as well as completing their required annual PREA training. Interviews with the investigative staff 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.</p> <p data-bbox="242 1408 1481 1570">In accordance with the NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) 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 Bunn Police Department, Franklin County Sheriff's Department or State Bureau of Investigations for further investigation and determination of criminal charges.</p> <p data-bbox="242 1599 1485 1659">After reviewing agency policy and procedures, staff interviews, review of investigative packets and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.</p> <p data-bbox="242 1691 440 1718">Corrective Action:</p> <p data-bbox="242 1749 300 1776">None</p> |

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| 115.35 | Specialized training: Medical and mental health care |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 644 358">Information or Documents Reviewed:</p> <ul data-bbox="282 409 1418 568" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Sexual Abuse and Sexual Harassment Medical and Mental Health Response Training Power Point, dated 2012 • Training records for Franklin medical and mental health staff • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="242 598 363 627">Interviews:</p> <p data-bbox="242 656 644 685">Medical and Mental Health Practitioners</p> <p data-bbox="242 714 347 743">Findings:</p> <p data-bbox="242 772 1469 1032">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires medical and mental health care practitioners to complete the mandated PREA Sexual Abuse and Sexual Harassment 101 and 201 training required for all NCDPS-Prisons staff. 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. The Sexual Abuse and Sexual Harassment Medical and Mental Health Response Training Curriculum covers all components of the PREA Standard.</p> <p data-bbox="242 1061 1489 1290">A review of the training records of medical and mental health staff indicated some medical staff had not completed the PREA Sexual Abuse and Sexual Harassment Medical & Mental Health Staff Response training. 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 Franklin CC does not conduct forensic exams.</p> <p data-bbox="242 1319 1469 1382">Training records for Medical and Mental Health staff indicate completion of specialized training as well as completion of the Sexual Abuse and Sexual Harassment 101 and 201 training.</p> <p data-bbox="242 1411 1489 1473">After reviewing agency policy and procedures, staff interviews, and documentation provided this auditor finds this standard in compliance.</p> <p data-bbox="242 1503 440 1532">Corrective Action:</p> <p data-bbox="242 1561 300 1590">None</p> |

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| 115.41 | Screening for risk of victimization and abusiveness |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Screening Inventory Update Power Point Presentation, dated April 2021 • Risk to Sexual Victimization and Abusiveness Screening Guide-Prisons (revised 04/26/2021) • Memorandum from Director Rehabilitative Services regarding PREA Screening revisions effective 04/30/2021 • Memorandum from Assistant Commissioner, Prisons Administration and NCDPS PREA Director regarding Civil Immigration dated 4/19/2021 • Offender Initial Assessments and Reassessments • Case Management Screening • Franklin CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC Case Manager (Staff Responsible for Risk Screening) • Franklin CC Interim Warden • Franklin CC PREA Compliance Manager • Random sample of Offenders <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Health Services Policy and Procedures Manual, Policy TX-113, Evaluation & Management of Transgender Offenders, 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 04/26/2021) were all reviewed. Policy F.3400 requires all offenders receive a mental health screening administered via the web-based OPUS intake system, within (72) hours after their admission to Prisons. Diagnostic Services staff 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.</p> <p>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; and The offender's own perception of vulnerability; The intake screening does not however, consider, at a minimum, whether an offender is detained solely for civil immigration purposes. NCDPS researched the requirement across various disciplines: Prisons Administration, General Counsel's Office and Information Technology and has determined that circumstances do not exist where NCDPS would house an offender solely for civil immigration purposes. Therefore, they believe this section of the standard is inapplicable to NCDPS.</p> <p>The initial screening 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. Policy F.3400 also requires that within a set time period not to exceed thirty (30) days from the offender's arrival at the facility, the facility will reassess the offender's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening. 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.</p> <p>Recent revisions to the screening instrument in OPUS and the language in the Risk to Sexual Victimization and Abusiveness Screening Guide bring NCDPS into compliance with standard 115.41 component. Language now reflects that at intake/diagnostics, offenders will have an initial assessment within (72) hours and be reassessed within (30) days of arrival at the intake/diagnostics facility. In addition, language now exists that the screening of offenders upon transfer normally occurs within (72) hours and reassessment again within (30) days of arrival at the transfer facility. Reassessments should also</p> |

occur every six months with the case management requirements and 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 victimization or abusiveness.

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 at an offender's initial assessment performed at a Diagnostic Center. Upon arrival to Franklin CC (within 72 hours) the intake staff completes a screening inventory of the offender. Offender records were reviewed and indicated that the offenders' intake screenings were all completed within (72) hours of their arrival at Franklin CC. Case Management staff reported that if an offender's intake screening is not done on their day of arrival, it is done the next day after their arrival at Franklin 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 staff with the appropriate profile(s) can generate reports that list all offenders identified as high-risk for victimization and/or abusiveness. The information in the report 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. The facility should make individualized determinations about how to ensure the safety of each offender.

Policy F.3400 and the updated NCDPS-Prisons Risk to Sexual Victimization and Abusiveness Screening Guide require screening of offenders: at intake/diagnostics normally occurs within (72) hours and reassessed within thirty (30) days from the offender's arrival at the intake/diagnostics facility. OPUS continuously reassesses the offender's risk based on relevant data. On transfer, screening of offenders normally occurs within (72) hours and reassessed within (30) days. An alert displays and the ability to conduct the reassessment will occur after (15) days of admission. OPUS continuously reassess the offender's risk based on relevant data.

Franklin CC shared reassessments upon transfer for offenders that transferred to Franklin CC in 2020 and 2021. Recent changes to the Risk Assessment Tool have required Case Management staff to not only complete a risk re-assessment upon transfer but also within 30 days. A memo was shared by the Director of Rehabilitative Services on April 29, 2021 explaining the new tool to be utilized to conduct the re-assessments in the OPUS system.

After reviewing agency policy and procedures, information obtained through staff and offender interviews, review of additional documentation and observations made during the onsite portion of the audit, this auditor finds the facility compliant with all provisions of the standard.

Corrective Action:

None

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| 115.42 | Use of screening information |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1086 297">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 329 644 356">Information or Documents Reviewed:</p> <ul data-bbox="280 409 1414 703" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Diagnostic Center Procedures 305 (Psychological and Psychiatric Referral, dated 01/01/2014) • Policy TX-113, (Evaluation & Management of Transgender Offenders, dated 8/2018) • Risk to Sexual Victimization and Abusiveness Screening Guide-Prisons (revised 04/26/2021) • Franklin CC High-Risk Victim and High-Risk Aggressor Tracking Form used for reviewing Housing, Bed, Work, Education and Program Assignments • Letter from Program Director, dated 11/12/2021 • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="240 732 363 759">Interviews:</p> <ul data-bbox="280 813 716 904" style="list-style-type: none"> • Franklin CC PREA Compliance Manager • Franklin CC Interim Warden • Franklin CC Case Management staff <p data-bbox="240 934 347 960">Findings:</p> <p data-bbox="240 992 1481 1453">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Health Services Policy & Procedure Manual Policy TXI-13 (Evaluation and Management of Transgender Offenders August 2018) and the Risk to Sexual Victimization and Abusiveness Screening Guide (revised 4/26/2021) 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 on data gathered from the risk assessment, information from medical/mental health screenings, additional records reviews, information obtained from the 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 placement 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.</p> <p data-bbox="240 1485 1485 1812">The Franklin CC Case Managers are responsible for screening each offender that enters the facility. The Case Manager utilizes information in the offender's OPUS file to make decisions on housing, bed, work and other assignments to ensure each offender is safe while assigned to the facility. The Associate Warden of Custody is responsible for ensuring those on the list for high risk for abusiveness are not placed with those at high risk for victimization. The system is configured to automatically calculate risk and identify offenders at high risk for sexual victimization and high risk for sexual abusiveness. A report can be generated that identifies offenders in each category for staff to review. Mental Health Staff and Case Management staff utilize information in the OPUS when reassessing the placement and programming assignments for each transgender or intersex offender at least twice each year in order 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.</p> <p data-bbox="240 1843 1490 2105">Interviews conducted with the Franklin CC PCM indicated that the facility would 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. While conducting the onsite tour, the auditor toured housing, bed, work and program areas. Staff explained that offenders who are identified as HRV (high-risk for victimization) are placed in closer proximity to the staff in the housing units, and away from those identified as HRA (high-risk aggressor). Interviews confirmed that at intake, the results of the screening are used to determine housing and bed assignment. Interviews with the transgender offenders also revealed that the transgender offender's own views as to their own safety is given serious consideration when making housing and programming assignments.</p> <p data-bbox="240 2136 1490 2163">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) states in part, "Transgender</p> |

or intersex offenders shall be given the opportunity to shower separately from other offenders.” Interviews with the transgender offenders, 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 Franklin CC offenders identified as transgender or intersex are provided the opportunity to shower at separate times than the other offenders. However, none of the transgenders chose to take advantage of showering at separate times because of the measures already in place in the shower and bathroom areas with the barriers and shower curtains in place. The transgender offenders denied being assigned to a dedicated housing unit while at Franklin CC. The transgender offenders were complimentary of the staff at Franklin CC in regards to ensuring safety and considering their opinions and input. Franklin CC was not under a consent decree, legal settlement, or legal judgement for the purpose of protecting lesbian, gay, bisexual, transgender or intersex offenders.

The auditor was initially provided the names of five individuals to interview for targeted interviews while onsite. The names provided were not accurate with clarification being gained from the Franklin CC Program Director. She submitted a letter documenting that there were no transgender inmates assigned to Franklin CC during the April 15, 2020-April 15, 2021 PREA audit time.

After reviewing agency policy, updated documentation provided and staff and offender interviews, this auditor finds the facility in compliance with this standard

Corrective Action:

None

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| 115.43 | <p>Protective Custody</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Diagnostic Center Procedures 305 (Psychological and Psychiatric Referral, dated 01/01/2014) • Policy TX-113, (Evaluation & Management of Transgender Offenders, dated 8/2018) • Risk to Sexual Victimization and Abusiveness Screening Guide-Prisons (revised 04/26/2021) • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC Interim Warden • Franklin CC PREA Compliance Manager <p>Findings:</p> <p>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. The facility is required to document the basis for the facility's concern for the offender's safety, the reason why no alternative means of separation can be arranged and the duration of the limitation. Policy allows an offender to be held in restrictive housing up to 24 hours until an assessment is completed. 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.</p> <p>Franklin CC PCM 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 awaiting completion of an assessment of alternative means. The design and operations of the facility allow for a variety of options of housing if necessary. The Interim Warden and the PREA Compliance Manager both reported they would transfer the offender as an alternative.</p> <p>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.</p> <p>Corrective Action:</p> <p>None</p> |
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| 115.51 | Inmate reporting |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1086 297">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 329 644 356">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1289 669" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Orientation Packet • MOU with Safe Space Domestic Violence and Sexual Assault Program, dated 1/24/2019 • Agency Website-PREA, Undue Familiarity • Ways to Report Posters • Report Fraud, Waste, Abuse or Misconduct flyer • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="240 698 363 725">Interviews:</p> <ul data-bbox="284 779 1059 904" style="list-style-type: none"> • PREA Compliance Manager • Random Sample of Offenders • Random Sample of Staff • Safe Space Domestic Violence and Sexual Assault Program representative <p data-bbox="240 934 347 960">Findings:</p> <p data-bbox="240 992 1497 1621">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) 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. The offenders are also provided a PREA External reporting number as well as access to a Rape Crisis Center (Safe Space Domestic Violence and Sexual Assault Program). The auditor interviewed staff from the Safe Space Domestic Violence and Sexual Assault Program. The Safe Space Domestic Violence and Sexual Assault Program representative indicated that there had been no calls from offenders from Franklin CC during the past (12) months requesting any emotional support services related to a sexual abuse or sexual harassment occurring at the facility.</p> <p data-bbox="240 1653 1465 1845">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.</p> <p data-bbox="240 1877 1465 1935">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.</p> <p data-bbox="240 1966 1465 2060">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.</p> <p data-bbox="240 2092 1465 2150">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</p> |

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:

None

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| 115.52 | Exhaustion of administrative remedies |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1086 297">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1134 539" style="list-style-type: none"> • NCDPS-Prisons Policy G .0300 (Administrative Remedy Procedure, dated 8/01/13) • NCDPS-Prisons Offender Rules and Policies Handbook • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="240 566 363 593">Interviews:</p> <ul data-bbox="284 645 608 705" style="list-style-type: none"> • Random Sample of Staff • Random Sample of Offenders <p data-bbox="240 732 347 759">Findings:</p> <p data-bbox="240 792 1485 1256">NCDPS-Prisons Policy G .0300 (Administrative Remedy Procedure, dated 8/01/13) allows an 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.</p> <p data-bbox="240 1283 1465 1344">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.</p> <p data-bbox="240 1370 1485 1738">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 that there had been two (2) grievances 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. There were three (3) grievances filed in the last twelve (12) months that alleged sexual harassment that reached final decision within (90) days of being filed. Neither of these grievances required an extension either.</p> <p data-bbox="240 1765 1414 1825">If an emergency grievance alleges that an offender is subject to substantial risk for imminent sexual abuse, an initial response an initial response should be provided within (48) hours and final agency decision be issued within (5) days.</p> <p data-bbox="240 1832 1453 1892">Franklin CC reported that there were no emergency grievances alleging substantial risk of imminent sexual abuse filed in the past 12-months.</p> <p data-bbox="240 1919 1449 2018">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.</p> <p data-bbox="240 2045 1493 2143">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</p> |

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, documentation provided, staff and offender interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

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| 115.53 | Inmate access to outside confidential support services |
| | <p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1430 636" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Memorandum of Understanding with Safe Space Domestic Violence and Sexual Assault Program, dated 1/24/19 • Franklin CC Orientation Packet • Ways to Report Poster • Inmate PREA Brochure • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="240 667 363 694">Interviews:</p> <ul data-bbox="284 745 1066 873" style="list-style-type: none"> • PREA Compliance Manager • Safe Space Domestic Violence and Sexual Assault Program Representative • Random sample of Staff • Random sample of Offenders <p data-bbox="240 904 347 931">Findings:</p> <p data-bbox="240 958 1485 1220">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) 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.</p> <p data-bbox="240 1252 1485 1680">There is a Memorandum of Understanding with Safe Space Domestic Violence and Sexual Assault Program, signed 1/24/2019 by the Warden of Franklin CC and a Safe Space Domestic Violence and Sexual Assault Program representative. The Safe Space Domestic Violence and Sexual Assault Program will provide free, confidential sexual abuse advocacy services for the Franklin CC offender population. The Safe Space Domestic Violence and Sexual Assault Program crisis line telephone number is posted throughout the housing units for easy access. The auditor conducted a telephone interview with a representative from the Safe Space Domestic Violence and Sexual Assault Program and she indicated that the Safe Space Domestic Violence and Sexual Assault Program had not received any telephone calls in the past twelve (12) months from offenders at Franklin CC. The Safe Space Domestic Violence and Sexual Assault Program representative explained that they are also contracted with the Maria Parham Franklin Hospital so if an offender was taken for a forensic exam, the Safe Space Domestic Violence and Sexual Assault Program also provides advocates and support services during the forensic exam process. The SANE at Maria Parham Franklin Hospital confirmed the partnership with the Safe Space Domestic Violence and Sexual Assault Program 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.</p> <p data-bbox="240 1711 1485 1872">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 Safe Space Domestic Violence and Sexual Assault Program provided.</p> <p data-bbox="240 1904 1485 1995">After reviewing agency policy and procedures, staff and offender interviews, interviews with representatives from Safe Space Domestic Violence and Sexual Assault Program and Maria Parham Franklin Hospital and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.</p> <p data-bbox="240 2027 432 2054">Corrective Action</p> <p data-bbox="240 2085 300 2112">None</p> |

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| 115.54 | Third-party reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Inmate PREA Brochure • Ways to Report Poster • Franklin CC Orientation Packet • NCDPS-Website-PREA Information • Report Fraud, Waste, Abuse or Misconduct flyer • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Random sasmples of Staff <p>Findings:</p> <p>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 of the specified facility. 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 Director notifies the Warden of any information received and an investigation into the allegations will be initiated.</p> <p>Franklin CC has an MOU with Safe Space Domestic Violence and Sexual Assault Program 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 Safe Space Domestic Violence and Sexual Assault Program representative to notify the facility of the information shared with them, the offender must sign a consent form giving the Safe Space Domestic Violence and Sexual Assault Program permission to contact the facility and report the allegation of sexual abuse or sexual harassment.</p> <p>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.</p> <p>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.</p> <p>Corrective Action</p> <p>None</p> |

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| 115.61 | Staff and agency reporting duties |
| | <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • North Carolina Mandatory Reporting • Franklin CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC Interim Warden • Medical and Mental Health Practitioner • Random Sample of Staff <p>Findings:</p> <p>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 and 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.</p> <p>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 Acting 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.</p> <p>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.</p> <p>Corrective Action</p> <p>None</p> |

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| 115.62 | <p>Agency protection duties</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC Interim Warden • Franklin CC PREA Compliance Manager • Random Sample of Staff <p>Findings:</p> <p>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.</p> <p>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 Interim 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.</p> <p>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.</p> <p>Corrective Action</p> <p>None</p> |
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| 115.63 | Reporting to other confinement facilities |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC Interim Warden • Franklin CC PREA Compliance Manager <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires that when Franklin 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 Franklin CC is notified from another facility or agency that an allegation of sexual abuse or sexual harassment has been reported, the allegation would be investigated immediately.</p> <p>During the interview with the Interim Warden, he shared that if an offender reports an incident of sexual abuse/assault that occurred at another agency/facility, he (Franklin CC Interim Warden) would contact the other agency/facility staff via telephone call.</p> <p>The Interim Warden and the PCM reported that there were no reports received from other agencies or facilities reporting that an offender alleged sexual abuse while assigned to Franklin CC.</p> <p>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.</p> <p>Corrective Action</p> <p>None</p> |

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| 115.64 | Staff first responder duties |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1289 568" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Franklin Correctional Center PREA Sexual Abuse Institutional Response Plan, dated 8/17/2021 • Franklin Investigation Packets • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="242 598 363 627">Interviews:</p> <ul data-bbox="284 678 750 741" style="list-style-type: none"> • Franklin PREA Compliance Manager • Security and Non-Security First Responders <p data-bbox="242 768 347 797">Findings:</p> <p data-bbox="242 824 1493 1218">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and Franklin Correctional Center PREA Sexual Abuse Institutional Response Plan, dated 8/17/2021 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 actions that could destroy physical evidence, and then notify security staff. The offender should see medical and mental health staff as soon as possible.</p> <p data-bbox="242 1247 1493 1444">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.</p> <p data-bbox="242 1473 1458 1536">The PCM reported that there had been incidents reported to security and non-security staff members that an offender had been sexually abused in the past twelve (12) months.</p> <p data-bbox="242 1565 1407 1659">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.</p> <p data-bbox="242 1688 432 1718">Corrective Action</p> <p data-bbox="242 1747 300 1776">None</p> |

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| 115.65 | Coordinated response |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1085 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1289 537" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Franklin Correctional Center PREA Sexual Abuse Institutional Response Plan, dated 8/17/2021 • Franklin CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="242 566 363 595">Interviews:</p> <ul data-bbox="284 647 617 705" style="list-style-type: none"> • Franklin CC Associate Warden • Random sample of staff <p data-bbox="242 734 347 763">Findings:</p> <p data-bbox="242 792 1473 987">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires that each facility develop a written institutional plan, consistent with the agency's plan, to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership. The Franklin Correctional Center PREA Sexual Abuse Institutional Response Plan, created and dated 8/17/2021, 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.</p> <p data-bbox="242 1016 1489 1245">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 created 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.</p> <p data-bbox="242 1274 1465 1335">After reviewing agency policy, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor now finds this standard in compliance.</p> <p data-bbox="242 1364 440 1393">Corrective Action:</p> <p data-bbox="242 1422 300 1451">None</p> |

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| 115.66 | <p>Preservation of ability to protect inmates from contact with abusers</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC Associate Warden • PREA Compliance Manager • Human Resources staff <p>Findings:</p> <p>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 Acting 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 Director reported collective bargaining is not utilized in the NCDPS.</p> <p>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.</p> <p>Corrective Action</p> <p>None</p> |
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| 115.67 | Agency protection against retaliation |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 327 644 356">Information or Documents Reviewed:</p> <ul data-bbox="282 407 1289 535" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • LMS PREA Support Person Training Curriculum • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="242 564 363 593">Interviews:</p> <ul data-bbox="282 645 716 703" style="list-style-type: none"> • Franklin CC PREA Compliance Manager • Franklin CC PREA Support Person <p data-bbox="242 732 347 761">Findings:</p> <p data-bbox="242 790 1485 1120">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.</p> <p data-bbox="242 1149 1493 1478">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 are four (4) PREA Support Persons assigned to Franklin CC that are responsible for offender monitoring for potential retaliation. During an interview with a 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.</p> <p data-bbox="242 1507 1481 1635">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)].</p> <p data-bbox="242 1664 1465 1724">The Interim Warden and PCM both reported that there had been no incidents of retaliation of either staff or offenders in the past twelve (12) months.</p> <p data-bbox="242 1753 1430 1814">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.</p> <p data-bbox="242 1843 432 1872">Corrective Action</p> <p data-bbox="242 1901 300 1930">None</p> |

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| 115.68 | Post-allegation protective custody |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1289 504" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="242 533 363 562">Interviews:</p> <ul data-bbox="284 611 716 674" style="list-style-type: none"> • Franklin CC Associate Warden • Franklin CC PREA Compliance Manager <p data-bbox="242 701 347 730">Findings:</p> <p data-bbox="242 757 1490 1189">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 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 than thirty (30) days while awaiting an alternative placement.</p> <p data-bbox="242 1216 1490 1346">An interview with the Associate Warden and the PCM indicated the facility does not place alleged victims in restrictive housing. Alleged abusers will be placed in restrictive housing but never the alleged victim. 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.</p> <p data-bbox="242 1373 432 1402">Corrective Action</p> <p data-bbox="242 1429 300 1458">None</p> |

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| 115.71 | Criminal and administrative agency investigations |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1086 297">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1406 568" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Office of Special Investigations Policy 100 (OSI Authority to Conduct Investigations, dated 1/01/2020) • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="240 600 363 627">Interviews:</p> <ul data-bbox="284 678 716 770" style="list-style-type: none"> • Franklin CC Investigator • Franklin CC Interim Warden • Franklin CC PREA Compliance Manager <p data-bbox="240 801 347 828">Findings:</p> <p data-bbox="240 860 1493 1420">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) 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 Franklin CC Investigators confirmed their completion of the NCDPS Specialized Investigations: Sexual Abuse and Harassment training. Franklin CC currently has five (5) staff who has attended the Investigator training. All alleged incidents of sexual abuse or harassment are referred to the local law enforcement office, the Bunn Police Department or Franklin County Sheriff's Department 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. Many times, the assigned PREA Investigator will conduct joint interviews with the investigator assigned from the Burgaw Police Department. The Investigator reported that they become the contact person for the Bunn Police Department or Franklin County Sheriff's Department. The State Bureau of Investigations may also be contacted when allegations are made against a staff member alleging to have sexually assaulted an offender. 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 investigators could be assigned to conduct the administrative investigation. Allegations involving staff shall also be reported to the Office of Special Investigation in accordance with NCDPS-SI-100 OSI Authority to Conduct Investigations Policy.</p> <p data-bbox="240 1451 1481 1711">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 Investigators 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.</p> <p data-bbox="240 1742 1493 2002">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 Investigators, 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 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 Investigators explained they like to measure whether the subject's non-verbal indicators of truthfulness align with their verbal indicators that they are being truthful.</p> <p data-bbox="240 2033 1474 2161">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</p> |

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 was one (1) unsubstantiated allegation of conduct that appeared to be criminal that was referred for prosecution since the last PREA audit. This case was unique as the incident involved an alleged victim that was low functioning and was unable to understand the magnitude of the incident. Although the administrative investigation results were unsubstantiated, it was believed based on the low functioning ability of the alleged victim that there was criminal activity based on the alleged victim's inability to understand the actions he was involved in.

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:

None

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| 115.72 | <p>Evidentiary standard for administrative investigations</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS Specialized Investigations: Sexual Abuse and Harassment Training Lesson Plans • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC Investigators <p>Findings:</p> <p>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 NCDPS Specialized Investigations: Sexual Abuse and Harassment Training Lesson Plans that Franklin CC PREA Investigators attend, explains that 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.</p> <p>The investigators shared that when they conduct investigations, they seek the facts and make decisions and conclusions based on these facts. The Investigators routinely identify in their investigative reports if they make a decision based on the preponderance of evidence with further explanation.</p> <p>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.</p> <p>Corrective Action</p> <p>None</p> |
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| 115.73 | Reporting to inmates |
| | <p data-bbox="240 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 239">Auditor Discussion</p> <p data-bbox="240 271 1098 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 329 643 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1289 501" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="240 530 363 560">Interviews:</p> <ul data-bbox="284 611 716 672" style="list-style-type: none"> • Franklin CC Investigators • Franklin CC PREA Compliance Manager <p data-bbox="240 701 347 730">Findings:</p> <p data-bbox="240 759 1493 1218">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires any offender who makes an allegation that he or she suffered sexual abuse is informed in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. 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 related to sexual abuse within the facility. PREA investigations accepted by the Office of Special Investigations (OSI), will be conducted jointly by an OSI investigator and facility/region PREA investigator. Results of indictments or criminal convictions of Franklin CC staff that Bunn Police Investigators or Franklin County Sheriff's Department become aware of will be shared with the Warden who will communicate the findings to the PREA Support Person (PSP) assigned. The PSP 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 facility.</p> <p data-bbox="240 1249 1469 1413">Interviews with the investigators 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 nine (9) 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.</p> <p data-bbox="240 1444 1477 1536">After reviewing agency policy and procedures, staff interviews, information obtained through documentation review, additional information provided post-audit and observations made during the onsite portion of the audit this auditor finds this standard in compliance.</p> <p data-bbox="240 1565 440 1594">Corrective Action:</p> <p data-bbox="240 1624 300 1653">None</p> |

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| 115.76 | Disciplinary sanctions for staff |
| | <p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1289 568" style="list-style-type: none"> • 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) • State HR Manual-Disciplinary Action Policy, dated 10/01/2017 • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="240 600 363 627">Interviews:</p> <ul data-bbox="284 678 675 739" style="list-style-type: none"> • Franklin CC Interim Warden • Franklin CC Human Resources Staff <p data-bbox="240 770 347 797">Findings:</p> <p data-bbox="240 826 1497 1153">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.</p> <p data-bbox="240 1184 1474 1377">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 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 employee will escape sanctions.</p> <p data-bbox="240 1408 1477 1469">Interviews with the Interim Warden and the Human Resources Staff both reported that there had been no staff from Franklin CC who violated agency sexual abuse or sexual harassment policies in the past twelve (12) months.</p> <p data-bbox="240 1500 1430 1561">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.</p> <p data-bbox="240 1592 432 1619">Corrective Action</p> <p data-bbox="240 1650 300 1677">None</p> |

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| 115.77 | Corrective action for contractors and volunteers |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1289 604" style="list-style-type: none"> • 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) • PREA Acknowledgement Forms of volunteers/contractors • Volunteer Training Agenda with PREA Information • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="242 633 363 663">Interviews:</p> <ul data-bbox="284 714 716 806" style="list-style-type: none"> • Franklin CC Interim Warden • Franklin CC PREA Compliance Manager • Random Volunteers/Contractors <p data-bbox="242 835 347 864">Findings:</p> <p data-bbox="242 893 1485 1153">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and NCDPS-Prisons Policy F .0604 (Community Volunteer Program, dated 7/01/2010) 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.</p> <p data-bbox="242 1182 1485 1312">Interviews with the Interim 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.</p> <p data-bbox="242 1341 1453 1402">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.</p> <p data-bbox="242 1431 432 1460">Corrective Action</p> <p data-bbox="242 1489 300 1518">None</p> |

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| 115.78 | Disciplinary sanctions for inmates |
| | <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Policy B .0200 (Offender Disciplinary Procedures, dated 11/03/20) • Inmate Rule Book • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC Interim Warden • Franklin CC PREA Compliance Manager <p>Findings:</p> <p>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.</p> <p>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. Franklin CC does not have such programming but recommendations could be made for the offender to become involved in upon transfer.</p> <p>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.</p> <p>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 11/3/2020) 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.</p> <p>An interview with the Interim 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 Interim 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 Interim 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.</p> <p>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.</p> <p>Corrective Action</p> |

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| 115.81 | Medical and mental health screenings; history of sexual abuse |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • 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) • Health Services Policy and Procedure CP 18 (Sexual Abuse, dated 2/2014) • NCDPS Authorization to Release Medical Information • Patient Medical Consent Form (English and Spanish) • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC Interim Warden • Franklin Medical and Mental Health practitioners • Franklin CC PREA Compliance Manager <p>Findings:</p> <p>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. Staff track the date Medical and Mental Health staff was notified, the date of the Medical Assessment and the date of Medical Treatment. 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 twenty (20). Interviews with the Interim Warden and the PCM confirmed there are no offenders under the age of twenty (20) housed at the facility.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>Corrective Action</p> <p>None</p> |

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| 115.82 | Access to emergency medical and mental health services |
| | <p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1289 568" style="list-style-type: none"> • 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) • Health Services Policy and Procedure CP 18 (Sexual Abuse, dated 2/2014) • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="240 600 363 627">Interviews:</p> <ul data-bbox="284 678 1118 806" style="list-style-type: none"> • Franklin CC Medical and Mental Health Staff • Representative from Mariah Parham Franklin Hospital • Representative from Safe Space Domestic Violence and Sexual Assault Program • PREA Support Person <p data-bbox="240 837 347 864">Findings:</p> <p data-bbox="240 893 1490 1153">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.</p> <p data-bbox="240 1184 1477 1413">Documentation and an interview with the representative from Mariah Parham Franklin Hospital, confirmed that Mariah Parham Franklin Hospital SANE staff provide emergency care and the forensic medical exam at no cost to the victim. Safe Space Domestic Violence and Sexual Assault Program has a Memorandum of Understanding to provide confidential emotional support services to the offenders at Franklin CC. In addition, a PREA Support Person, could also be made available to provide victim advocate services. Franklin CC has four (4) staff trained as a PREA Support Persons (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.</p> <p data-bbox="240 1444 1490 1637">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 chart.</p> <p data-bbox="240 1668 1477 1727">Non-medical staff (First Responders) who learn of an allegation of sexual abuse are trained to follow the PREA Coordinated Response Plan.</p> <p data-bbox="240 1758 1490 1852">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.</p> <p data-bbox="240 1883 432 1910">Corrective Action</p> |

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| 115.83 | Ongoing medical and mental health care for sexual abuse victims and abusers |
| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • 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 CI-8 (After Care Planning for Offenders in Healthcare Services, dated 11/2007) • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Franklin CC Medical & Mental Health Staff <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Health Services Policy and Procedure CP 18 (Clinical Practice Guidelines) and NCDPS-Prisons Health Services Policy and Procedure CI-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.</p> <p>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 Maria Parham Franklin Hospital to receive treatment and the physical evidence can be gathered by a certified SANE. 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.</p> <p>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 CI-8 (After Care Planning for Offenders in Healthcare Services, dated 11/2007).</p> <p>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.</p> <p>Corrective Action</p> <p>None</p> |

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| 115.86 | Sexual abuse incident reviews |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1289 537" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Franklin CC Post Incident Reviews • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="242 566 363 595">Interviews:</p> <ul data-bbox="284 645 754 772" style="list-style-type: none"> • Franklin CC Interim Warden • Franklin CC PREA Compliance Manager • Franklin CC Investigator • Franklin CC Medical and Mental Health Staff <p data-bbox="242 801 347 831">Findings:</p> <p data-bbox="242 916 1484 1312">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 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.</p> <p data-bbox="242 1341 1493 1570">Members of the Post Incident Review committee at Franklin CC include the Associate Warden of Custody, Franklin CC PCM, Franklin CC Associate Warden of Programs, Franklin CC Medical staff or Mental Health staff, and the Franklin CC PREA Investigator. The Warden reviews prior to submission to the Regional office. Members of the Post Incident Review team were interviewed and shared the discussions that take place during the PIR. Members shared that discussion regarding recommendations for improvement are held and their recommendations are taken seriously. 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.</p> <p data-bbox="242 1599 1431 1659">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.</p> <p data-bbox="242 1688 432 1718">Corrective Action</p> <p data-bbox="242 1747 300 1776">None</p> |

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| 115.87 | Data collection |
| | <p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1085 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1289 602" style="list-style-type: none"> • 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 • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="240 633 363 660">Interviews:</p> <ul data-bbox="284 712 716 739" style="list-style-type: none"> • Franklin CC PREA Compliance Manager <p data-bbox="240 770 347 797">Findings:</p> <p data-bbox="240 826 1481 1187">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. Aggregated data is collected from January 1- December 31 each year and is sufficient to answer all the questions on the Bureau of Justice's, Survey of Sexual Violence that is submitted each year prior to June 30. 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 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.</p> <p data-bbox="240 1218 1481 1411">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.</p> <p data-bbox="240 1442 1481 1500">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.</p> <p data-bbox="240 1532 432 1559">Corrective Action</p> <p data-bbox="240 1590 300 1617">None</p> |

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| 115.88 | Data review for corrective action |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1085 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1289 568" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • 2019 Annual Sexual Abuse Report • NCDPS-Website-PREA Information • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="242 598 362 627">Interviews:</p> <ul data-bbox="284 678 716 741" style="list-style-type: none"> • NCDPS PREA Director • Franklin CC PREA Compliance Manager <p data-bbox="242 768 347 797">Findings:</p> <p data-bbox="242 824 1493 1086">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. The Auditor did not observe any redacted material in any of the reports placed on the website. Annual reports from 2015 to 2019 were made available to the public on the NCDPS website.</p> <p data-bbox="242 1115 1481 1211">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 interview 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.</p> <p data-bbox="242 1216 1433 1279">The PREA Director is responsible for gaining the signatures of the NCDPS Secretary and ensuring the annual report is placed on the agency website.</p> <p data-bbox="242 1308 1430 1370">After reviewing agency policy, information gained through the interview with the PREA Director and review of additional documentation, the auditor finds this standard compliant.</p> <p data-bbox="242 1397 432 1426">Corrective Action</p> <p data-bbox="242 1456 300 1485">None</p> |

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| 115.89 | Data storage, publication, and destruction |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="242 329 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 1289 568" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • 2019 Annual Sexual Abuse Report • NCDPS-Website-PREA Information • Franklin CC's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="242 598 363 627">Interviews:</p> <ul data-bbox="284 678 526 707" style="list-style-type: none"> • NDCS PREA Director <p data-bbox="242 734 347 763">Findings:</p> <p data-bbox="242 792 1490 887">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.</p> <p data-bbox="242 893 1477 1021">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. Information for the agency's annual report is compiled from investigative files, Incident Reviews and other reports submitted into the OPUS Incident Reporting System. Unique usernames and passwords are required to gain access to the OPUS Incident Reporting System.</p> <p data-bbox="242 1050 1490 1144">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.</p> <p data-bbox="242 1173 1430 1236">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.</p> <p data-bbox="242 1265 432 1294">Corrective Action</p> <p data-bbox="242 1323 300 1352">None</p> |

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| 115.401 | Frequency and scope of audits |
| | <p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1086 300">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 331 644 358">Information or Documents Reviewed:</p> <ul data-bbox="284 409 695 539" style="list-style-type: none"> • NCDPS Website • Franklin CC PREA Report (June 2018) • NCDPS Sexual Abuse Annual Reports • Facility Tour <p data-bbox="240 566 363 593">Interviews:</p> <ul data-bbox="284 645 858 672" style="list-style-type: none"> • Informal Interviews with Staff and Offenders during tour <p data-bbox="240 701 347 728">Findings:</p> <p data-bbox="240 759 1485 1055">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 sixty-nine (69) facilities (55 prisons, 10 juvenile facilities and 4 community confinement facilities). After completing a comparison, each facility had been audited at least once during the previous three-year audit cycle. During the previous three-year audit cycle, the NCDPS ensured at least one-third of its facilities were audited. The website also contained NCDPS Sexual Abuse Annual Reports.</p> <p data-bbox="240 1084 1485 1214">The Franklin Correctional Center was last audited in May 2018 with a final report dated June 18, 2018. The previous auditor was also allowed access to all areas of the facility and provided documentation requested by the auditor. Interviews with staff and offenders were able to be conducted in private and offenders were allowed to correspond with the auditor confidentially.</p> <p data-bbox="240 1243 1485 1440">While at Franklin 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. Offenders were provided an opportunity to correspond with the auditor confidentially. During the audit tour, the auditor observed audit notices posted throughout every area of the facility. The specific dates the notices were posted is unknown as no correspondence or photos were provided. The email sent to the Regional Program Analyst requested that the notices be posted by March 1, 2021 with photos and locations of the posting being uploaded to the supplemental folders in the OAS.</p> <p data-bbox="240 1444 1485 1507">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.</p> <p data-bbox="240 1536 1485 1599">After reviewing the agency website, previous PREA Audit report, NCDPS Annual Sexual Abuse Reports, interviews with staff and offenders, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.</p> <p data-bbox="240 1628 432 1655">Corrective Action</p> <p data-bbox="240 1684 300 1711">None</p> |

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| 115.403 | Audit contents and findings |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <p>NCDPS Website</p> <p>Interviews:</p> <p>None</p> <p>Findings:</p> <p>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, twenty (20) Final Audit Reports were placed on the website.</p> <p>After a review of the agency's website this auditor finds this standard in compliance.</p> <p>Corrective Action</p> <p>None</p> |

| Appendix: Provision Findings | | |
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| 115.11 (a) | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator | |
| | Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? | yes |
| | Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? | yes |
| 115.11 (b) | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator | |
| | Has the agency employed or designated an agency-wide PREA Coordinator? | yes |
| | Is the PREA Coordinator position in the upper-level of the agency hierarchy? | yes |
| | Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities? | yes |
| 115.11 (c) | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator | |
| | If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) | 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 |

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| 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.) | yes |
| 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 |

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| 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 |

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| 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 | |
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| | 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 |

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| 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 |

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

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| 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 |

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| 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 |

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| 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 |

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| 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 |

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| 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.) | yes |
| 115.41 (a) | Screening for risk of victimization and abusiveness | |
| | Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? | yes |
| | Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? | yes |
| 115.41 (b) | Screening for risk of victimization and abusiveness | |
| | Do intake screenings ordinarily take place within 72 hours of arrival at the facility? | yes |
| 115.41 (c) | Screening for risk of victimization and abusiveness | |
| | Are all PREA screening assessments conducted using an objective screening instrument? | yes |

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| 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? | no |
| 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? | no |

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| 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 |

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

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| 115.43 (b) | Protective Custody | |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? | yes |
| | If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| | 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.) | yes |
| | 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.) | yes |
| 115.43 (c) | Protective Custody | |
| | Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? | yes |
| | Does such an assignment not ordinarily exceed a period of 30 days? | yes |
| 115.43 (d) | Protective Custody | |
| | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety? | yes |
| | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? | yes |
| 115.43 (e) | Protective Custody | |
| | In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? | yes |
| 115.51 (a) | Inmate reporting | |
| | Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? | yes |
| | Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? | yes |
| | Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? | yes |

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| 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. | yes |
| 115.52 (b) | Exhaustion of administrative remedies | |
| | Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) | yes |
| | Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| 115.52 (c) | Exhaustion of administrative remedies | |
| | Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from 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 |

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| 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 |

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| 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.) | yes |
| | 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 |

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| 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 |

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| 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 |

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| 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 |

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

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| 115.72 (a) | Evidentiary standard for administrative investigations | |
| | Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? | yes |
| 115.73 (a) | Reporting to inmates | |
| | Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? | yes |
| 115.73 (b) | Reporting to inmates | |
| | If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) | yes |
| 115.73 (c) | Reporting to inmates | |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit? | yes |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? | yes |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? | yes |
| | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? | yes |
| 115.73 (d) | Reporting to inmates | |
| | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? | yes |
| | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? | yes |
| 115.73 (e) | Reporting to inmates | |
| | Does the agency document all such notifications or attempted notifications? | yes |
| 115.76 (a) | Disciplinary sanctions for staff | |
| | Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? | yes |
| 115.76 (b) | Disciplinary sanctions for staff | |
| | Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? | yes |

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| 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 |

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| 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 |

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| 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 |

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| 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.) | yes |
| 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 |

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| 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 |

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| 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.) | no |
| 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 |