PREA Facility Audit Report: Final

Name of Facility: Hampshire Sheriff Regional Lockup Facility

Facility Type: Lockups

Date Interim Report Submitted: NA

Date Final Report Submitted: 07/20/2018

Auditor Certification		
The contents of this report are accurate to the best of my knowledge.		
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.		7
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.		V
Auditor Full Name as Signed: Amy Fairbanks Date of Signature: 07/2		0/2018

AUDITOR INFORMAT	ION
Auditor name:	Fairbanks, Amy
Address:	
Email:	fairbaa@comcast.net
Telephone number:	
Start Date of On-Site Audit:	06/12/2018
End Date of On-Site Audit:	06/12/2018

FACILITY INFORMAT	ION
Facility name:	Hampshire Sheriff Regional Lockup Facility
Facility physical address:	205 Rocky Hill Road, Northampton, Massachusetts - 01061
Facility Phone	413-584-5911
Facility mailing address:	P.O. Box 7000, Northampton, - 01060
The facility is:	County Federal Municipal State Military Private for profit Private not for profit
Facility Type:	PoliceSheriffCourt HoldingOther

Primary Contact			
Name:	Bryan Luszczki	Title:	Lieutenant
Email Address:	bryan.luszczki@hsd.state.ma.us	Telephone Number:	413-584-5911

Sheriff/Chief/Director			
Name:	Patrick Cahillane	Title:	Sheriff
Email Address:	patrick.cahillane@hsd.state.ma.us	Telephone Number:	413-584-5911

Facility PREA Com	pliance Manager		
Name:	Bryan Luszczki	Email Address:	bryan.luszczki@hsd.state.ma.us

Facility Characteristics			
De	signed facility capacity:	24	
Current population of facility:		0	
Age Range	Adults: 18-74	Juveniles: N/A	Youthful Residents: N/A
Facility security level/detainee custody levels:		Maximum	

AGENCY INFORMATI	ON
Name of agency:	Hampshire Sheriff's Office
Governing authority or parent agency (if applicable):	Commonwealth of Massachusetts
Physical Address:	205 Rocky Hill Road, Northampton, Massachusetts - 01061
Mailing Address:	PO Box 7000, Northampton, Massachusetts - 01061-7000
Telephone number:	413-584-5911

Agency Chief Executive Officer Information:			
Name:	Patrick J. Cahillane	Title:	Sheriff
Email Address:	patrick.cahillane@hsd.state.ma.us	Telephone Number:	413-584-5911

Agency-Wide PRE	A Coordinator Inform	ation	
Name:	Bob Hodgen	Email Address:	robert.hodgen@hsd.state.ma.us

AUDIT FINDINGS

Narrative:

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

On June 12, 2018, an audit was conducted at the Hampshire County Sherriff's Regional Lock Up Facility to determine compliance with the Prison Rape Elimination Act standards finalized August 2012. This audit was conducted in conjunction with the Hampshire County Sherriff's Jail and House of Correction. Staffs work at both facilities. Approximately one third of the inmates housed at the Jail and House of Correction were processed through at the Lock Up facility.

Pre audit activities:

Six weeks prior to the audit, the facility confirmed that posters announcing the audit were visible in all areas of the facility. Documents were uploaded to the audit system (OAS) supporting compliance with the standard as well as statistics from the pre-audit questionnaire. Documents reviewed for this audit included the completed PREA questionnaire, policy, contracts, training curriculums, staff training records, personnel files, contract/volunteer training records, logbooks, meeting minutes, sexual abuse & harassment complaints, accreditation reports (ACA & NCCHC), and population reports for the previous twelve months.

Audit activities:

A complete tour of the facility was conducted on June 12, 2018. The following areas and operations were visited and observed: detainee holding areas, and booking operations. Camera monitoring operations were also examined. Video of night shift activities were observed. The auditor was allowed free access to all areas of the facility, access to interview inmates and staff selected randomly and intentionally, and to see any documentation requested. Posters were visible throughout the facility announcing the audit.

Formal staff interviews were scheduled through random selection of staff from rosters provided by the staff prior to the audit. Twenty five (25) staff interviews were conducted with the following: The Sheriff, PREA compliance manager/coordinator two lieutenants) medical staff (nurse, nurse practitioner, and contractual mental health provider), human resources coordinator, ten (10) corrections officers/sergeants from all areas of the jail and shifts, lieutenant (including special management housing), training officer, booking captain, two investigators, two classification staff (complete risk assessment, follow up risk assessment, conduct orientation, sexual abuse incident review team member, and monitor for retaliation), drug/alcohol counselor and one food service staff. Three newly hired staff that were in orientation were questioned regarding the hiring process.

No letters were received from lock up detainees prior to the audit. No lock up detainees were available to be interviewed.

Post audit activities included reviewing the documents collected, interview notes, tour notes and completing the final report.

AUDIT FINDINGS

Facility Characteristics:

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

Hampshire County Sheriff's Regional Lock Up Facility houses up to 24 detainees in single cell holding areas. There is an admission area that has one room with a bed, two holding areas. It is in operation from 5:00pm to 9:00am. For the previous twelve months,1540 were housed; the average length of stay is 4 hours. There are four wings, one is designated for females (six cells). Cameras are in each cell however, they have been modified to not show detail when detainees are using toilet facilities. Cameras cover all activities from arrival to placement in the cell. No youthful offenders are housed here.

AUDIT FINDINGS

Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

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

Number of standards exceeded:	3
Number of standards met:	32
Number of standards not met:	0

Summary of Audit Findings

The auditor concluded that the overall culture of this facility is to be diligent, alert and report any suspicions to the supervisor to prevent and/or detect sexual abuse or sexual harassment.

Communication channels are well established which enhances the ability to prevent occurrences which is reflected in their investigations.

Number of Standards Exceeded:

- §115.111 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
- §115.117 Hiring and Promotion Decisions
- §115.131 Employee and Volunteer Training

Number of Standards Met:

- §115.112 Contracting with other entities for the confinement of inmates
- §115.113 Supervision and Monitoring
- §115.114 Youthful Inmates
- §115.115 Limits to Cross-Gender Viewing and Searches
- §115.116 Inmates with Disabilities and Inmates who are Limited English Proficient
- §115.117 Hiring and Promotion Decisions
- §115.118 Upgrades to Facilities and Technology
- §115.121 Evidence Protocol and Forensic Medical Examinations
- §115.122 Policies to Ensure Referrals of Allegations for Investigations
- §115.132- Detainee, contractor and inmate worker notification of the agency's zero -tolerance policy
- §115.134 Specialized Training: Investigations
- §115.141 Screening for Risk of Victimization and Abusiveness
- §115.151 Inmate Reporting
- §115.154 Third-Party Reporting
- §115.161 Staff and Agency Reporting Duties
- §115.162 Agency Protection Duties
- §115.163 Reporting to Other Confinement Facilities
- §115.164 Staff First Responder Duties
- §115.165 Coordinated Response

- §115.166 Preservation of ability to protect inmates from contact with abusers
- §115.167 Agency protection against retaliation
- §115.168 Post-Allegation Protective Custody
- §115.171 Criminal and Administrative Agency Investigations
- §115.172 Evidentiary Standard for Administrative Investigations
- §115.176 Disciplinary sanctions for staff
- §115.177 Corrective action for contractors and volunteers
- §115.178 Disciplinary sanctions for inmates
- §115.181 Medical and mental health screenings; history of sexual abuse
- §115.182 Access to emergency medical and mental health services
- §115.183 Ongoing medical and mental health care for sexual abuse victims and abusers
- §115.186 Sexual abuse incident reviews
- §115.187 Data Collection
- §115.188 Data Review for Corrective Action
- §§115.189 Data Storage, Publication, and Destruction

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.

115.111	Zero tolerance of sexual abuse and sexual harassment
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	 (a) HSO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic Violence and Stalking emphasizes a zero tolerance for all forms of sexual abuse and sexual harassment. It addresses prevention, detection and response to allegations of sexual abuse and sexual harassment and a description of how the facility will address prevention, detection and response. It notes that employees may be subject to disciplinary sanctions up to and including termination. (b) The facility Captain serves as the PREA coordinator and reports directly to the Sheriff on PREA matters. He has held this position since the implementation of the PREA standards. Two lieutenants help coordinate, manage and monitor PREA activities. Compliance finding based on the following: Documents – HSO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic
	Violence and Stalking, organization chart. Interviews-Interviews with the Sheriff, Captain, and lieutenants supports sufficient time and
	authority to ensure PREA efforts can be maintained.
	Observations – Overall observations and interactions during the on-site audit supports compliance.
	Exceed standard finding based on having three high level supervisory staff who work different shifts involved in the oversight of activities related to PREA compliance.

115.112	Contracting with other entities for the confinement of detainees
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This agency does not enter into contracts for the confinement of detainees under their jurisdiction.

115.113 Supervision and monitoring **Auditor Overall Determination:** Meets Standard **Auditor Discussion** All single cell, all monitored on camera. The staffing plans is in conjunction with the Staffing Plan for the Jail and House o Correction. (a) HSO 2.1.12 Workload Requirements/Shift Relief Factor requires the development and documentation of a staffing plan which considers the staff and video monitoring needed to protect the confined population. (b) Deviations are included in the daily roster reporting process. Rosters randomly selected from the 3rd day of each of the previous six months were requested and reviewed which additionally support compliance. Typical reason for deviation from review of documentation included a housing area being closed. (c) HSO 2.1.4 Around the Clock Supervision and Staff/Inmate Interaction requires unannounced supervisory rounds on all shifts, and precludes staff from alerting other staff to these rounds. Seven examples of unannounced rounds were noted in the log book at all hours of the day, evening and night. An additional 6 examples for unannounced rounds for all areas of the facility (Jail, House of Correction and Lock Up) for the 3rd of December, January, February, March, April and May were requested and found to be compliant. (d) All detainees are provided single cells; policy prohibits placing more than one detainee in the cell. Camera coverage is provided for all movement at this facility. Compliance finding based on the following: Documents – HSO 2.1.4 Around the Clock Supervision and Staff/Inmate Interaction. Documentation of unannounced rounds during the pre-audit review and on-site review. Interviews- Interview with the Sheriff supported compliance with the staffing plan and its requirements; interview with the PREA coordinator confirmed compliance with the staffing plan, annual review with PREA Coordinator input; Supervisory interviews support their knowledge and compliance with unannounced rounds and provided strategies to avoid consistency and enhance randomness; Random staff questioned supported that staff are

precluded from alerting other staff, staffing levels are adequate and not reduced to avoid overtime (they follow the staffing plan);

Observations - Staffing levels were observed during the onsite portion of the audit, as well as random review of log books at the housing areas.

115.114	Juveniles and youthful detainees
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Part I, Title XVII, Chapter 119 and Section 58 effective September 2013 requires offenders under the age of 18 to be confined to the Department of Youth Services, this is referred to as the Raise the Age Bill. During the audit, neither auditor saw or heard anything to dispute that no youths are housed at this facility.

115.115 | Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) HSO 2.3.3 Inmate Search/Body Cavity/Strip Searches supports that cross gender strip or cross gender visual body searches will not be conducted unless there are exigent circumstances or they are conducted by medical staff.
- (b) Strip searches and Visual Cavity Searches are documented. The facility maintains a strip search authorization log to document strip searches. A separate log is maintained for post visiting strip searches of inmates. Policy addresses when strip searches are conducted. The log was reviewed along with a list of female staff and found to be compliant in that female staff do not conduct strip searches. Furthermore, female staff do not conduct pat down searches of male inmates unless there are exigent circumstances.
- (c) HSO 2.1.8 Resident Supervision states, The HJHC ensures that inmates may 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. An area of the cell is pixilated; detainees are informed of this.
- (d) HSO 2.3.1Searches & Disposition of Evidence states, Searches or physical examination of transgender or intersex inmates, for the sole purpose of determining the inmate's genital status, shall not be permitted. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. HSO 2.1.1 Master Control Center, Communications, Surveillance supports that video monitoring will not be used to invade the privacy of the inmates. Review of video monitoring supports that privacy of the inmate population is not invaded.
- (e) Training curriculum supports the following: Operationally, three options are in current practice for searches of transgender or intersex inmates/residents/detainees: 1) searches conducted only by medical staff; 2) searches conducted by female staff only, especially given there is no prohibition on the pat-searches female staff can perform (except in juvenile facilities); and 3) asking inmates/residents/detainees to identify the gender of staff with whom they would feel most comfortable conducting the search. Records reflecting all staff with inmate contact has been trained in the requirements for searches in accordance with the PREA standards have been viewed. Interviews with random staff and inmates support compliance with searches.

Compliance finding based on the following:

Documents – policies and excerpts listed above. Review of strip search logs which demonstrated that cross-gender strip searches have not occurred as reported by the facility in the pre-audit questionnaire.

Interviews- No interview conducted conflicted with a finding of compliance.

Observations – Overall observations made during the on site audit of detainee cells, shower area and booking operations. Random observations of video monitoring of the lock up operations.

115.116	Detainees with disabilities and detainees who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) HSO 4.3.1 Access to Care, Initial Medical Screening addresses all aspects of disabilities, ensuring meaningful access to all aspects of the Prison Rape Prevention Act standards. Training for all staff addresses these issues as well as policy. Training records from 2016 and 2017 support staff completion. Additional training documents requested during the audit support a finding of compliance. (b) Translation services are available from three different services. (c) HSO 4.3.1 Access to Care, Initial Medical Screening as well as the training curriculum ensure that inmates are not used for translation of limited English speaking inmates during the first response and investigation, unless no other options are available. Compliance finding based on the following: Documents – HSO 4.3.1 Access to Care, Initial Medical Screening, training curriculum and review of training records. Interviews- All interviews with inmates and staff. Staff were aware of other staff who are bilingual and know of the language line services. Case management staff work closely together, meeting weekly as a team which includes the mental health staff to monitor special needs. Observations – Observations made during the audit regarding inmates with special needs

support a finding of compliance as well.

115.117 Hiring and promotion decisions **Auditor Overall Determination:** Exceeds Standard **Auditor Discussion** (a) HSO 7.2.3 Internal Affairs/Background Check addresses all requirements of this subsection. (b) HSO 7.2.3 Internal Affairs/Background Check does afford the consideration of incidents of sexual harassment before hiring, promoting or using the services of staff/contractors. (c) HSO 7.2.3 Internal Affairs/Background Check states, Before hiring new employees, the HJHC shall: a. Perform a criminal background records check; and b. 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. (d) HSO 7.2.3 Internal Affairs/Background Check states The HJHC shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates. (e) HSO 7.2.3 Internal Affairs/Background Check states, The HJHC shall 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. (f) HSO 7.2.3 Internal Affairs/Background Check states, The HJHC shall ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph 3 (a-c) under the Policy statement above, in written applications or interviews for hiring or promotions and in any interviews or written self- evaluations conducted as part of reviews of current employees. The HJHC shall also impose upon employees a continuing affirmative duty to disclose any such misconduct. (g) HSO 7.2.3 Internal Affairs/Background Check states, Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. Exceeds compliance finding based on the following: Documents - Policy requires annual background checks, review of randomly requested documents from 22 staff support annual background checks are conducted. Review of records for five staff hired in the past year support compliance for asking PREA questions prior to hiring and having staff sign documents acknowledging a continuing duty to report.

Interviews- Interview with the Sheriff, Human Resource coordinator and three newly hired staff

Observations – Overall observations made during the on site portion of the audit.

support compliance for the requirements of this standard.

115.118	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facility has not made any substantial modifications to existing buildings or expansions. Compliance finding based on the following: Documents – facility diagram, documents regarding video monitoring. Interviews-Interview with the sheriff discussed plans for modifications and how PREA will be a factor.
	Observations – Overall observations made during the audit from the on site audit as well as the audit conducted three years ago. Observations of video monitoring system.

115.121 Evidence protocol and forensic medical examinations Auditor Overall Determination: Meets Standard **Auditor Discussion** (a & b) HSO 6.3.2 Criminal and Administrative Investigations supports the use of a uniform evidence collection based on 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. (c) HSO 6.3.2 Criminal and Administrative Investigations states, The HJHC shall 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. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The HJHC shall document its efforts to provide SAFEs or SANEs. (Refer to Disorder Management Reaction Plan #15 Sexual Assault/Abuse Response Plan). The hospital, which is 3-5 minutes from the facility is designated SANE site hospital by the State of Massachusetts. (d) HSO 6.3.2 Criminal and Administrative Investigations states, As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. (e) HSO 6.3.2 Criminal and Administrative Investigations states, As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. (f) The agency does conduct administrative and criminal investigations of sexual abuse. Compliance finding based on the following: Documents - policy - HSO 6.3.2 Criminal and Administrative Investigations, MOU with the Rape Crisis center, documentation regarding hospital designation as a SANE/SAFE hospital in the state found on the internet, investigator training documentation. Interviews- Interviews with the investigators and mental health staff.

Observations - No cases have occurred during the previous 12 months that required a

SANE/SAFE exam. The auditor found no evidence to contradict this statistic.

115.122	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) HSO 6.3.2 Criminal and Administrative Investigations states, The HJHC shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. In instances in which an inmate incarcerated at the Hampshire Jail and House of Correction is alleged to have committed any act covered by criminal law, including sexual assault, the case is referred to appropriate law enforcement officials for investigation and possible prosecution. (b, c d) Not applicable - unless a unique situation warranted the need for an outside investigation. Then the investigators would be the point of contact as they are with other criminal investigations that are completed by an outside agency. Compliance finding based on the following: Documents – policy - HSO 6.3.2 Criminal and Administrative Investigations, facility Reaction Plan, training curriculum. Review of three completed investigations from the previous 12
	months and one recent allegation support compliance. Interviews- All Interviews with the Sheriff, investigators, and random staff support compliance.

115.131 Employee and volunteer training

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

HSO 7.2.5 Employee, Contractor & Volunteer Orientation states, The HJHC shall train all employees who may have contact with inmates on:

Its zero-tolerance policy for sexual abuse and sexual harassment; Refer to HSO 7.5.13 Zero Tolerance

How to fulfill their responsibilities under HJHC sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; Inmates' right to be free from sexual abuse and sexual harassment;

The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;

The dynamics of sexual abuse and sexual harassment in confinement;

The common reactions of sexual abuse and sexual harassment victims;

How to detect and respond to signs of threatened and actual sexual abuse;

How to avoid inappropriate relationships with inmates;

How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and

How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. The training curriculum addresses each area listed.

HSO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic Violence and Stalking, states The Hampshire Sheriff's Office (HSO) has a zero-tolerance policy for sexual abuse, assault, harassment, domestic violence and stalking occurring within or outside the workplace. It is the policy of the HSO that all employees, inmates (HSO #4.4.14M Sexual Assault/Abuse, Reporting & Referral), contractors and volunteers work in an environment free from all forms of sexual abuse, assault, harassment, domestic violence and stalking. These acts undermine the integrity of the work place and the personal safety of the individual. HSO 7.2.5 Employee, Contractor & Volunteer Orientation states volunteers with inmate contact will be trained on the following at orientation: PREA Training and Education for Contractor & Volunteer 115.32 Refer to HSO 7.5.13 Zero Tolerance.

- (1) The HJHC shall ensure 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. 115.32 (a)-1)
- (2) 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, but all volunteers and contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.
- (b) Refresher training occurs through Roll Call Memos, posters, or email between the annual training. Roll call documents were provided for 7/4/2016, 11/20/2016, 11/21/2016, 7/18/2016 which addressed various aspects of the PREA requirements.
- (c) staff and volunteers sign noting they have understood the training they received. Compliance finding based on the following:

Documents – policy, training curriculum and review of randomly selected training documents support compliance with the requirements of the training and the requirement to sign that staff understood the training. Review of memos issued to staff that constitute refresher training

support that various aspects of PREA requirements are addressed during the year in addition to the posters noted throughout the facility. Review of randomly selected documents for volunteers acknowledging the PREA requirements and signing indicating they understand. Training with staff and volunteers occurs annually, therefore exceeding the standard.

Detainee, contractor, and inmate worker notification of the agency's zero-115.132 tolerance policy Auditor Overall Determination: Meets Standard **Auditor Discussion** (a) 2.1.16 Inmate, Orientation Education Information is provided to inmates about sexual abuse/assault including: a. prevention/intervention b. self-protection c. reporting sexual abuse/assault d. treatment and counseling (b) HSO 7.2.5 Employee, Contractor & Volunteer Orientation states, The HJHC shall train all employees who may have contact with inmates on: Its zero-tolerance policy for sexual abuse and sexual harassment; Refer to HSO 7.5.13 Zero Tolerance How to fulfill their responsibilities under HJHC sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; Inmates' right to be free from sexual abuse and sexual harassment; The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; The dynamics of sexual abuse and sexual harassment in confinement; The common reactions of sexual abuse and sexual harassment victims; How to detect and respond to signs of threatened and actual sexual abuse; How to avoid inappropriate relationships with inmates; How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. The training curriculum addresses each area listed.

Compliance finding based on the following:

Documents – policy - 2.1.16 Inmate, Orientation Education, Inmate Handbook and Inmate brochures. Documents confirming contractor training

Interviews- Staff who routinely work the Lock Up facility verified compliance.

Observations – The auditor was able to observe random video footage of overnight operations. Posters are visible to reinforce compliance with PREA requirements.

115.134	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
training provided to all employees pursuant to HSO 7.2.5 Employee, Contractor & Orientation, the HJHC shall ensure that, to the extent the HJHC itself conducts sex investigations, its investigators have received training in conducting such investigate confinement settings. (b) Investigator training curriculum includes techniques for interviewing sexual abuse proper use of Miranda and Garrity, sexual abuse evidence collection in confinement and the criteria to substantiate a case for administrative action or prosecution refer Investigators attend the state-wide investigation training with the Massachusetts De	(a)HSO 7.2.17 Specialized Training PREA Investigators states, In addition to the general training provided to all employees pursuant to HSO 7.2.5 Employee, Contractor & Volunteer Orientation, the HJHC shall ensure that, to the extent the HJHC itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings. (b) Investigator training curriculum includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity, sexual abuse evidence collection in confinement settings and the criteria to substantiate a case for administrative action or prosecution referral. Investigators attend the state-wide investigation training with the Massachusetts Department of Corrections staff. Training is a 40 hours course for basic investigations with an additional 24 hours dedicated to investigations for PREA.
	(c) Documentation has been reviewed showing that four staff at the facility have completed the training.(d) not applicable
	Compliance finding based on the following: Documents –HSO 7.2.17 Specialized Training PREA Investigators, training curriculum, review of three completed investigations from the Jail and House of Corrections. Interviews- Interviews with the investigators, certificates of completion

 $Observations-Overall\ observations\ during\ the\ audit.$

Screening for risk of victimization and abusiveness
Auditor Overall Determination: Meets Standard
Auditor Discussion
(a) is not applicable (b) HSO 2.1.5 Admission Process,/Screening, Initial Classification Process, Inmate Property states, PREA Screening & Initial Classification All inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. All detainees in this lock up facility are placed in single cells, with complete camera coverage except over the toilet from the time they enter to the time they leave. (c & d) Inmates are assessed to address language, mental health and medical needs before placed in the holding cell. Compliance based on the following: Documents: Policy and screening criteria Interviews: Booking staff and staff who have worked in the Lock up facility support compliance. Observations: Random video observation as well as the observations of the 24 cells and shower area in the Lock Up section.

115.151	Detainee reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) HSO 6.2.5 Inmate/Staff Reporting of Sexual Abuse and Sexual Harassment states, The HJHC shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. The inmate handbook provides detailed information as follows: Inmates who have an unresolved complaint as it relates to sexual harassment or sexual abuse, may formally process their complaints by informing any staff member of said abuse or harassment, writing to the facility superintendent, anonymously report in writing by placing complaint into medical drop box or calling the facility hotline (413) 584-0591. The inmate may request assistance from family members, attorneys, outside advocates, fellow inmates or staff. All complaints shall be forwarded to the Assistant Superintendent's office; he/she will assign the appropriate staff to investigate the complaint. Compliance finding based on the following: Documents – policy supports compliance. Interviews-Staff interviews demonstrated they clearly understand and will support any and all observations, suspicions, reports of abuse or harassment, neglect or retaliation. No lock up detainees were available to be interviewed during the audit. Observations – The lock up facility has posters up providing information on the various ways a report can be made,

115.154	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	H.SO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic Violence and Stalking states, Any employee who receives knowledge of sexual abuse and sexual harassment, on an inmate, employee or person in the facility, including third party and anonymous reports, must report the information to the facility's designated investigators. HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states, The HJHC shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators. Poster support the acceptance of third party reports and provide information regarding a hot line number as well as the Rape Crisis number.

115.161 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) H.SO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic Violence and Stalking states Responsibilities of All HSO Employees: The HSO shall 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; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states, The HJHC requires all staff to report immediately and according to HJHC 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 HJHC; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.
- (b) H.SO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic Violence and Stalking states Apart from reporting to designated supervisors or officials, staff shall not reveal 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. HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states, Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in HJHC policy, to make treatment, investigation, and other security and management decisions.
- (c) HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states, Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (1) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.
- (d) HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states, If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable person's statute, the HJHC shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.
- (e) H.SO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic Violence and Stalking states, Any employee who receives knowledge of sexual abuse and sexual harassment, on an inmate, employee or person in the facility, including third party and anonymous reports, must report the information to the facility's designated investigators. HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states, The HJHC shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.

Compliance finding based on the following:

Documents – policy H.SO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic Violence and Stalking and HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment

Interviews- Interviews with all staff, the Sheriff, the investigators and the PREA Compliance

Manager support compliance. Staff provided meaningful response to the overall PREA program, such as understanding of zero tolerance, reporting suspicions of abuse, harassment, neglect or retaliation, maintaining confidentiality, and preservation of evidence. Observations – Overall observations during the audit, such as the posters throughout the facility.

115.162	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states, When the HJHC learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate. The facility reports there have been no instances of risk of imminent sexual abuse. The auditor found no reason during the pre audit and audit to dispute this statement. Compliance finding based on the following: Documents – policy HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment, review of investigations. Interviews- Sheriff, PREA Manager, investigators and supervisors interviews support compliance. Observations – Overall observations of the audit.

115.163	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the HJHC shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. The facility reports this occurred one time during the audit period. Documentation of notification, signed by the Sheriff was provided for review demonstrating compliance. (b) HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states Such notification shall be provided as soon as possible, but no later than seventy-two (72) hours after receiving the allegation. (c) HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states The HJHC shall document that it has provided such notification
	(d) HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards. Two allegations were received. Documentation reviewed demonstrated prompt investigation. Compliance finding based on the following: Documents – policy HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment, review of investigations.
	Interviews- Sheriff, PREA Manager, investigators and supervisors interviews support compliance.

Observations – Overall observations of the audit.

115.164 Staff first responder duties Auditor Overall Determination: Meets Standard **Auditor Discussion** (a) HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: a. Separate the alleged victim and abuser; b. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence: c. If the abuse occurred within a time period that still allows for the collection of physical evidence, 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; and d. If the abuse occurred within a time period that still allows for the collection of physical evidence, 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. (b) HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states, 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. In addition, the facility has a specific SEXUAL ASSAULT/ABUSE RESPONSE PLAN included with the facility reaction plans that provides detailed step by step information on the appropriate response. There is a standardized chain of evidence form as well as a PREA response kit maintained to help ensure the response is handled appropriately.

Compliance finding based on the following:

Documents – policy, HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment, facility Reaction Plan, PREA kit.

Interviews- All staff interviewed support compliance, demonstrating knowledge of the process and their role whether they were a first responder or not.

Observations – Overall observations made during the audit.

115.165	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states, The HJHC has developed a written institutional 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. Refer to HSO Disorder Management Reaction Plan #15 Sexual Assault/Abuse Response. The plan coordinate all actions among staff including first responders, medical/mental health staff, investigators and leadership. (b) Transfer from the Lock Up facility would be to the Jail, unless it was a female detainee. Otherwise, the receiving facility would be informed as based on interviews with the Sheriff, investigators and PREA compliance Coordinator/Managers. Compliance finding based on the following: Documents – HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment, HSO Disorder Management Reaction Plan #15 Sexual Assault/Abuse Response Interviews- Staff interviews support knowledge and understanding of the policy and reaction plan, PREA kit Observations – Overall observations during the audit.

115.166	Preservation of ability to protect detainees from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states, Neither the HJHC nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. This facility has staff that belong to one union, or three associations. Review of the contract supports that the facility administration cannot be prevented from removing staff if alleged of abuse. Compliance finding based on the following: Documents – policy, HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment, review of contracts for the union and three associations. Interviews- Interview with the Sheriff Observations – Overall observations during the audit.

115.167 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

(a) HSO 4.4.14M Administrative Response for Inmate Report of Sexual

Assault/Abuse/Harassment states, The HJHC shall 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. Any allegations of sexual abuse or sexual harassment of inmates will be monitored for retaliation by the inmate's Case Manager. Any allegations of sexual abuse or sexual harassment of staff will be monitored for retaliation by the ADS Administration and/or ADS Security.

(b) HSO 4.4.14M Administrative Response for Inmate Report of Sexual

Assault/Abuse/Harassment states, The HJHC employs 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 that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. A case manager or mental health staff is designated as the person who monitors for retaliation.

(c) HSO 4.4.14M Administrative Response for Inmate Report of Sexual

Assault/Abuse/Harassment states, For at least 90 days following a report of sexual abuse or sexual harassment, the HJHC shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse or sexual harassment and of inmates who were reported to have suffered sexual abuse or sexual harassment to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation.

(d) HSO 4.4.14M Administrative Response for Inmate Report of Sexual

Assault/Abuse/Harassment states, If any other individual who cooperates with an investigation expresses a fear of retaliation, the HJHC shall take appropriate measures to protect that individual against retaliation.

(e) HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment states, The HJHC's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.

Compliance finding based on the following:

Documents – HSO 4.4.14M Administrative Response for Inmate Report of Sexual Assault/Abuse/Harassment

Interviews- Interview with the mental health staff and two case managers as well as the Sheriff and PREA Compliance Manager.

Observations – Overall observations during the audit. No investigations occurred at the Lock Up facility therefore monitoring was not warranted.

115.171 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

- (a) HSO 6.3.2 Criminal and Administrative Investigations states When HJHC conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. (b) HSO 6.3.2 Criminal and Administrative Investigations states Where sexual abuse is alleged, the HJHC shall use investigators who have received special training in sexual abuse investigations pursuant to HSO 7.2.17 Specialized Training PREA Investigators. Four staff have been trained; they cover all shifts.
- (c) HSO 6.3.2 Criminal and Administrative Investigations states Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. Review of reports reflects that all available relevant evidence is collected including video recordings and witness statements. For the previous 12 months, no physical evidence/DNA was collected as it was not relevant to the complaint.
- (d) HSO 6.3.2 Criminal and Administrative Investigations states When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. Interview with the investigators conforms the prosecutor will be contacted if the case appears to be criminal.
- (e) HSO 6.3.2 Criminal and Administrative Investigations states 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 inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. Interviews support that polygraphs are not used; credibility is based on the statements and evidence.
- (f) HSO 6.3.2 Criminal and Administrative Investigations states, Administrative investigations:
- a. Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and b. 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. Investigation reports follow a consistent format that includes a summary of staff actions, overview of actions.
- (g) HSO 6.3.2 Criminal and Administrative Investigations states Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.
- (h) HSO 6.3.2 Criminal and Administrative Investigations states Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution
- (I) HSO 6.3.2 Criminal and Administrative Investigations states The agency shall retain all written reports referenced in sections 6 and 7 of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.
- (j)HSO 6.3.2 Criminal and Administrative Investigations states The departure of the alleged abuser or victim from the employment or control of the HJHC shall not provide a basis for terminating an investigation.

(I) HSO 6.3.2 Criminal and Administrative Investigations states When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

The same investigators are used for allegations occurring at the Lock Up facility, that are used at the Jail & House of Correction.

Compliance finding based on the following:

Documents – HSO 6.3.2 Criminal and Administrative Investigations, three completed investigations from the Jail and House of Correction. Interviews-Interview with the Sheriff and the PREA Compliance Coordinator/Manager. Investigator interviews support compliance with all aspects of this standard.

Observations – Overall observations during the audit.

Auditor Overall Determination: Meets Standard Auditor Discussion HSO 6.3.2 Criminal and Administrative Investigations states, Evidentiary standard for administrative investigations 1. The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The same investigators are used for the Jail & House of Corrections for the Lock Up facility. Compliance finding based on the following: Documents – review of policy and the three investigations from the previous 12 months from the Jail and House of Corrections.. Interviews- Investigators confirmed the use of a preponderance of evidence.

Observations – observation of video evidence for one pending investigation.

115.176 **Disciplinary sanctions for staff Auditor Overall Determination:** Meets Standard **Auditor Discussion** (a) HSO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic Violence and Stalking states Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. (b) HSO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic Violence and Stalking states Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. (c) HSO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic Violence and Stalking states 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. (d) HSO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic Violence and Stalking states 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. Zero staff have been disciplined or terminated for sexual abuse or harassment during the audit period. The auditor found no reason during the pre audit or audit at the facility to dispute this. Compliance finding based on the following: Documents – policy, randomly selected documents from personnel files. Interviews- staff and inmate interviews support compliance.

Observations – overall observations of the audit process.

115.177	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	 (a) HSO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic Violence and Stalking states Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. (b) HSO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment, Domestic Violence and Stalking states The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. The facility reports that no volunteers have been disciplined or terminated due to violations of sexual abuse or sexual harassment. During the pre audit and the audit, the auditor found no reason to dispute this.
	Compliance finding based on the following: Documents – policy, HSO 7.5.13 Zero Tolerance for Sexual Abuse, Assault, Harassment,
	Domestic Violence and Stalking, review of volunteer orientation and annual reviews Interviews- staff and inmate interviews support compliance. Interview with the PREA Compliance Manager who conducts volunteer orientation and annual review. Observations – overall observations of the audit process.

115.178	Referral for prosecution for detainee-on-detainee sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	 (a) HSO 6.3.2 Criminal and Administrative Investigations states, In instances in which an inmate incarcerated at the Hampshire Jail and House of Correction is alleged to have committed any act covered by criminal law, including sexual assault, the case is referred to appropriate law enforcement officials for investigation and possible prosecution. (b) is not applicable Compliance based on the following: Policy with excerpt noted above. Interview with the investigators confirms the prosecutor will be contacted if the case appears
	to be criminal. Overall observations during the audit process.

115.182 Access to emergency medical and mental health services Auditor Overall Determination: Meets Standard **Auditor Discussion** (a) HSO 4.3.5 Emergency Health Care Services states The facility provides 24-hour emergency care availability. Inmates with medical emergencies shall be immediately transported to the local emergency room. Inmate victims of sexual abuse shall 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. (b) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The facility reports that no situation warranted a need to go to the hospital for medical exam/treatment in the previous 12 months. During the pre audit and audit, the auditor found no reason to dispute this. Compliance finding based on the following: Documents - Policy HSO 4.3.5 Emergency Health Care Services Interviews- PREA Coordinator/Manager and Sheriff support compliance. Medical staff indicate that emergency treatment for anyone is appropriately provided; the hospital is approximately 5

minutes from the facility. The hospital is designated as a SANE/SAFE hospital in the state of Massachusetts.

Observations – Overall observations during the on site audit support compliance.

115.186 | Sexual abuse incident reviews **Auditor Overall Determination:** Meets Standard **Auditor Discussion** (a) HSO 4.4.18 PREA Data Collection, Review, Storage states The HJHC shall 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. (b) HSO 4.4.18 PREA Data Collection, Review, Storage states, Such review shall ordinarily occur within 30 days of the conclusion of the investigation (c) HSO 4.4.18 PREA Data Collection, Review, Storage states The review team shall include upper-level management officials, with input from line supervisors, investigators, medical or mental health practitioners and other appropriate staff. (d) HSO 4.4.18 PREA Data Collection, Review, Storage states The review team shall: a. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; b. 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 was motivated or otherwise caused by other group dynamics at the facility; c. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; d. Assess the adequacy of staffing levels in that area during different shifts; e. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (e) HSO 4.4.18 PREA Data Collection, Review, Storage states Findings a. The review team shall, prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (1)(a)-(1)(e) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager b. The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so. Compliance finding based on the following:

Documents – Policy and review of completed incident review reports from the Jail and House of Correction. The team consisted of the Major, Captain, Case manager, and mental health staff.

Interviews- PREA Coordinator/Manager and Sheriff support compliance.

Observations – Overall observations during the onsite audit support compliance.

115.187	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	 (a) HSO 4.4.18 PREA Data Collection, Review, Storage states, The HJHC shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. (b) HSO 4.4.18 PREA Data Collection, Review, Storage states, The HJHC shall aggregate the incident-based sexual abuse data at least annually (c) HSO 4.4.18 PREA Data Collection, Review, Storage states, The HJHC shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. (d) HSO 4.4.18 PREA Data Collection, Review, Storage states, The HJHC shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews
	 (e) This is not applicable to this facility. (f) HSO 4.4.18 PREA Data Collection, Review, Storage states, Upon request, the HJHC shall provide all such data from the previous calendar year to the Department of Justice no later than June 30. Compliance finding based on the following: Documents – Review of aggregated date for the past three years; the DOJ has not requested a Survey of Sexual Victimization from this facility. Interviews- PREA Coordinator/Manager and Sheriff interviews support compliance. Observations – Overall observations during the on site audit.

115.188	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) HSO 4.4.18 PREA Data Collection, Review, Storage states, The HJHC shall 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: a. Identifying problem areas; b. Taking corrective action on an ongoing basis; and c. Preparing an annual report of its findings and corrective actions for each facility, as well as the HJHC as a whole. (b) HSO 4.4.18 PREA Data Collection, Review, Storage states, Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the HJHC's progress in addressing sexual abuse. (c) HSO 4.4.18 PREA Data Collection, Review, Storage states, The HJHC's report shall be approved by the Sheriff or designee and made readily available to the public through its website or, if it does not have one, through other means. The reports for 2015, 2016 and 2017 are available on http://www.hampshiresheriffs.com/prison-rape-elimination-act-prea. (d) The HJHC may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted. A review of the reports revealed there was not need for redaction. Compliance finding based on the following: Documents – Review of aggregated date for the past three years; HSO 4.4.18 PREA Data Collection, Review, Storage Interviews- PREA Coordinator/Manager and Sheriff interviews support compliance. Observations – Overall observations during the on site audit.

115.189	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) HSO 4.4.18 PREA Data Collection, Review, Storage states, The HJHC shall ensure that data collected pursuant to § 115.87 are securely retained (b) HSO 4.4.18 PREA Data Collection, Review, Storage states, The HJHC shall 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. There are no other facilities under its direct control nor private facilities. (c) HSO 4.4.18 PREA Data Collection, Review, Storage states, Before making aggregated sexual abuse data publicly available, the HJHC shall remove all personal identifiers. There are no personal identifiers on the reports posted on the web site. (d) HSO 4.4.18 PREA Data Collection, Review, Storage states, The HJHC shall maintain sexual abuse data collected pursuant to § 115.87 for at least ten (10) years after the date of the initial collection unless Federal, State, or local law requires otherwise. The standard requirements were implemented in 2013; therefore ten years has not passed to access this requirement. Compliance finding based on the following: Documents – Review of aggregated date for the past three years; HSO 4.4.18 PREA Data Collection, Review, Storage Interviews- PREA Coordinator/Manager and Sheriff support compliance. Observations – Overall observations during the on site audit. Files are securely retained in the investigators office, file cabinet with limited access.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA audit report dated June 2015 is published on the facility website. This facility was audited three years ago by this auditor. The auditor was allowed access to all areas of the facility, able to review and retain all documentation requested to verify compliance with the standards and interview staff in a private setting. No detainees were available for interview. No letters were received in response to the posters announcing the audit.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The PREA audit report dated June 2015 is published on the facility website.

Appendix: Provision Findings

115.111 (a)	Zero tolerance of sexual abuse and sexual harassment	
	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

115.111 (b)	Zero tolerance of sexual abuse and sexual harassment	
	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 lockups?	yes

115.112 (a)	Contracting with other entities for the confinement of detainees	
	If this agency is law enforcement and it contracts for the confinement of its lockup detainees in lockups operated by private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees.)	na

115.112 (b)	Contracting with other entities for the confinement of detainees	
	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 law enforcement agency does not contract with private agencies or other entities for the confinement of detainees OR the response to 115.112(a)-1 is "NO".)	na

115.113 (a)	Supervision and monitoring	
	Does the agency ensure that it has developed for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?	yes
	Does the agency ensure that it has documented for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The physical layout of each lockup?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the detainee population?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes

115.113 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the lockup document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes

115.113 (c)	Supervision and monitoring	
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: 1. The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: The lockup's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: The resources the lockup has available to commit to ensure adequate staffing levels?	yes

115.113 (d)	Supervision and monitoring	
	If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Continuous direct sight and sound supervision?	yes
	If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Single-cell housing or placement in a cell actively monitored on video by a staff member sufficiently proximate to intervene, unless no such option is determined to be feasible?	yes

115.114 (a)	Juveniles and youthful detainees	
	Are juveniles and youthful detainees held separately from adult detainees? (N/A if the facility does not hold juveniles or youthful detainees (detainees <18 years old).)	na

115.115 (a)	Limits to cross-gender viewing and searches	
	Does the lockup always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

115.115 (b)	Limits to cross-gender viewing and searches	
	Does the lockup document all cross-gender strip searches and cross-gender visual body cavity searches?	yes

115.115 (c)	Limits to cross-gender viewing and searches	
	Does the lockup implement policies and procedures that enable detainees 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 lockup require staff of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing?	yes

115.115 (d)	Limits to cross-gender viewing and searches	
	Does the lockup always refrain from searching or physically examining transgender or intersex detainees for the sole purpose of determining the detainee's genital status?	yes
	If a detainee's genital status is unknown, does the lockup determine genital status during conversations with the detainee, 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

115.115 (e)	Limits to cross-gender viewing and searches	
	Does the agency train law enforcement 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 agency train law enforcement staff in how to conduct searches of transgender and intersex detainees in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.116 (a)	Detainees with disabilities and detainees who are limited English proficient	
	Does the agency take appropriate steps to ensure that detainees with	yes

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: Detainees who are deaf or hard of hearing?	
Does the agency take appropriate steps to ensure that detainees 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: Detainees who are blind or have low vision?	yes
Does the agency take appropriate steps to ensure that detainees 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: Detainees who have intellectual disabilities?	yes
Does the agency take appropriate steps to ensure that detainees 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: Detainees who have psychiatric disabilities?	yes
Does the agency take appropriate steps to ensure that detainees 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: Detainees who have speech disabilities?	yes
Does the agency take appropriate steps to ensure that detainees 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 the overall determination notes.)	yes
Do such steps include, when necessary, ensuring effective communication with detainees 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 detainees with disabilities including detainees who: Have intellectual disabilities?	yes
Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees 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 detainees with disabilities including detainees who: are blind or have low vision?	yes
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115.116 (b)	Detainees with disabilities and detainees 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 detainees who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.116 (c)	Detainees with disabilities and detainees who are limited English proficient	
	Does the agency always refrain from relying on detainee interpreters, detainee readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under §115.164, or the investigation of the detainee's allegations?	yes

115.117 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees 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 detainees 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 detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: o 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 detainees 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 detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes

115.117 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with detainees?	yes

115.117 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with detainees, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with detainees, 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

115.117 (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 detainees?	yes

115.117 (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 detainees or have in place a system for otherwise capturing such information for current employees?	yes

115.117 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with detainees 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 detainees 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

115.117 (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

115.117 (h)	Hiring and promotion decisions	
	Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes

115.118 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new lockup or planned any substantial expansion or modification of existing lockups, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect detainees from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na

115.118 (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 detainees 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

115.121 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse in its lockups, 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

115.121 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.121 (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

115.121 (d)	Evidence protocol and forensic medical examinations	
	If the detainee is transported for a forensic examination to an outside hospital that offers victim advocacy services, does the agency permit the detainee to use such services to the extent available, consistent with security needs?	yes

115.121 (e)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting any form of criminal or administrative sexual abuse investigations.)	na

115.122 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.122 (b)	Policies to ensure referrals of allegations for investigations	
	If another law enforcement agency is responsible for conducting investigations of allegations of sexual abuse and sexual harassment in its lockups, does the agency have a policy in place to ensure that such allegations are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na
	Has the agency published such policy, including a description of responsibilities of both the agency and the investigating entity, on its website or, if it does not have one, made the policy available through other means? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na
	Does the agency document all such referrals? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na

115.131 (a)	Employee and volunteer training	
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: Its zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The dynamics of sexual abuse and sexual harassment in confinement, including which detainees are most vulnerable in lockup settings?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to communicate effectively and professionally with all detainees?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.131 (b)	Employee and volunteer training	
	Have all current employees and volunteers who may have contact with detainees received such training?	yes
	Does the agency provide each employee and volunteer with annual refresher information to ensure that they know the agency's current sexual abuse and sexual harassment policies and procedures?	yes

115.131 (c)	Employee and volunteer training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes

115.132 (a)	Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy	
	During the intake process, do employees notify all detainees of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes

115.132 (b)	Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy	
	Does the agency ensure that, upon entering the lockup, all contractors and any inmates who work in the lockup are informed of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes

115.134 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees and volunteers pursuant to §115.131, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	yes

115.134 (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 115.121(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 115.121(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 115.121(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 115.121(a).)	yes

115.134 (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 115.121(a).)	yes

115.141 (a)	Screening for risk of victimization and abusiveness	
	If the lockup is not utilized to house detainees overnight, before placing any detainees together in a holding cell do staff consider whether, based on the information before them, a detainee may be at a high risk of being sexually abused? (N/A if the lockup is utilized to house detainees overnight.)	yes
	When appropriate, do staff take necessary steps to mitigate such danger to the detainee? (N/A if the lockup is utilized to house detainees overnight.)	yes

115.141 (b)	Screening for risk of victimization and abusiveness	
	If the lockup is utilized to house detainees overnight, are all detainees screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees? (N/A if lockup is NOT used to house detainees overnight.)	yes

115.141 (c)	Screening for risk of victimization and abusiveness	
	In lockups described in paragraph (b) of this section, do staff always ask the detainee about his or her own perception of vulnerability? (N/A if lockup is NOT used to house detainees overnight.)	yes

115.141 (d)	Screening for risk of victimization and abusiveness	
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has a mental, physical, or developmental disability. (N/A if lockup is NOT used to house detainees overnight.)	yes
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The age of the detainee? (N/A if lockup is NOT used to house detainees overnight.)	yes
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The physical build and appearance of the detainee? (N/A if lockup is NOT used to house detainees overnight.)	yes
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has previously been incarcerated? (N/A if lockup is NOT used to house detainees overnight.)	yes
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The nature of the detainee's alleged offense and criminal history? (N/A if lockup is NOT used to house detainees overnight.)	yes

115.151 (a)	Detainee reporting	
	Does the agency provide multiple ways for detainees to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple ways for detainees to privately report: Retaliation by other detainees or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple ways for detainees to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.151 (b)	Detainee reporting	
	Does the agency also provide at least one way for idetainees 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 entity or office able to receive and immediately forward detainee reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the detainee to remain anonymous upon request?	yes

115.151 (c)	Detainee reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment ?	yes

115.151 (d)	Detainee reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of detainees?	yes

115.154 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment in its lockups?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a detainee?	yes

115.161 (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 an agency lockup?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against detainees or staff who reported such an incident?	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

115.161 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, do 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, and investigation decisions?	yes

115.161 (c)	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

115.161 (d)	Staff and agency reporting duties	
	Does the agency report all allegations of sexual abuse, including third- party and anonymous reports, to the agency's designated investigators?	yes

115.162 (a)	Agency protection duties	
	When the agency learns that a detainee is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the detainee?	yes

115.163 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a detainee 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

115.163 (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

115.163 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes

115.163 (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

115.164 (a)	Staff first responder duties	
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.164 (b)	Staff first responder duties	
	If the first staff responder is not a law enforcement staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify law enforcement staff?	yes

115.165 (a)	Coordinated response	
	Has the agency 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 a lockup incident of sexual abuse?	yes
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law and unless the victim requests otherwise, inform the receiving facility of the incident and the victim's potential need for medical or social services?	yes

115.165 (b)	Coordinated response	
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the incident unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.)	yes
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the victim¹s potential need for medical or social services unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.)	yes

115.166 (a)	Preservation of ability to protect detainees from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

115.167 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes

115.167 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.167 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees or staff who have reported sexual abuse?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees who were reported to have suffered sexual abuse?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Act promptly to remedy any such retaliation?	yes

115.167 (d)	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

115.171 (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 115.121(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 115.121(a).)	yes

115.171 (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 115.134?	yes

115.171 (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

115.171 (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

115.171 (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 detainee or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a detainee who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

115.171 (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

115.171 (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

115.171 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes

115.171 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.171(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes

115.171 (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 lockup or agency does not provide a basis for terminating an investigation?	yes

115.171 (I)	Criminal and administrative agency investigations	
	When outside agencies investigate sexual abuse, does the agency 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 115.121(a).)	na

115.172 (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

115.176 (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

115.176 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.176 (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

115.176 (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: o 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

115.177 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with detainees?	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

115.177 (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 detainees?	yes

115.178 (a)	Referral for prosecution for detainee-on-detainee sexual abuse	
	When there is probable cause to believe that a detainee sexually abused another detainee in a lockup, does the agency refer the matter to the appropriate prosecuting authority?	yes

115.178 (b)	Referral for prosecution for detainee-on-detainee sexual abuse)
	If the agency itself is not responsible for investigating allegations of sexual abuse, does the agency inform the investigating entity of this policy? (N/A if the agency/facility is responsible for administrative and criminal investigations. See 115.121(a).)	na

115.182 (a)	Access to emergency medical and mental health services	
	Do detainee victims of sexual abuse in lockups receive timely, unimpeded access to emergency medical treatment?	yes

115.182 (b)	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

115.186 (a)	Sexual abuse incident reviews	
	Does the lockup conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

115.186 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes

115.186 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors and investigators?	yes

115.186 (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 was motivated or otherwise caused by other group dynamics at the lockup?	yes
	Does the review team: Examine the area in the lockup 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 §§ 115.186(d) (1)-(d)(5), and any recommendations for improvement and submit such report to the lockup head and agency PREA coordinator?	yes

115.186 (e)	Sexual abuse incident reviews	
	Does the lockup implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.187 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at lockups under its direct control using a standardized instrument and set of definitions?	yes

115.187 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes

115.187 (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 Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice, or any subsequent form developed by the Department of Justice and designated for lockups?	yes

115.187 (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

115.187 (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 detainees? (N/A if the agency does not contract for the confinement of its detainees.)	na

115.187 (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.)	na

115.188 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.187 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 § 115.187 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 § 115.187 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 lockup, as well as the agency as a whole?	yes

115.188 (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

115.188 (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

115.188 (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 lockup?	yes

115.189 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.187 are securely retained?	yes

115.189 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from lockups under its direct control and any private agencies 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

115.189 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes

115.189 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.187 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes

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

115.401 (b)	Frequency and scope of audits	
	During each one-year period starting on August 20, 2013, the agency shall ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.	yes

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 within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A only if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.)	yes