

PREA Facility Audit Report: Final

Name of Facility: Fresno County Jail

Facility Type: Prison / Jail

Date Interim Report Submitted: 01/23/2017

Date Final Report Submitted: 08/01/2017

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	☒
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	☒
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	☒
Auditor Full Name as Signed: Adam Eugene Hopkins	Date of Signature: 08/01/2017

AUDITOR INFORMATION	
Auditor name:	Hopkins, Adam
Address:	
Email:	adam@lumicoretraining.com
Telephone number:	
Start Date of On-Site Audit:	2016-08-08
End Date of On-Site Audit:	2016-08-12

FACILITY INFORMATION	
Facility name:	Fresno County Jail
Facility physical address:	1225 M Street, Fresno, California - 93721
Facility Phone	
Facility mailing address:	
The facility is:	☒ County ☐ Federal ☐ Municipal ☐ State ☐ Military ☐ Private for profit ☐ Private not for profit
Facility Type:	☐ Prison ☒ Jail

Primary Contact			
Name:	Nikia Shumate	Title:	Sergeant
Email Address:	nikia.shumate@fresnosheriff.org	Telephone Number:	(559) 600-8588

Warden/Superintendent			
Name:	Tom gattie	Title:	Assistant Sheriff
Email Address:	tom.gattie@fresnosheriff.org	Telephone Number:	(559) 600-8136

Facility PREA Compliance Manager			
Name:		Email Address:	

Facility Health Service Administrator			
Name:	Robert Malone	Title:	Health Services Administrator
Email Address:	robert.malone@corizonhealth.com	Telephone Number:	(559) 600-9351

Facility Characteristics		
Designed facility capacity:	3478	
Current population of facility:	2954	
Age Range	Adults: 18-84	Youthful Residents:
Facility security level/inmate custody levels:	2	
Number of staff currently employed at the facility who may have contact with inmates:		

AGENCY INFORMATION	
Name of agency:	Fresno County Sheriff-Coronors Office
Governing authority or parent agency (if applicable):	
Physical Address:	2200 Fresno Streer, Fresno, California - 93721
Mailing Address:	
Telephone number:	

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

Agency-Wide PREA Coordinator Information			
Name:	Nikia Shumate	Email Address:	nikia.shumate@fresnosheriff.org

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 August 8-12, 2016 Adam Hopkins, Department of Justice certified auditor and President of Lumicore Training, LLC, conducted an on-site visit as part of the PREA audit of the Fresno County Sheriff's Office in Fresno, California. The Office point of contact was Sergeant Nikia Shumate, PREA Coordinator for the Sheriff's Office.

PRE-AUDIT PROCESS

Audit notices were supplied and posted throughout the facility six weeks prior to the on-site review. Email documentation of the notices being sent, received and posted demonstrate the timely posting of the notices. Other than one correspondence from an inmate received following the on-site visit, auditor has not received any further correspondence or mail at the FCSO PREA Audit mail address.

The pre-audit activities included a completion of the Pre-Audit Questionnaire by the PREA Coordinator. This proved problematic following the on-site audit, as the Agency had completed the "Agency" PAQ in error when they should have completed the "Facility" PAQ. Completion of the "Facility" PAQ was requested and took approximately one month for the FCSO PREA Coordinator to complete. PREA Coordinator provided the documentation for pre-audit reviews and activities. Auditor was provided and reviewed Administrative Regulations, Operational Procedures and documentation reflecting what processes were actually employed to prevent, detect and respond to sexual victimization, training curriculum, organizational charts, posters and Inmate Handbook. All material were provided to demonstrate compliance with the PREA standards. Frequent phone conversations with the PREA Coordinator to discuss deficiencies or needed material were had prior to the on-site visit. Interviews of Specialized Staff such as the contracted Medical Health Services Administrator, Rape Crisis Call Center and the SANE/SAFE provider were conducted by phone prior to the on-site audit.

ON-SITE AUDIT

Auditor conducted an entrance conference with facility administration on August 8, 2016. This conference focused on the audit schedule and an overview of the process. Present at the entrance conference were the two Division Captains, PREA Coordinator, Services Lieutenant and the Auditor. Following the entrance conference, the balance of day one and the first three hours of day two were occupied by the facility tour. Auditor was provided a conference room with white board to use as a base of operations. All required interviews and document reviews were outlined on the white board and discussed each morning with the PREA Coordinator and were available to Division Command Staff throughout the on-site audit.

The facility tour was conducted by the PREA Coordinator and consisted of an inspection of every housing area of three separate facilities which fall under the span and control of the Sheriff's Office and PREA Coordinator, all critical service areas, program areas, maintenance areas and administrative offices. All of the areas visited during the site tour were in three separate and distinct buildings, the South Annex, the Main Facility and the North Annex. Each facility housed their own services areas, program areas and

maintenance areas. The Main Facility housed the division administrative offices. During the facility tour Auditor selected random housing units within each area of each facility to speak informally with inmates who were selected at random within those units.

During the facility tour, Auditor noted several issues regarding privacy within the South Annex. These issues have been discussed within the appropriate audit standards. As discussed in the standards, the noted issues will be resolved with the closing of the South Annex and the opening of a new facility, which is in the planning phases. Auditor also noted several areas which could allow for victimization within the facility. Those areas were noted by agency staff during the tour and were corrected immediately. Most notably were two areas within the inmate laundry that were out of the line of site for staff and had no camera coverage. These areas had doors which could be closed and locked when not in use. Auditor had concerns over lines of site in several areas, but camera reviews confirmed that these areas were actually being monitored. One group of inmates in the Main Jail, during the facility tour, voiced their concerns that staff in the observation towers, controlling cameras within the units, routinely zoomed the cameras into the windows of individual cells and viewed the inmates inside the cells. Review of camera angles and ability of the cameras in the towers to zoom, confirmed that staff could not zoom any of the cameras and could not see into the interior of any cells in any of the housing units.

The balance of the on-site audit, was taken up by interviews and document reviews.

Auditor was given full access to all documentation needed for the audit. Much of the documentation was provided pre-audit, however, while on site, auditor reviewed documentation of intake classifications, agency's record management system to confirm time frames for bookings and inmate housing management, and the medical records system. Numerous random and formalized interviews were conducted with inmates. Auditor requested and was provided housing unit rosters each day of the on-site audit. Thirty three inmates were interviewed including limited-English-proficient (LEP) inmates, inmates who identified as members of the lesbian/gay/bisexual/transgender/intersex (LGBTI) population of the jail, inmates who were screened as being at high risk for sexual victimization, inmates assigned to segregation units, inmates who reported sexual victimization as well as a random sample of inmates. The Fresno County Sheriff's Office does not house youthful offenders.

In addition to inmate interviews, document reviews and facility inspection, thirty staff members were interviewed, including senior management, medical staff, human resources, behavioral health, members of the sexual abuse incident review team, investigators, and a random number of correctional officers. Random staff interviews were selected from staff working in each area of the facilities on the shifts working at the time. Auditor conducted interviews of inmates and staff at different times throughout the day starting at 0800hrs and ending at 2300hrs, which allowed for interviews of staff on all shifts. Specialized staff were chosen based on assignment within the agency. Staff interviews were conducted in private interview rooms or individual offices for specialized staff.

Auditor conducted an exit conference with Division Command Staff and PREA Coordinator on the afternoon of August 12, 2016. Agency administration and staff were very open and receptive to an honest discussion of areas where PREA compliance needs to be strengthened and the PREA compliance team began corrective measures immediately.

DOCUMENTS AND FILES REVIEWED

During the PRE-AUDIT, ON-SITE AUDIT and POST-AUDIT phases, Auditor reviewed agency Policies/Procedures, training material, proof of training, Inmate Handbook, PREA posters, classification

documents, records management system documenting random checks, cases involving sexual abuse/harassment, Consent Decree, daily housing unit rosters, personal correspondence with auditor, staffing matrix, Intake forms, program/services schedules, facility diagrams and agency website. Auditor used several techniques in choosing sample documentation. Auditor requested specific documents or files such as the Inmate Handbook and PREA training documentation. When inmate files were needed, Auditor used the daily housing rosters provided by the PREA Coordinator and would request the files of every fourth inmate. Auditor also requested Agency to provide sample cases confirming adherence to PREA standards in the areas of investigations, evidence collection and preservation and Internal affairs. Agency was directed to provide samples with no specification as to how the cases were chosen. Regarding training topics and training documentation, Agency provided full Powerpoint presentations and scanned copies of documentation signed by staff who attended the PREA based training.

DISCUSSIONS AND TYPES OF INTERVIEWS CONDUCTED

Auditor had an entrance and exit conference with Division Command staff and PREA Coordinator. Auditor conducted daily coordination meetings with the PREA Coordinator prior to the start of the day during the on-site audit. Auditor conducted informal interviews with Inmates and staff during the site tour. The informal interviews were within housing areas, individual housing units, control rooms and while Auditor was being escorted by commissioned staff throughout the on-site audit. Auditor also conducted formal interviews with Inmates, commissioned staff, volunteers, contract employees and those who provide services such as SANE/SAFE and resources such as the local Rape Crisis Call Center. The formal interviews were conducted in private interview rooms and individual offices of specialized staff.

The methodology for selecting inmates for random interviews was, using the daily housing rosters, to mark every fourth inmate on the rosters and have staff contact the inmates starting with the first marked inmate. Staff asked the inmates if they would like to participate in the audit by being interviewed. No further information was given to the inmates regarding the interviews. Staff contacted every fourth inmate until an inmate consented to be interviewed and the consenting inmate was brought to the private interview room. The same process was utilized with those inmates needed for specialized inmate interviews. Two inmates communicated with auditor prior to the site visit. One inmate had been released prior to the on-site audit and the other inmate was interviewed during the on-site audit. A third inmate's communication to auditor was not received until after the on-site audit so that specific inmate was not interviewed. However, information from the third inmate was immediately passed on to agency staff to conduct follow-up due to the nature of the correspondence. No further communication from staff or inmates has been received. Random staff interviews were chosen from the daily staff rosters provided on a daily basis. Random staff interviews were also conducted based on the location of Auditor at any given time. This allowed for multiple interviews to be conducted in a given area without having to be escorted to numerous locations.

OBSERVATIONS MADE DURING SITE-REVIEW

The FCSO has made PREA compliance a priority. Agency has spent time, money and resources in their efforts to become PREA compliant. Policies reflect PREA Standards in a majority of areas, however, in several areas, practice is in compliance but is not delineated sufficiently in policy. Training on PREA is conducted regularly and is evident when interviewing staff. While staff training is compliant with standards, Inmate training is in need of improvement and documentation of Inmate training is lacking. Agency moves quickly to make needed changes such as the reclassification of the PREA Coordinator position, which agency has already made. Agency struggles with PREA compliance in the South Annex due to the age of the facility and limitations based on construction. However, FCSO has made necessary and appropriate accommodations to be in compliance. Agency is in the planning stages of a new facility

to replace the South Annex. Agency has included a PREA auditor in the planning of this new facility, indicating Agencies willingness to follow PREA standards in all areas of their operation. Agency is non-compliant in several areas, however, there are no major deficiencies which would prevent the FCSO from becoming fully compliant within the corrective action period.

FOLLOW-UP WORK

Post audit follow-up work consisted of outlining deficiencies within the audit which need corrective action by the agency and requesting additional documentation of training for medical/mental health staff and investigative documentation. Sergeant Shumate and later, Sergeant Curran, supplied additional documentation necessary to make conclusive findings for the audit. Auditor has made several calls to FCSO staff to clarify policy in various areas such as hiring and promotion of staff related to PREA standards. Auditor has communicated with FCSO PREA Coordinators, the areas in need of corrective action. Due to an error made early on in the Pre-Audit Questionnaire, an "Agency" and "Facility" audit have had to be completed which has delayed the completion of the interim report. Agency has been advised of delays in the interim report.

In summary, after reviewing all pertinent information and after conducting the on-site review, inmate interviews and staff interviews, the Auditor found that agency leadership and staff have clearly made PREA compliance a high priority and have devoted a significant amount of time and resources to policy development, training of staff and education of inmates on all the key aspects of PREA. Discussions with agency leadership and facility management reinforced the agency's commitment to ensuring the sexual safety of inmates and staff in the facility. It was further evident that staff and inmates were invested in PREA as demonstrated through their knowledge and understanding of the protections and requirements. The positive culture of sexual safety in this facility is evident in the overall operations of this facility and the level of PREA compliance noted by this Auditor. While there are certain areas of compliance that will require strengthening through corrective actions as detailed in this report, those corrections are relatively easy to accomplish and the Auditor expects full compliance will be achieved soon. As a result of the exit conference with FCSO Division Command staff, the compliance team immediately began their corrective actions prior to receiving this report. Because of this initiative, the facility will reach full PREA compliance quickly.

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the type of the facility, 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 Fresno County Sheriff's Office, located at 2200 Fresno Street in Fresno, CA is responsible for the operation of three, individual detention facilities which all fall under the same span of control. The FCSO is responsible for providing professional law enforcement services to over 6000 square miles of Central California and almost 1 million county residents. The FCSO has more than 1,100 employees with 350 commissioned Correctional Officers to run the FCSO Jail complex. The FCSO Jail complex consists of the South Annex, Main Jail and North Annex. Combined design capacity of all three facilities is 3291 inmates with an Average Daily Population (ADP) of 2800 inmates. There have been no newly renovated portions of any of the three facilities since August 20, 2012.

SOUTH ANNEX

The South Annex was built in 1941 with an original design capacity of 684 inmates and a current operational capacity of 499 inmates. The decrease in capacity is due to the building of two other facilities and the use of various parts of the South Annex for purposes other than housing inmates. The South Annex is a linear style facility that the FCSO has continued to use by adding updated technologies. There are 36 pods in the South Annex on four floors. Each pod houses a minimum of 8 inmates to a maximum of 50 inmates. The inmates housed in the South Annex are a mix of mental health, gang drop outs, medical, alternative lifestyle, minimum, medium, maximum and administrative segregation classification levels, with a maximum inmate population of 154 males and 337 females. Each pod is equipped with bunk style sleeping arrangements and a common toilet and shower. The South Annex will be replaced by a new facility within the next two to three years and will no longer house inmates.

The main physical plant for the South Annex is located on the basement level which includes boiler room, laundry room, maintenance shop, kitchen, staff dining, loading dock and the entrance to a tunnel which leads from the basement to the Main Jail for inmate movement. Inmates going to court are all funneled through the basement of the South Annex before going to court in the courthouse located South of the South Annex by way of a tunnel system connecting all three facilities and the court complex. There are five holding cells in the basement area which is staffed at all times by a minimum of 1 Officer from 1800hrs to 0600hrs and 2 Officers from 0600hrs to 1800hrs every day of the week.

The second floor has seven pods, the law library, two gymnasiums, Central Control and interview rooms. Floor three of the South Annex consists of six pods, each capable of housing 10-12 inmates, a recreation area and visitation room. The fourth floor of the South Annex consist of 6 pods, each capable of housing 12-42 inmates, two exercise yards and an observation walkway for security staff. Access to inmate areas in the South Annex is controlled by Central Control or via key access. All recreation and program areas are secured via key access. The South Annex utilizes an adequate number of video cameras located throughout the interior of the facility, on exterior grounds, recreation areas, program areas and walkways. No cameras were located in shower/toilet areas or in sleeping areas. Auditor observed the video feed in the Central Control room for the South Annex and found it to be less than optimal due to the line of sight for toilet usage in each pod. Agency is allowing the use of modesty curtains until a new facility is completed to mitigate the line of sight issues.

Staffing per shift for the South Annex includes 16 Officers and 1 Sergeant with 1 officer in Central Control. Staffing is increased by 3 officers from 0600hrs to 1800hrs with the addition of an Attorney Lobby Officer, Visiting Lobby Officer and Support Officer. The Support Officer remains on shift until 2300hrs.

Inmates are allowed recreation time in designated recreation areas within the South Annex or within their individual pods. Food service provided for the South Annex is completed without the use of inmate labor in any capacity. Food is prepared in the main kitchen and delivered to each pod within the South Annex. Inmate services provided to inmates housed on the South Annex include but are not limited to: Various religious programs, recovery programs, education classes, anger management, relation skills, parenting and life skills.

The South Annex has inadequate lighting conditions, inadequate air conditioning and a lack of privacy for toilet usage. The agency is fully aware of these conditions and is making allowances for privacy until a new facility is built.

MAIN JAIL

The Main Jail was built in 1987 with an original design capacity of 424 inmates but has been expanded vertically and now has an operational capacity of 1064 inmates. The Main facility also houses Detention Administration as well as food service and laundry. The main jail is a podular remote configuration with staff assigned to a control tower and additional staff roving from unit to unit as necessary.

There are 32 pods in the Main Jail on four floors. Each pod houses a minimum of 10 to a maximum of 48 inmates. Inmates housed in the Main Jail are a mix of classification levels to include medium, maximum, administrative, disciplinary, active and drop out gang members. The Main Jail has a maximum inmate population of 1054 male inmates and 10 female inmates. Each pod is equipped with individual cells, each with a sink and toilet. A common shower is area located in the day room. All 6 pods on each floor are configured around an elevated central security station. Officers assigned to each floor are either roving between the pods, gymnasium, inmate services area, segregation cells or working in the security station. Officers assigned to the elevated security station, electronically control access to each pod as well as access to cells within each pod. They also monitor cameras mounted within each pod as well as visually monitoring each pod from large, angled windows overlooking each pod. Cameras within the security station give a general view of the interior of each pod. Cameras are not equipped with a zoom function and are not looking into any individual cells. Auditor viewed the camera angles and camera functionality within the security stations.

The Main Jail basement consists of inmate and Officer's tunnels leading to and from the South Annex and North Annex. The two tunnels are kept completely separate from one another with key access only between the two in case of an emergency. The inmate tunnels are equipped with cameras which are monitored by Central Control and Officers at the South and North Annexes. The Officer's tunnel has a utilitarian function being used for staff movement as well as the movement of meal carts and other equipment as needed. There is no inmate movement within the Officer's tunnel at any time. The Main Jail first floor is at street level and has a dual function. The entire East side of first floor houses the public lobby and administrative offices while the West side is the Intake area for new arrestees. The booking area consists of a sally port area for the inventory of inmate property and initial medical screening, a booking area, a clothing issue and clothing return area and classification offices.

The second floor of the Main Jail is also a dual purpose floor with the entire Northeast corner, East side and South end of the floor being occupied by Division administration, armory, Central Control, briefing room, Staff Dining and pharmacy. The majority of the floor is taken up by the medical unit which consists of medical records, treatment rooms and individual cells which allows the medical unit to house a maximum of 38 inmates who cannot otherwise be housed due to medical issues.

The third(Mezzanine), fourth, fifth and sixth floors of the Main Jail, referred to as a housing floors, includes three elevators, an elevated security station, a gymnasium in the Southwest corner of the floors, an inmate programs and services room in the Northwest corner of the floors, multiple interview rooms along the West side of the floors, six inmate housing pods configured around the elevated security station which occupy the entire North, East and South sides of the floors and ten segregation cells located along the entire West side of the floors, behind the elevators. Each pod has individual cells which can hold a maximum of 10-48 inmates. Floors 3-5 house medium, maximum, administrative and disciplinary classification levels of inmates. The sixth floor houses administrative, disciplinary, active gang and gang drop out classification levels. Access to inmate areas on the housing level is controlled by Central Control or via key access. All recreation and program areas are secured via key access. All housing floors in the Main Jail have adequate lighting conditions, adequate air conditioning and adequate privacy for toilet and shower usage. Meals are prepared in the main kitchen by non-inmate employees and delivered to the individual units for distribution. Recreation is done in the shared gymnasium or in the individual pods or cells.

Inmate services provided to inmates housed in the Main Jail include but are not limited to: Theft diversion, various religious programs, recovery programs, education classes, anger management, relation skills, parenting and life skills.

The Main Jail yard complex occupies the top floor of the Main Jail structure and consists of three elevators, an elevated security station a central yard, North yard and South yard. Each yard is equipped with a toilet and each yard is monitored through the use of line of sight by Officers and cameras monitored by the security station. Inmates are allowed use of the yards on a rotating schedule and staffing is determined based on usage. There are no programs or services provided on this floor and meals are not served there.

No inmates are housed on the Main Jail yard floor.

Staffing per shift for the Main Jail includes 35 Officers and 1 Sergeants with 2 Officers in Central Control. Staffing increases by 1 Officer from 0600hrs to 2300hrs with the addition of a Yard Officer.

NORTH ANNEX

The North Annex was constructed in 1992 and remodeled in 2003. The original design capacity of the North Annex was 1140 inmates but now has an operational capacity of 1728 inmates.

The basement floor of the North Annex is a holding area for inmates moving from one tower to another or for going to court. The area consists of holding cells, interview rooms, and separate inmate and staff corridors leading to the Main Jail. This area is staffed by 1 Officer when in use. There are no programs or services provided in this area, no food served on a regular basis or recreation for inmates.

The first floor of the North Annex is a dual purpose floor with the East half of the floor utilized staff dining, locker rooms, Central Control, mechanical room and miscellaneous offices. No inmates are allowed in

this area. The West half of floor one is utilized for two courtrooms, a lobby for those courtrooms, miscellaneous offices and interview rooms. This courtroom area is staffed by 5 FCSO Bailiffs when in use. No programs, services or recreation are provided, nor is food served in the courtroom area.

There are 24 pods in the North Annex on floors 2-5 for the housing of inmates. Each pod houses a maximum of 72 inmates. Inmates housed in the North Annex are a mix of classification levels including minimum, protective custody, gang drop outs and workers, with a maximum male inmate population of 1,728. No female inmates are housed in the North Annex. These floors consists of three elevators, an elevated security stations, interview rooms along the West side of the floors, an inmate programs and services room in the Northwest corner of the floors, a gymnasium in the Southwest corner of the floors and six housing pods configured around the elevated security stations which occupy the the entire North, East and South sides of the floors. Access to inmate areas on these levels is controlled by Central Control or via key access. All recreation and program areas are secured via key access.

All housing floors in the North Annex have adequate lighting conditions, adequate air conditioning and adequate privacy for toilet and shower usage. Meals are prepared in the main kitchen by non-inmate employees and delivered to the individual units for distribution. Recreation is done in the shared gymnasium or in the individual pods or cells.

Each pod is an open bay area with bunk sleeping areas. Each pod has common bathroom and shower facilities. All 6 pods on each floor are configured around an elevated central security station. Officers assigned to the floors are either roving between the pods, gymnasium, inmate services area or working in the security stations. Officers assigned to the elevated security stations electronically control access to each pod. They also monitor cameras mounted within each pod as well as visually monitoring each pod from large, angled windows overlooking each pod. Cameras within the security stations give a general view of the interior of each pod. Cameras are not equipped with a zoom function. Auditor viewed the camera angles and camera functionality within the security stations.

Staffing per shift for the North Annex includes 25 Officers and 2 Sergeants with 1 Officer in Central Control. Staffing increases by 2 Officers from 0700hrs to 1800hrs with the addition of two Lobby Officers. Staffing also increases by 1 Courts Sergeant and 5 Bailiffs during court hours.

Programs and services available to inmates in the North Annex include but are not limited to: Parenting, various religious programs, anger management, various recovery programs, life skills, educational programming such as GED and music.

Unique features of the FCSO include:

1. A centralized Human Resource office
2. No inmate labor used in food preparation
3. The FCSO utilizes both Deputy Sheriff's and Correctional Officers
4. The South Annex was built in 1941 and is currently housing inmates

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.

Number of standards exceeded:	0
Number of standards met:	39
Number of standards not met:	0
Number of Standards Not Applicable: (The total number of standards that were audited at the agency level)	6

Number of standards exceeded: 0

Number of standards met: 29

* 115.13; 115.16; 115.18; 115.21; 115.22

115.31; 115.34; 115.35; 115.42; 115.43; 115.51

115.54; 115.61; 115.62; 115.63; 115.64; 115.65; 115.66; 115.68

115.71; 115.72; 115.73; 115.76; 115.77; 115.78; 115.81; 115.82; 115.83; 115.401

Number of standards not met: 10

* 115.11; 115.15; 115.17; 115.32; 115.33; 115.41; 115.52; 115.53; 115.67; 115.86

Number of standards N/A: 6

* 115.12; 115.14; 115.87; 115.88; 115.88; 115.403

All inmates who were interviewed, save one, cooperated with the interview process. Mental health services had to be arranged for two inmates following their interviews. Numerous inmates reported that they did not trust staff enough to report sexual misconduct. Numerous inmates also reported that grievances submitted for various reasons were thrown away. While several inmates confirmed that the agency provided them PREA information during the booking process, the majority stated they were not. This assertion is contradicted by the presence of PREA related information posted throughout the facility, PREA related questions asked during the initial screening and the presence of PREA information within the inmate handbook which all inmates stated they received at booking.

While PREA information is presented in all of these formats confirmed by viewing the intake classification form, viewing PREA posters in several languages throughout the facility and reviewing the inmate handbook, the agency has no formal mechanism to notate that every inmate has received this information. Also, the required ongoing training of inmates is not being accomplished though the technology to do so is in place.

Inmates indicated during their interviews that they knew the various mechanisms for reporting sexual

abuse, the services available to victims of sexual abuse and had been advised of prevention strategies. The few inmates who were not aware of these topics, were educated during the interview. During the facility tour, Auditor was able to talk to inmates openly and without hesitation by the inmates. A corrections officer was in each pod during the interview for safety purposes. Their presence did not hinder the interviews in any way.

Agency staff, contracted employees and volunteers cooperated fully with the interviews and all expressed support for the goals of PREA. All staff, contracted employees and volunteers indicated that they had received training on PREA in hours commensurate with their level of inmate contact. This training was corroborated by acknowledgement forms and training logs provided by the agency.

CORRECTIVE ACTION PLANNING

The corrective action plans for the areas not met are not extensive and most have to do with policies needing to reflect practice. Agency will be re-designating the PREA Coordinator position and the PREA Compliance Manager positions and then updating the organizational chart. Where changes in procedure are required, those changes have been outlined in the body of the audit and are being made at the agency level. Where clarification to policy is required, agency is clarifying policy. All of the changes required for full compliance can be accomplished within the 180 day corrective action period if not sooner. Compliance assessment will be done by having agency send, via email, updated policies and relevant documentation of compliance.

JULY 31, 2017 UPDATE SINCE THE AUDIT: CORRECTIVE ACTIONS TAKEN TO ACHIEVE FULL COMPLIANCE

The Interim Compliance Report reflected that there were 5 standards that were in non-compliance at the Fresno County Sheriff's Office (FCSO). Therefore, a required correction action period not to exceed 180 days began on January 24, 2017. The Auditor recommended corrective actions for the facility and administration agreed and began immediate corrections of those standards found to be in non-compliance. FCSO completed the required corrective actions requested by the Auditor to bring the facility into full compliance with the PREA standards. Evidence of corrective actions was received by the Auditor throughout the corrective action period. The Auditor reviewed the submitted documentation to determine if full compliance was achieved. In some cases, the Auditor requested clarifications and/or additional documentation via emails and phone calls with FCSO staff. FCSO complied with all requests from the Auditor. A summary of the evidentiary basis for determining full compliance is discussed within each standard that was originally noncompliant. As a result of successful corrective action, the Auditor determined that the FCSO has achieved full compliance with the PREA standards as of the date of this final report.

The summary of compliance based upon this final report is found below.

Number of standards exceeded: 0

Number of standards met: 39

* 115.13; 115.16; 115.18; 115.21; 115.22

115.31; 115.34; 115.35; 115.42; 115.43; 115.51

115.54; 115.61; 115.62; 115.63; 115.64; 115.65; 115.66; 115.68

115.71; 115.72; 115.73; 115.76; 115.77; 115.78; 115.81; 115.82; 115.83; 115.401

115.11; 115.15; 115.17; 115.32; 115.33; 115.41; 115.52; 115.53; 115.67; 115.86

Number of standards not met: 0

Number of standards N/A: 6

* 115.12; 115.14; 115.87; 115.88; 115.88; 115.403

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. FCSO Completed Pre-Audit Questionnaire (PAQ) 2 FCSO policy D-360 3. FCSO Organizational chart 4. Interviews with the following: a. PREA Coordinator b. Services Lieutenant 115.11 (a) The agency shall have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency 's approach to preventing, detecting, and responding to such conduct. Agency policy D-360, page 1 establishes the zero tolerance policy for all forms of sexual abuse and harassment. Policy D-360 Section I, page 2, provides an outline of the agency's approach to preventing, detecting and responding to sexual abuse and sexual harassment. Policy D-360, pages 4-5 defines prohibited behaviors as they relate to sexual abuse and sexual harassment. Policy D-360, pages 26 and paragraph one of page 27 outline sanctions for inmates, volunteers and contractors who participate in prohibited behaviors. Policy D-360 Sections III-XXVIII, pages 5-30, outlines the facility's approach to preventing, detecting and responding to such conduct by mandating training for staff and inmates, screening staff and inmates and providing a multi-route reporting mechanism. Auditor reviewed the listed policies to confirm that they were in place and met this element. AGENCY MEETS THIS ELEMENT 115.11 (c) Where an agency operates more than one facility, each facility shall designate a PREA compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. Agency has designated all line Sergeants as PREA Compliance Managers. Agency has not designated one person for this position which is not in compliance with the standard. Compliance Managers as designated, have the daily duties of monitoring the operations of their designated housing areas. While they are focused on PREA compliance when an incident occurs, they are not responsible for the coordination and implementation of PREA standards. They also do not have the authority to make changes to facility policy to better comply with PREA standards. That authority would require a much higher position in the agency's rank structure which is not in compliance with the standard. PREA Compliance Managers are defined within agency policy, they are not in the organizational chart. PREA Coordinator is the only PREA related position represented in the organizational chart which is not in compliance with the standard. All PREA related issues identified by PREA Compliance Managers are brought to the PREA Coordinator, which at this time, is the Services Sergeant. The PREA Coordinator reports to the Services Lieutenant. Prior to leaving the on-site visit, the auditor suggested to Executive Staff and the current PREA Coordinator, that a re-designation of this

position be made. Discussions were being had prior to the on-site visit to make this change and subsequent conversations with the PREA Coordinator confirmed that this change is being made.

AGENCY DOES NOT MEET THIS ELEMENT

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The Auditor was provided supplemental documentation on June 20, 2017 to evidence and demonstrate corrective actions taken by the FCSO administration regarding this standard. This documentation is discussed below.

ADDITIONAL DOCUMENTATION REVIEWED:

1. Revised FCSO organizational chart provided on 04/27/17

The FCSO has revised their Policy #D-360 to reflect the Services Lieutenant designated as the PREA Coordinator and the Services Sergeant designated as the PREA Manager. Agency has also provided proof of practice in this area by providing a revised organizational chart reflecting the changes as well. These changes bring the agency into compliance with Standard 115.11 (c) as well as Standard 115.11 in its entirety.

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

Recommendations: Designate a Lieutenant or above as PREA Coordinator and the Services Sergeant as the PREA Manager. All changes to be made on the agency's organizational chart. Changes to agency's organizational chart showing the changes in PREA Coordinator and Manager positions must be provided to Auditor.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion
	Evidence reviewed (documents, interviews, site review) 1. FCSO completed Pre-Audit Questionnaire (PAQ) 2. Interviews with the following: a. Executive staff b. PREA Coordinator Agency does not contract out for the housing of inmates to any other facilities. All inmates are kept under the span of control of the FCSO. The care and custody of FCSO inmates is not relegated to any other agency. This was confirmed through interviews with agency executive staff, PREA Coordinator and review of the PAQ. THIS STANDARD IS N/A

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. FCSO completed Pre-audit Questionnaire (PAQ) 2. FCSO staffing plan 3. Facility schematics and diagrams 4. Interviews with PREA Coordinator and Division Commander 115.13 (a) The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration: (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors. Agency produced a staffing plan and the tour of the facility confirmed that assigned staff and supervisors were actually at their assigned posts. The FCSO implements a mandatory overtime order whenever a position is in jeopardy of being vacant. All positions are filled either on regular time or overtime on every shift. The facility also supplements staffing with the use of continually monitored video technology. Auditor viewed the staffing plan for each facility, broken down by teams. Staffing plans must take into account a variety of factors such as physical layout, inmate composition, activities within a particular facility, security threat group activity, past history of serious incidents and racial dynamics. The agency has implemented staffing which adequately addresses these factors by the use of staff and technology. Auditor also viewed the staffing rosters for multiple days and found that all position were filled using officers on straight or overtime as indicated by the PAQ and interviews with PREA Coordinator and Division Commander. AGENCY MEETS THIS ELEMENT 115.13 (b) In circumstances where the staffing plan is not complied with, the facility documents and justifies all deviations from the plan. As addressed in element 115.13 (a), agency has a policy of mandatory overtime and fixed posts. They do not deviate from the set staffing plan. As stated above, agency fills all open positions either on straight time or overtime which was confirmed by auditor viewing the staffing rosters and interviews with staff.

AGENCY MEETS THIS ELEMENT

115.13 (c) Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan.

The Fresno County Sheriff's Office is operating under a Consent Decree at this time. The facility has recently hired correctional staff based on the Consent Decree and funding for 134 additional officers over the next three years is in place, as is the installation of over 200 additional video cameras. The agency, including the PREA Coordinator, have met within the last 12 months to discuss staffing plans, specific posts for staff, technology assets and resources to ensure adherence to the staffing plan. However, any deviation which may occur is documented in the facilities electronic scheduling software and/or the Watch Commander's summary noting the reason for the deviation. Auditor was provided a copy of the Consent Decree and observed the scheduling software used for staffing purposes. Confirmation of the meeting to discuss staffing and the use of scheduling software was confirmed through observation and interviews with staff.

AGENCY MEETS THIS ELEMENT

115.13 (d) Each agency operating a facility shall implement a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.

Facility policy D-360, page #5, Sec III C requires supervision to conduct unannounced rounds in all inmate holding areas and also requires that staff are not to alert others when rounds are occurring. All rounds, announced or unannounced, are logged into the records management system. Auditor was provided documentation of such checks from the records management system, which confirmed the supervisory checks. Auditor observed supervisors conducting rounds in numerous locations throughout all facilities. Interviews with line staff confirmed that staff is not aware of when supervision will make rounds and staff were also aware that they were not to announce when supervision was making rounds.

AGENCY MEETS THIS ELEMENT

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence reviewed (documents, interviews, site review) 1. PAQ 2. Agency policy 3. Interviews of PREA Coordinator and Division Commander Agency does not house youthful inmates. Policy D-120, specifically prohibits the acceptance of juveniles into the facility. However, Policy D-120 also provides guidance in the event they were to ever have to lawfully house a juvenile. Agency's policy of not accepting juveniles was confirmed by review of the policy, the PAQ and interviews with the PREA Coordinator and Division Commander. Auditor observed no known juveniles being housed in any of the facilities. THIS STANDARD IS N/A

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ 2. Agency policy 3. Interviews of PREA Coordinator, random staff, random inmates 115.15 (a) The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners. The Fresno County Jail houses both male and female inmates. Facility policy D-240 section VI, subsection B, page 7 prohibits cross-gender strip searches or cross-gender body cavity searches except in exigent circumstances or when performed by medical practitioners. Policy review and interviews with correctional staff, contract staff and inmates, confirmed that cross-gender searches are not being conducted at this facility and that no body cavity searches are being done by anyone other than a medical practitioner. Agency Pre-audit answer to this element was marked yes in error. Auditor viewed no cross gender strip or body cavity searches while on site. There had been no cross gender strip or body cavity searches done for exigent circumstances within the previous 12 month period. Any such search would have been documented in an incident report. There was no documentation for auditor to review regarding this element. Due to the continual availability of male and female staff at the FCSO, cross-gender searches are rendered unnecessary. A review of staffing for specific shifts and visual confirmation by auditor of male and female officers on all shifts, confirmed cross-gender searches are not required at the FCSO. AGENCY MEETS THIS ELEMENT 115.15 (b) As of August 20, 2015, or August 20, 2017 for a facility whose rated capacity does not exceed 50 inmates, the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Facilities shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. The rated capacity of all three facilities operated by the FCSO, far exceeds 50 inmates. Agency policy D-240, section IX, subsection C, page 11 states "Body inspection of clothed female inmates shall be conducted by female correctional officers only, except in emergency situations requiring the immediate search of inmates to avoid the threat of death, escape, or great bodily injury. Male correctional officers shall not, under any circumstances, perform non-emergency body searches of female inmates." This policy goes further than the standard requirement and defines the exigent circumstances during which a cross-gender pat-down search of female inmates are allowed which are, to avoid the threat of death, escape or great bodily injury.

Female inmates' access to regularly available programming or other out-of-cell opportunities are not limited in any way in order to be in compliance with this element of the standard or FCSO policy. Compliance is made possible due to the number of female staff available on any given shift to conduct all female pat-down searches. Auditor confirmed female staffing levels within the facility by review of staffing matrix for each shift on each day of the on-site audit. Auditor also confirmed compliance through policy review, interviews of PREA Coordinator and personal observation. During the on-site audit, Auditor was present in the Intake area on several occasions and all inmate housing areas and saw no cross-gender searches of female inmates being conducted. Interviews with commissioned staff also confirmed that cross-gender searches of females is done only with exigent circumstances

AGENCY EXCEEDS THIS ELEMENT

115.15 (c) The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches, and shall document all cross-gender pat-down searches of female inmates.

No cross-gender strip searches or visual body cavity searches are conducted at this facility. There was no documentation to review other than policy. Interviews with staff and inmates confirmed that cross-gender searches and visual body cavity searches are not conducted. Auditor viewed no cross-gender searches being done throughout the facilities.

AGENCY MEETS THIS ELEMENT

115.15 (d) The facility shall implement policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical 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. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit.

Agency policy D-360, Section D, page 6 enables inmates to shower, perform bodily functions and change clothes without non-medical staff of the opposite gender viewing them, except in exigent circumstances. In the South Annex, this is especially hard to comply with due to the age and configuration of the facility itself. However, Agency has made allowances for privacy curtains to be used to block cross-gender viewing. This issue will be taken care of once the new construction is complete and the South Annex is closed. The Main Jail and North Annex were designed to allow for privacy that meets the standard. A tour of all housing areas within each facility to include observation towers with camera access, confirmed that Agency has allowed for the privacy of their inmates.

This element of the standard also requires that opposite gender staff announce themselves when entering a housing unit. Policy D-360, Section D-1, page 6, adequately addresses this element as far as male staff. Section D-2, regarding female staff announcing, simply states "Male inmates are advised that female officers are routinely assigned to all housing floors and female officers can be expected to enter the housing units on a regular basis". This wording does not meet the element of this standard. Interviews of both inmates and staff confirm that male officers routinely and consistently announce their presence in female housing units but that female officers almost never do. During the on-site audit, Auditor heard no female

announcements, which confirmed information obtained through interviews.

AGENCY DOES NOT MEET THIS ELEMENT

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The Auditor was provided supplemental documentation on June 20, 2017 to evidence and demonstrate corrective actions taken by the FCSO administration regarding this standard. This documentation is discussed below.

ADDITIONAL DOCUMENTATION REVIEWED:

1. The FCSO Sexual Misconduct and Abuse policy #D-360 (Modified version approved June 20, 2017 by Sheriff)

The FCSO revised their policy regarding announcing staff presence when entering a housing unit of the opposite gender of the staff member. The policy has been revised such that the admonishment must be made by both male and female staff equally. The new policy does not specify male or female announcements, but simply requires an announcement if staff are entering a unit which is a different gender from their own. This change brings the agency in line with 115.15 (d) regarding the policy for announcement.

REVISED CONCLUSION: AGENCY MEETS STANDARD

115.15 (e) The facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. 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.

While the Fresno County Sheriff's Office does conduct strip searches and visual body cavity searches, the agency does not search or physically examine a transgender or intersex inmate for the SOLE purpose of determining the inmates genital status. PREA Standard 115.15(e) specifically prohibits searching or physically examining a transgender or intersex inmate for the SOLE purpose of determining the inmates genital status. Agency policy D-240 gives specific guidance as to when a strip search or visual body cavity search may be conducted. Policy allows these searches of arrestees when reasonable suspicion of the concealment of narcotics, narcotics paraphernalia, weapons or escape devices is present. Determining an inmates genital status is not listed as a reason for a strip search or visual body cavity search. Strip searches and visual body cavity searches are routinely done on inmates housed in the facility for a variety of reasons, none of which are to determine genital status. Therefore, agency meets this element.

However, Agency policy D-240, section VI, subsection B, page 7, in the presence of reasonable suspicion or for safety and security purposes only, does allow for a split search with both male and female officers conducting the search if the inmates gender presentation or identity is not clear at the time of the search. There were no instances where the latter has

occurred as gender identity is determined at the time of booking. The use of a split search is an option offered to the Transgender inmate if their gender presentation or identity is clear.

While auditor has determined agency meets this element as written, the policy could be further clarified regarding the determination of genital status. This element will be discussed with agency and recommendations made.

AGENCY MEETS THIS ELEMENT

115.15 (f) The agency shall train security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

Security staff receive PREA training on a yearly basis which includes conducting cross-gender pat down searches and searches of transgender and intersex inmates. The agency provided copies of training provided as well as produced documentation that staff had received the training.

AGENCY MEETS THIS ELEMENT

Recommendation: Element regarding announcement upon entering housing areas of a different gender was not met. Policy regarding female announcements should mirror that of the policy for male announcements. Once the policy change is in place, staff training should occur and routine compliance checks should be conducted by supervisory staff. Regarding the determination of genital status, agency is encouraged to further clarify their policy on this element, stating specifically how and when genital status will be determined. Auditor must be provided updated policies and confirmation of staff training in order for agency to be in compliance.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review, inmate handbook, PREA posters 3. Facility tour 4. Interviews of random staff and random inmates 5. Interview of PREA Coordinator 115.16 (a) The agency shall take appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164. The agency takes appropriate steps to ensure inmates with disabilities have equal opportunity to participate in or benefit from efforts to prevent, detect, and respond to sexual abuse, including the use of written materials, interpreters, etc. The facility has PREA posters posted in all inmate areas in several languages. Inmates are provided written PREA materials such as the inmate handbook, interpreters from a language bank are available, however, the agency has numerous security staff who speak a multitude of languages that are more commonly used. Interviews with staff and inmates, confirmed that inmates with disabilities are provided the assistance necessary to participate and benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Agency has provided a dedicated commissioned supervisor as an ADA (Americans with Disabilities Act) advocate for inmates housed with the FCSO. This staff member is responsible for ensuring that all identified ADA inmates receive all information in the appropriate format relating to PREA. Interviews with inmates identified as ADA inmates confirmed that they had received all required information. AGENCY MEETS THIS ELEMENT 115.16 (b) The agency shall take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide

interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

Limited English Proficient inmates are accommodated through a language bank and bi-lingual staff. A tour of the facility revealed PREA posters in two and sometimes three languages. Interviews with LEP(Limited English Proficient) inmates demonstrated that they knew about and had access to all aspects of PREA as they relate to their incarceration with the FCSO. Interview with bi-lingual staff confirmed that they are being used for this purpose on a regular basis. Review of FCSO hiring announcements also state that Agency wants their officers to be bi-lingual if possible.

AGENCY MEETS THIS ELEMENT

115.16 (c) The agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under § 115.64, or the investigation of the inmate's allegations.

Agency does not use inmate interpreters except in very limited circumstances and never for PREA related issues. Agency has numerous officers who may act as interpreters for each shift. Interviews of staff indicated that inmate interpreters are used only for insignificant daily procedural issues but that the use of inmate interpreters for PREA or serious issues is prohibited.

AGENCY MEETS THIS ELEMENT

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review, HR flyers for various positions 3. Interviews with PREA Coordinator, Undersheriff, HR staff 115.17 (a) The agency shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who— (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. Agency completes a thorough background investigation to include an extensive criminal records check and polygraph on all potential new hires, potential contractors and potential volunteers. During the promotional process, county, bureau and divisional files are examined to determine if anything in those files would disqualify an individual from being promoted, included in those file would be PREA violations as noted by the FCSO. Interviews with HR staff, PREA Coordinator and review of recruitment flyers provided by Agency, confirmed this practice. Policy and Procedure #306, section III, page 1 states Disciplinary matters of a more serious nature that may result in recommendations for dismissal, suspension or demotion shall be forwarded through the chain of command to the Undersheriff. Interviews with Executive staff confirmed that prohibited behavior as outlined in this standard would be grounds for termination and therefore the employee would not be considered for promotion. While not hiring an individual with a history of sexual misconduct is confirmed, agency could not produce documentation in policy of not promoting an individual with sexual misconduct in their history. AGENCY DOES NOT MEET THIS ELEMENT VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT: The Auditor was provided supplemental documentation on June 20, 2017 to evidence and demonstrate corrective actions taken by the FCSO administration regarding this standard. This documentation is discussed below. ADDITIONAL DOCUMENTATION REVIEWED: 1. The FCSO Sexual Misconduct and Abuse policy #D-360 (Modified version approved June 20, 2017 by Sheriff)

The FCSO expanded their policy statement to include an admonishment regarding their policy of not hiring, promoting or contracting with individuals who have engaged in behavior prohibited by PREA Standard 115.17 (a).

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

115.17 (b) The agency shall 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 inmates.

Agency does a thorough background check, criminal history check and polygraph on all who seek employment with them. Prior sustained sexual harassment incidents are considered. When a current employee is seeking promotion, a thorough check of their current personnel file is completed. Prior sustained sexual harassment incidents are considered. Interviews with HR staff, PREA Coordinator and Executive staff confirmed that this policy is known and adhered to. Review of Pre-employment flyers for Corrections Officer and Deputy Sheriff had no language related to PREA or sexual harassment. All had language that stated applicants would be required to disclose employment history and personal history as part of the hiring process.

AGENCY DOES NOT MEET THIS ELEMENT

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The Auditor was provided supplemental documentation on June 20, 2017 to evidence and demonstrate corrective actions taken by the FCSO administration regarding this standard. This documentation is discussed below.

ADDITIONAL DOCUMENTATION REVIEWED:

1. The FCSO Sexual Misconduct and Abuse policy #D-360 (Modified version approved June 20, 2017 by Sheriff)
2. Responsibility to Provide Acknowledgment form

The FCSO expanded their policy statement to include an admonishment regarding their policy of not hiring, promoting or contracting with individuals who have engaged in behavior prohibited by PREA Standard 115.17 (b). A "Responsibility to Provide Acknowledgement" form was created and provided. This document is utilized with every new hire, promotional candidate and contract employee and ensures that the appropriate questions are being asked in order to uncover past or current sexual abuse or sexual harassment.

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

115.17 (c) Before hiring new employees who may have contact with inmates, the agency shall: (1) Perform a criminal background records check; and (2) 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.

A criminal background check is completed before hiring any new employees. Background checks for new hires always include attempts to contact previous employers with a waiver from the applicant allowing such contact. Interview of HR personnel confirms this process is known and followed.

AGENCY MEETS THIS ELEMENT

115.17 (d) The agency shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates.

A thorough background check is completed and a criminal background check, including NCIC and CLETS, is completed on all contractors who may have contact with inmates. This process was confirmed through interviews with HR and contracted staff. Random interview with staff who conduct the criminal background checks, confirmed that this is completed on all contractors who may have contact with inmates.

AGENCY MEETS THIS ELEMENT

115.17 (e) The agency 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.

Agency does a criminal background check on all new hires and all new contract employees. Agency then conducts a criminal background check on all contract employees and volunteers every year upon renewal of their identification. The Fresno County Sheriff's Office has an agreement with the CA Department of Motor Vehicles that automatically notifies the agency whenever a Sheriff's Office employee's DMV record is negatively impacted. Agency is also notified by CLETS when an agency employee's name is entered and negatively impacted. Officers are required to submit their DMV driver license upon yearly evaluation, confirming that the employee is current in the DMV system and therefore subject to CLETS notifications. Auditor confirmed this process through interviews with PREA Coordinator, HR staff and random staff interviews.

AGENCY MEETS THIS ELEMENT

115.17 (f) The agency shall ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.

Agency policy 600, section UU, subsection 2 imposes, for any member of the department who is a suspect, or reasonably believes or should believe that they are a potential suspect of a criminal investigation, whether pertaining to an on-duty or off-duty matter, the continuing affirmative duty to disclose such involvement.

The county application currently does not ask the necessary questions to get this information

for new employees nor does the application for current employees seeking promotions.

AGENCY DOES NOT MEET THIS ELEMENT

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The Auditor was provided supplemental documentation on June 20, 2017 to evidence and demonstrate corrective actions taken by the FCSO administration regarding this standard. This documentation is discussed below.

ADDITIONAL DOCUMENTATION REVIEWED:

1. The FCSO Sexual Misconduct and Abuse policy #D-360 (Modified version approved June 20, 2017 by Sheriff)
2. Responsibility to Provide Acknowledgment form

The FCSO expanded their policy statement to include an admonishment regarding their policy of not hiring, promoting or contracting with individuals who have engaged in behavior prohibited by PREA Standard 115.17 (f). A "Responsibility to Provide Acknowledgement" was created and provided. This document is utilized with every new hire, promotional candidate and contract employee. The changes in the policy and creation of the acknowledgement now ensures that the agency is asking the appropriate questions of all employees.

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

115.17 (g) Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.

Agency policy 600, section AA, subsections 1-2, page 6 directs that no member shall make false statements to superior officers or other members, but does not state that material omissions or providing materially false information, are grounds for termination. PREA Coordinator and Internal Affairs Lieutenant both stated that making false statements or omission of information are grounds for termination, however, Auditor was unable to find this spelled out in policy.

AGENCY DOES NOT MEET THIS ELEMENT

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The Auditor was provided supplemental documentation on June 27, 2017 to evidence and demonstrate corrective actions taken by the FCSO administration regarding this standard. This documentation is discussed below.

ADDITIONAL DOCUMENTATION REVIEWED:

1. The FCSO Rules, Regulations, Duties and Responsibilities policy #600 (Modified version

approved June 20, 2017 by Sheriff)

The FCSO expanded their policy statement by adding a third admonishment to policy #600, page 7, AA Untruthfulness which states "Material omissions or providing materially false information are grounds for termination". This addition satisfies the requirements of Standard 115.17 (g).

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

115.17 (h) Unless prohibited by law, the agency shall 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.

Agency policy D-360, section XXIII, subsection D, page 27, states that all terminations for violations of sexual abuse, sexual misconduct, 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. There were no incidents of this type in the previous 12 month period to verify that this is not only policy but practice. Due to lack of evidence in this area, Agency is deemed to be in compliance with this element.

AGENCY MEETS THIS ELEMENT

Recommendation: Agency should articulate in policy that an applicant or employee who (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section, must not be considered for hire or promotion. Furthermore, the FCSO should enhance its hiring and promotions process as well as its contractor hiring procedures by ensuring the necessary questions are asked of all applicants, employees and contractors to uncover the prohibited conduct detailed in this standard. Agency must provide auditor with documentation of changes in policy, hiring and promotional questions to be in compliance with this standard.

Auditor suggests that Agency create a "Disclosure of PREA Employment Standards Violation" form, to be completed by all applicants for employment and all current employees seeking promotion. A PREA disclosure form will satisfy this subsection once it is implemented in policy and practice, trained and institutionalized. Auditor also suggests that Agency spell out in policy that material omissions regarding PREA related misconduct, or the provision of materially false information, are grounds for termination.

Agency must provide auditor with documentation of changes in policy, hiring and promotional questions and implementation of a direct way to determine if new hires or promotional candidates have violated PREA standards, to be in compliance with this standard.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Facility tour 3. Interview of PREA Coordinator, Division head, random inmate interview 115.18 (a) When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. The Fresno County Sheriff's Office has not acquired a new facility or made a substantial expansion since August 20, 2012. Although the PAQ indicates a major expansion was done in the Intake area, this was the addition of a single holding area and in the auditors estimation, is not considered to be a major expansion. The area is an interior holding area with no blind spots, camera coverage and line of sight coverage of the entire area. PREA posters were found in three locations within the holding area. This area was found to meet standards. AGENCY MEETS THIS ELEMENT 115.18 (b) When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse. The agency has updated and installed monitoring technology since August 20, 2012. Since August 20, 2012, the agency has come under a consent decree. While the consent decree does not mandate the update and installation of monitoring technology, the Fresno County Sheriff's Office chose to update and install monitoring technology and has plans to add many more cameras in the near future. The agency has also updated monitoring capabilities in the control areas of all three facilities. During the facility tour, auditor observed the updated monitoring equipment in several of the observation towers on several floors of the Main Jail, South Annex and North Annex. The agency is also in the planning stages for the construction of a new facility. According to the Division Commander, a PREA consultant has been hired and assisted in the planning of this facility. When asked why the agency has updated and installed new technology, agency command staff indicated that it was a necessity in order to make the environment as safe as possible for inmates and staff. Overall, the new technology would increase the ability of the facility to monitor and record inmate activities, including sexual assaults. The higher quality recordings would also assist in the prosecution of the offenders. The new technology acquisition and placement is an indicator of the consideration given by the agency to the enhancement of the agency's ability to protect inmates from sexual abuse. Auditor saw very few blind spots and when a question arose regarding a possible blind spot, a visual inspection of the cameras in the area confirmed the coverage was appropriate. The

upgrade in quality of equipment was evident within the control towers on individual floors. Officers have quality images that provide adequate coverage of all areas. Auditor was able to disprove a complaint made during a random inmate interview, that officers in the control areas could zoom the cameras to view inside inmate rooms. Auditor physically checked the camera capabilities and found that the allegation was unfounded.

AGENCY MEETS THIS ELEMENT

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random staff interviews, investigator interviews, SANE/SAFE personnel 115.21 (a) To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The agency investigates all allegations of sexual abuse following a uniform evidence protocol as outlined in Policy D-360, Section XIV, page 17 through Section XVI, I-3, page 21. Interviews with investigative personnel as well as random staff interviews indicated that they are well versed in the evidence protocol. Training on this topic was evident as all but one staff interviewed were able to describe the procedures outlined in the this policy. Staff, volunteers and contract employees, all described separating the alleged victim and abuser, preserving and protecting the crime scene, notifying medical to ensure immediate access to medical and mental health treatment. Staff also described steps to preserve evidence such as requesting the victim and suspect not shower or bathe, brush their teeth, use the restroom, eat or drink. Commissioned staff went on to explain that they were to only interview the victim or suspect to determine basic information such as time, place, alleged abuser, witnesses and this information was to be passed on to the law enforcement side of the FCSO in the form of a report. Volunteers and contract employees explained that once they were made aware of a potential PREA incident, they were immediately to report the incident to commissioned staff. The steps to be taken to preserve evidence, described by commissioned staff as well as volunteers and contract employees, reflected almost every step outlined in policy. Agency meets this element. 115.21 (b) The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011. The protocol used by the FCSO is adapted from the National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents. The use of this protocol was confirmed through policy review and interviews with investigative personnel and corrections staff. Agency meets this element. 115.21 (c) The agency 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 agency shall document its efforts to provide SAFEs or SANEs.

The agency provides SANE/SAFE forensic medical exams to all victims of sexual assault where appropriate. The SANE/SAFE exam is conducted at no cost to the inmate as outlined in Policy D-360 Section XVI, subsection I-1,2, Pages 20 and 21. Interviews with corrections staff and medical staff as well as interviews with SANE/SAFE staff in Fresno County, confirm that victims are transported for these exams. All victims and suspects are transported to the Community Regional Medical Center (CRMC) for all SANE/SAFE exams. There were no examples of an incident where a SANE/SAFE exam could not be arranged.

Agency meets this element.

115.21 (d) The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency makes available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.

The facility requests through the local Rape Crisis Center, a victim advocate at the time of transport to the SANE/SAFE exam. The advocate will stay with the victim while they are being subject to the exam. Policy D-360, Section XVI, subsection H and Section XVII, subsections A-E detail this process. There were no examples of when an advocate was not available when requested.

Agency meets this element.

115.21 (e) 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.

As stated in element (d) of this standard, the facility requests through the local Rape Crisis Center (RCS-Rape Crisis Services), a victim advocate at the time of transport to the SANE/SAFE exam. The advocate will stay with the victim while they are being subject to the exam. Policy D-360, Section XVI, subsection H and Section XVII, subsections A-E detail this process. This occurs upon all allegations of sexual abuse. Auditor contacted the RCS and confirmed this protocol.

Agency meets this element.

115.21 (f) To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section.

The Fresno County Sheriff's Office investigates all allegations of sexual abuse or sexual victimization itself and complies with its own policy as written. Review of policy as well as interviews with investigative staff confirms compliance with this element and based on PRC guidance, indicates that this element is to be counted as N/A.

Auditor is not required to audit this element.

115.21 (g) The requirements of paragraphs (a) through (f) of this section shall also apply to: (1) Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in prisons or jails; and (2) Any Department of Justice component that is responsible for investigating allegations of sexual abuse in prisons or jails.

The element requiring that outside state agencies or DOJ component that conduct investigations comply with all elements of this standard, based on PRC guidance, indicates that this element is to be counted as N/A.

Auditor is not required to audit this element.

115.21 (h) For the purposes of this section, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general.

Agency does not conduct SAFE and SANE exams. Community based, SANE and SAFE trained medical personnel are responsible for these exams. Interviews with SANE and SAFE staff within the community confirmed that the personnel responsible for conducting these exams receive education concerning sexual assault and forensic examinations.

The element requiring that those persons providing advocacy services be screened for appropriateness and received education concerning sexual assault and forensic exams, based on PRC guidance, indicates that this element is to be counted as N/A.

Auditor is not required to audit this element.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random staff interviews, investigator interviews 4. Review of investigated cases 115.22 (a) The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. All allegations of sexual abuse and sexual harassment are investigated by the FCSO investigative unit. This was confirmed through review of policy D-360, interviews and review of cases investigated. Agency meets this element. 115.22 (b) The agency shall have in place a policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The agency publishes such policy on its website or, if it does not have one, makes the policy available through other means. The agency documents all such referrals. Agency is responsible for conducting all investigations and does not refer them out to other agencies. Agency policy D-360, section "Policy", page 1 states "It is the policy of the Fresno County Sheriff's Office to thoroughly investigate every allegation of sexual abuse, and where warranted by evidence, proportional sanctions, up to and including criminal prosecution, are implemented". Section XI, subsection A, page 14 of this same policy, directs that all such allegations will be investigated and subsection C, page 15 states that all such cases will be referred to the appropriate investigating unit. The agency website publishes the policy for investigations of these allegations which reads "Any allegation of sexual abuse, sexual harassment, sexual assault, or sexual misconduct will be investigated to the fullest extent whether administratively or criminally". No documentation of referrals for investigation were available for review based on the agency's investigative policy. Agency meets this element. 115.22 (c) If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity. Agency conducts all of its own investigations. No rating is required for this element. Auditor is not required to audit this element. 115.22 (d) Any State entity responsible for conducting administrative or criminal investigations

of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations.

Auditor is not required to audit this element.

115.22 (e) Any Department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations.

Auditor is not required to audit this element.

115.31	Employee training
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random staff interviews, Training section staff 115.31 (a) The agency shall train all employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' rights to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. The facility trains all employees on the 10 specific topics related to PREA by an in-person trainer using powerpoint. A review of lessons and Powerpoint presentations confirmed the topics were covered. A review of training logs confirmed that staff are receiving and understand the training. Interviews with staff confirmed they received and understand the training. AGENCY MEETS THIS ELEMENT 115.31 (b) Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only female inmates, or vice versa. The Fresno County Sheriff's Office houses both male and female inmates in all of their facilities. The training provided to staff is tailored to both populations as outlined in the standard. Review of the training provided confirmed that the training is appropriate for the population housed. Observation of both male and female inmates confirmed that both genders as well as a LGBT population are in fact housed at the facilities. The South Annex and Main Jail house both male and female inmates, the North Annex houses only male inmates. Staff are assigned at any of the three facilities, therefore additional training is not required. AGENCY MEETS THIS ELEMENT 115.31 (c) All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall provide each employee with refresher training every two years to ensure that all employees know the

agency's current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.

Agency is currently involved in training all staff in PREA. At the beginning of the audit, the PREA Coordinator made Auditor aware that not all staff had been trained but that training would be completed within a reasonable time frame. Interviews with the PREA Coordinator and random staff, Training unit staff, as well as training logs, confirmed that training is being completed for all employees and that refresher training is also being conducted. PREA education is provided upon hire and on an ongoing basis. All Corrections Officers are provided PREA training in the basic academy in a 4 hour course as part of the enhancement portion of the academy.

AGENCY MEETS THIS ELEMENT

115.31 (d) The agency shall document, through employee signature or electronic verification, that employees understand the training they have received

The agency provided written verification that employees understand the training they have received. The PREA Coordinator provided signed documentation by all currently trained employees that they received and understood the training.

AGENCY MEETS THIS ELEMENT

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random staff interviews, volunteer coordinator, contractors 115.32 (a) The agency 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. Agency provides all volunteers and contractors who have inmate contact, training on their responsibilities under the agency's PREA policy. A review of the training lessons and Powerpoint presentations as well as training records confirmed that this training is being conducted. Interviews with volunteers and contractors also confirmed that they have been trained and understand the training. Agency reports in the PAQ that they have trained 806 volunteers and contractors who have contact with inmates. AGENCY MEETS THIS ELEMENT 115.32 (b) 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. While agency Policy D-360, Section V, subsection C, page 9, mandates training on the agency's zero-tolerance policy and how to report sexual abuse, it does not indicate that volunteer and contractor training be based on the level of contact they have with inmates. Interviews with the PREA Coordinator and volunteers confirmed that the training is tailored to the amount of contact with inmates. Review of developed training finds that it includes the zero tolerance policy and PREA reporting guidelines. AGENCY DOES NOT MEET THIS ELEMENT VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT: The Auditor was provided supplemental documentation on June 20, 2017 to evidence and demonstrate corrective actions taken by the FCSO administration regarding this standard. This documentation is discussed below. ADDITIONAL DOCUMENTATION REVIEWED:

1. The FCSO Sexual Misconduct and Abuse policy #D-360 (Modified version approved June 20, 2017 by Sheriff)

The FCSO has revised their Policy #D-360 to reflect that training provided to volunteers and contractors is based on the services they provide and the level of contact they have with inmates. Auditor had previously confirmed proof of practice, the element was not met due to the agency policy not conforming with PREA standard 115.32 and not being reflective of practice. Now that the policy has been revised, policy fully reflects practice in this area.

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

115.32 (c) The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received

The agency maintains documentation of all training provided to volunteers and contractors and have submitted signed documentation that they have received this training and understand it.

AGENCY MEETS THIS ELEMENT

Recommendation: Training policy regarding volunteers and contractors should be re-worded to reflect the amount of training being based on the amount of inmate contact. Agency must provide auditor updated training policy with changes to be in compliance with this standard.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Review of Inmate Handbook, PREA posters 4. Interviews with PREA Coordinator, random staff interviews, volunteer coordinator, contractors 115.33 (a) During the intake process, inmates shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. While Policy D-360, section VI (Inmate Education) in its entirety, states inmates will be given training on the agencies Zero Tolerance policy and how to report, it falls short of stating this information will be given at intake. During the facility tour, PREA posters were conspicuously posted in numerous locations in the Intake area. All inmates being housed from Intake are given an inmate handbook in the Intake area. Inmate interviews gave varying answers as to training being provided in Intake, however, a majority of inmates interviewed stated they received the inmate handbook in Intake. The handbook gives an extensive explanation of the Zero Tolerance policy and how to report. Agency does not record signatures that every inmate has received PREA training. PREA training in Intake is limited to the Inmate Handbook and posters. While ADA inmates have a designated supervisor who ensures these inmates have and understand the agency's PREA policy and how to report, training in Intake does not address those inmates who cannot read or who are blind or deaf. Interviews with ADA inmates confirmed that they are aware of the PREA policy and how to report. Auditor did not have the opportunity to observe an ADA inmate in Intake but agency confirmed that the education of this population is currently not done in Intake. AGENCY DOES NOT MEET THIS ELEMENT VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT: The Auditor was provided supplemental documentation on June 20, 2017 to evidence and demonstrate corrective actions taken by the FCSO administration regarding this standard. This documentation is discussed below. ADDITIONAL DOCUMENTATION REVIEWED: 1. The FCSO Sexual Misconduct and Abuse policy #D-360 (Modified version approved June 20, 2017 by Sheriff)

The FCSO has revised their Policy #D-360 to reflect the issuance of the inmate handbook during the intake process. Proof of practice was obtained during the site visit when staff and inmates confirmed that the Inmate handbook was distributed during the intake process. Corrective action was to ensure that policy reflected practice. Policy now directs that the inmate handbook be distributed during the intake process. Regarding ADA inmates, policy now states that ADA inmates will be reported to the Booking Sergeant and the ADA Coordinator while the inmate is in booking for alternative arrangements to be made if necessary. A PREA Acknowledgement/oral notification form has also been created and is in full use. This form is utilized on all inmates booked into the Agency at the time of booking and is discussed in detail in subsection (e) of this standard.

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

115.33 (b) Within 30 days of intake, the agency shall provide comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.

The PREA section of the Inmate Handbook gives comprehensive information about their right to be free from sexual abuse and to be free from retaliation for reporting. All inmates housed at the Fresno County Sheriff's Office are given the Inmate Handbook as part of the Intake/Booking process. This was confirmed by interviews with staff and inmates and review of the Inmate Handbook. ADA inmates are educated at a later date, usually one to two days after being housed by their designated staff member. Agency has the ability to play video in all housing units for those who cannot read, but this system is not currently being used for PREA education.

AGENCY MEETS THIS ELEMENT

115.33 (c) Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards, and shall receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility.

All inmates receive the Inmate Handbook at Intake and are exposed to the PREA posters posted throughout all three jails, upon each arrest and booking. Inmates of the Fresno County Sheriff's Office does not contract with other facilities for housing purposes. All inmates received by the FCSO have PREA training either through the Inmate Handbook, PREA posters or through direct contact with PREA staff.

AGENCY MEETS THIS ELEMENT

115.33 (d) The agency shall provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled, as well as to inmates who have limited reading skills.

Agency policy D-360, section VI, subsection B, page 9 addresses this population and their

education on PREA. It also cites agency policy D-140/Inmates with disabilities, which also addresses this portion of the population. Agency has assigned one individual who's job it is to make contact with those identifying as ADA inmates and educate them individually. Through random inmate interviews and interview of PREA Coordinator, Auditor confirmed that this training is being provided. Agency provides bi-lingual officers who can assist those who are LEP and also provides a language bank if staff cannot assist. Review of recruitment flyers for Corrections Officers confirmed that Agency is actively seeking officers who are multi-lingual in order to assist this population of inmates.

AGENCY MEETS THIS ELEMENT

115.33 (e) The agency shall maintain documentation of inmate participation in these education sessions.

All ADA inmates, once identified, are provided PREA education and training based on their specific needs. However, this education and training, seldom occurs during the intake process. Education and training of the ADA inmate population is documented and was reviewed to provide confirmation of compliance. However, documentation of PREA training is not documented for non-ADA inmates. PREA posters are in numerous locations in the intake area and Inmate handbooks are handed out to all inmates being moved to housing.

AGENCY DOES NOT MEET THIS ELEMENT

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The Auditor was provided supplemental documentation on July 13, 2017 to evidence and demonstrate corrective actions taken by the FCSO administration regarding this standard. This documentation is discussed below.

ADDITIONAL DOCUMENTATION REVIEWED:

1. The FCSO PREA ACKNOWLEDGEMENT/ORAL NOTIFICATION form

The FCSO has created the PREA ACKNOWLEDGEMENT/ORAL NOTIFICATION form. This form was designed to inform all inmates of the FCSO's zero tolerance policy toward sexual abuse and sexual harassment, that all incidents of sexual assault or abuse will be investigated and to provide inmates with numerous entities to which PREA related incidents may be reported. The form also includes addresses and telephone numbers of these entities to include the US Department of Justice for federal inmates and the DHS Hotline for inmates being held on immigration holds.

On July 13, 2017 the FCSO provided ten (10) samples of this form being used during the intake process which includes the inmates name, JID number and completing officer and ensures that all inmates to include ADA inmates are know the agencies stance on sexual abuse and sexual harassment as well as how and to whom they can report.

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

115.33 (f) In addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.

Agency has a comprehensive section in the Inmate Handbook on PREA and has posters in virtually all inmate areas which was confirmed during the on-site audit and facility tour. Random inmate interviews also confirmed that inmates know about PREA from the Inmate handbook as well as the PREA posters posted throughout the facility.

AGENCY MEETS THIS ELEMENT

Recommendation: Auditor suggested that introduction to PREA for all inmates, with or without disabilities, should be documented either by electronic signature when signing intake documents or by Classification, who interviews all inmates. ADA accommodations should be made during the intake process. Agency must institute a signature process during the intake process. Agency must also develop a protocol for training ADA inmates in PREA during the intake process and not several days after intake. Agency must provide documentation of these changes to be in compliance with this standard.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Review of investigative staff training documentation 4. Interviews with PREA Coordinator, investigative staff 115.34 (a) In addition to the general training provided to all employees pursuant to § 115.31, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings. Agency conducts its own sexual abuse investigations and therefore agency investigators received training on PREA: Investigating Sexual Abuse in a Confinement Setting. Additionally, interviews with investigative staff and PREA Coordinator confirmed that all investigators received the training. Agency provided copies of training certificates for investigators. AGENCY MEETS THIS ELEMENT 115.34 (b) Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The NIC training, sponsored by the DOJ is a comprehensive training which includes techniques for interviewing, Miranda/Garrity warnings, evidence collection and the criteria and evidence required to substantiate a case. Investigative staff attended this training and training certificates were provided. AGENCY MEETS THIS ELEMENT 115.34 (c) The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. Agency maintains and produced training certificates for all investigators from the NIC, DOJ sponsored training on Investigating Sexual Abuse in a Confinement Setting. Interviews with investigative staff confirmed that this training was attended by investigators. AGENCY MEETS THIS ELEMENT 115.34 (d) Any State entity or Department of Justice component that investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations.

	THIS ELEMENT IS N/A
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Review of investigative staff training documentation 4. Interviews with PREA Coordinator, investigative staff 115.35 (a) The agency ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. Agency produced training materials presented to medical and mental health staff. Interviews with medical and mental health staff confirmed that they had received the training. Training logs for medical and mental health staff were provided for review and confirmed compliance. AGENCY MEETS THIS ELEMENT 115.35 (b) If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations. Medical staff contracting with the Fresno County Sheriff's Office do not conduct forensic exams. These exams are performed at facilities within the community. THIS ELEMENT IS N/A 115.35 (c) The agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere. Training logs for medical and mental health staff were provided for review and confirmed compliance. Interviews with PREA Coordinator as well as medical and mental health staff also confirmed that this training was provided and attended. All staff are trained in PREA by the FCSO regardless of training received elsewhere, ensuring that all staff are trained to the level required by the FCSO. AGENCY MEETS THIS ELEMENT 115.35 (d) Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner 's status at the agency.

Agency policy D-360, section V, subsection A-B, pages 8-9 discuss this element directly. Agency is currently requiring all medical and mental health, contract employees to receive the same training as custody staff due to the amount and extent of contact with inmates. Agency provided training logs which confirmed attendance and understanding.

AGENCY MEETS THIS ELEMENT

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Review of Intake screening forms, review of random inmate booking files 4. Interviews with PREA Coordinator, random inmates, staff responsible for risk screening, Classification Sergeant 115.41 (a) 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 inmates are screened as part of the Intake process. The facility produced documents showing that inmates were assessed during the Intake screening. Interviews with screening staff confirmed that all inmates are screened in Intake. Using alpha rosters, random sample screening documents were requested on inmates from various housing units in an attempt to confirm that all inmates are screened in Intake. These documents confirmed that intake screenings for the risk of being sexually abused is being completed on all inmates in the Intake area. During the facility tour, auditor observed inmates being screened by Intake Classification staff, confirming screenings are being completed during the Intake process. AGENCY MEETS THIS ELEMENT 115.41 (b) Intake screening shall ordinarily take place within 72 hours of arrival at the facility. Agency produced documents reviewed by auditor, showing the Intake screening of random inmates which were compared to the inmates date and time of booking. Inmates requested were chosen at random from alpha rosters of inmates in all three buildings. These documents confirmed that all screenings are done within 72 hours of booking. Inmates stay in the Intake area on average from 10-12 hours before being released or moved back to housing. Screenings are performed during this time period which exceeds the standard. AGENCY EXCEEDS THIS ELEMENT 115.41 (c) Such assessments shall be conducted using an objective screening instrument. Agency uses an objective screening instrument during the Intake process. During the facility tour, Auditor observed the use of the audit tool and was later provided copies of random inmate assessments. The assessment tool, completed exclusively by officers assigned to the classification unit, attempts to ascertain information about all enumerated items in this element and then scores the information given a numerical rating. This rating is used to determine placement within the facility. Agency policy D-130, section V, subsection A requires the screening tool contain all of the required elements of this subsection. Based on Auditors

observation of the forms being used, interviews with classification staff who confirmed the tool is used as required by policy, and review of agency policy, the screening instrument was deemed to be objective.

The screening tool being used was developed by the National Institute of Corrections using the Model Systems Approach. The assessment tool used is the Additive Point Objective Classification System Approach. The FCSO began using this assessment tool on November 4, 1991. Classification staff are trained in the inmate management unit utilizing a 13 week training program, during which the trainee is monitored through every phase by a training officers. Training on the use of the objective assessment tool is completed in week three of the thirteen week program and appropriate use of the tool is evaluated on an ongoing basis.

AGENCY MEETS THIS ELEMENT

115.41 (d) The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate 's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate 's own perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes.

In screening for sexual victimization, agency uses the following criteria as outlined in the PREA Standard on their Intake screening form: Age, previous incarceration, questions regarding LGBTI, prior sexual victimization and the inmates perceived vulnerability. However, agency does not include the following criteria as outlined in the standard: Mental/physical or developmental disabilities, physical build, a solely non-violent criminal history, gender non-conforming, inmates being detained solely for civil immigration purposes. Agency policy D-360, section VII, subsection B, page 7 mirrors the standard for criteria used to assess inmates for risk of sexual victimization, however, the Intake screening form does not mirror policy. Agency provided Auditor copies of completed screening tools on inmates chosen at random from alpha rosters at all three jails. Review of these documents confirmed the lack of information as stated in this element.

AGENCY DOES NOT MEET THIS ELEMENT

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

Auditor had extensive conversations with the FCSO PREA Manager regarding the Inmate Classification Form during the corrective action period.

DOCUMENTATION REVIEWED:

1. The FCSO Inmate Classification Questionnaire

The FCSO Inmate Classification Questionnaire provided at the time of the on site audit was

discussed in full following the interim report. After much discussion, it is evident that the minimum questions required for assessing an inmates risk for sexual victimization are present on the form. While specific questions such as the physical build of the inmate or an exclusively non violent criminal history, are not directly asked, the physical status of the inmate is assessed and a criminal history is obtained which would provide this information. This questionnaire, in its present form, relies heavily on the assessor to ask or assess the inmate for the appropriate PREA related risk factors. In its present form, the questionnaire complies in all material ways with 115.41 (d) but could include specific PREA related risk factors, alleviating the possibility of inadvertently not recognizing these risk factors.

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

115.41 (e) The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.

In screening to measure the risk for sexual abusiveness, agency considers all three criteria as outlined in the standard. Agency provided auditor copies of Intake screening forms, as well as random Intake screening forms requested on current inmates, selected by booking number. All provided screening forms were reviewed and confirmed that all three criteria are being used in this assessment.

AGENCY MEETS THIS ELEMENT

115.41 (f) Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

All inmates are re-screened within 30 days of the initial screening, as outlined in Agency policy D-360, section IX, subsection A, page 13 . This was confirmed through interviews with staff, review of policy and review of random inmate files. Inmate files used to confirm this element were chosen from alpha rosters of all three jails and individuals were selected by booking number to be reviewed.

AGENCY MEETS THIS ELEMENT

115.41 (g) An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

Inmates are re-screened when warranted, requested or additional information is received. This was confirmed through policy review of policy D-360, section IX, subsection A, page 13, staff interviews and personal experience. Two inmates communicated with auditor prior to the on-site audit. Agency took the information provided by Auditor and re-assessed one of the inmates for risk of victimization. During a random inmate interview, an inmate expressed a vague concern for his safety within his housing unit. This information was passed on and action was immediately taken by the agency to re-assess the inmates safety and to address his concerns. Staff separated the inmate from his housing unit where he was feeling uneasy,

keeping him safe. Staff then interviewed the inmate to determine what, if anything was occurring. Staff notified psychiatric services to speak with the inmate as he was very emotional. Following the re-assessment for risk of victimization, a housing decision was made based on the assessment. The actions of staff in this specific instance confirmed that staff were well aware of the agency policy and were following the policy as written.

AGENCY MEETS THIS ELEMENT

115.41 (h) Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section.

Agency policy D-360, Section VII, subsection G prohibits the disciplining of inmates for refusal to answers questions or disclose information during screening. No evidence was produced that inmates had been disciplined for refusing to answer or disclose and no inmates indicated in their interviews that they had received such disciplinary action. Random inmate interviews also confirmed that inmates are not disciplined for not disclosing information during the intake screening.

AGENCY MEETS THIS ELEMENT

115.41 (i) The agency shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

To protect sensitive information which could be detrimental to the inmate, Agency stores all sensitive material, regardless of how and when it is obtained, in computer files which are password and access protected. Interviews with Classification staff, PREA Coordinator and random staff confirmed that they understand that sensitive information is required to be kept confidential. Auditor was given access to the system by the PREA Coordinator which confirmed that the files were password and access protected. Random staff have neither the access or password to these sensitive documents.

AGENCY MEETS THIS ELEMENT

Recommendations: Agency must make changes to their Intake screening for sexual victimization to contain the minimum requirements listed in 115.41(d). Screening form should not only mirror the standard but should mirror Agency policy D-360, section VII, subsection B, page 7, which does include the minimum criteria. Changes in policy must be provided to auditor to confirm the changes have been made.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Review of Intake screening forms 4. Interviews with PREA Coordinator, random inmates, staff responsible for risk screening 5. Facility tour 115.42 (a) The agency shall use information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. Classification supervisor explained that all information gathered from all sources is used in making housing, cell, bed, work, education and program placement decisions. The information is placed into a decision tree which assists staff in determining appropriate decisions for specific inmates. Placement can be overridden on a case by case basis when additional information is received that could increase an inmates risk of victimization or offending. Agency supplied copies of random inmate classification assessments which were selected from alpha rosters from all three jails and which were reviewed by Auditor. The assessments provided are used to determine initial housing placement and subsequent decisions about work, education and program participation. Agency policy D-360, section VII, subsections A-G, pages 10-12, describes the assessment process used by the FCSO. Documentation, interviews, policy and demonstration by staff confirmed compliance. AGENCY MEETS THIS ELEMENT 115.42 (b) The agency shall make individualized determinations about how to ensure the safety of each inmate. All decisions are made on an individual basis to ensure the safety of each inmate. According to agency policy D-360, decisions are based on Intake screenings, 30 day re-assessments and any information received while the inmate is in custody. Interviews with the Classification supervisor, PREA Coordinator and Classification staff, policy review and assessment reviews, confirmed that decisions are made on an individualized basis. During and after the on-site audit, Auditor brought information to the attention of corrections staff regarding several inmates who had provided information that required investigation. Staff demonstrated through interviews, housing placement and the use of psychiatric services, that individualized decisions are made about each inmates safety. AGENCY MEETS THIS ELEMENT 115.42 (c) In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency

shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.

Decisions on placement of transgender inmates for housing purposes within the Fresno County Sheriff's Office are all made on a case by case basis. The screening tool and classification tool are specific to individual inmates. Agency policy D-360, section VII, subsections A-G, pages 10-12, outlines the FCSO policy on placement. Interviews with classification staff, PREA Coordinator, random staff and inmate interviews, confirmed that decisions on placement are done on an individualized basis. There were no transgenders housed in General Population housing units at the time of the on-site audit. However, interviews with PREA Coordinator and classification staff revealed that there have been transgender inmates/intersex inmates housed in General population housing units in the past.

AGENCY MEETS THIS ELEMENT

115.42 (d) Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.

While the standard requires that placement and programming assignments for transgender or intersex inmates be reassessed at least twice each year, Agency reassesses housing placement and programming assignments at a maximum of every 30 days and more frequently as a rule for this population. This is outlined in agency policy D-360, section VII, subsection C-F, pages 10-12. What the Agency refers to as "Lifestyle" inmates, have a supervisor assigned directly to the population. It is this supervisors responsibility to assess the needs of these inmates and make necessary changes when appropriate. Auditor reviewed classification assessments both from Intake and ongoing assessments. Inmate, classification staff and PREA Coordinator interviews and document reviews, confirmed that subsequent assessments are completed.

AGENCY EXCEEDS THIS ELEMENT

115.42 (e) A transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration.

Transgender and Intersex inmates views are given consideration upon the initial screen and throughout their incarceration as written in agency policy D-360, section VII, subsection B, page 10. All inmates receive due process in the classification and programming process, Transgender and Intersex inmates have a dedicated supervisor to assist them during their incarceration. Classification assessment reviews and inmate interviews conducted by auditor, confirmed that the inmates own views regarding their safety is asked and taken into consideration as written in policy.

AGENCY MEETS THIS ELEMENT

115.42 (f) Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

In the South Annex, the showers are single use facilities located within a Pod. All showers were equipped with shower curtains for privacy. In the Main Jail and North Annex, both newer facilities than the South Annex, the showers are designed for multi inmate use, however, inmates shower individually by practice and are never required to take a shower with another inmate. The shower stalls are equipped with shower curtains for privacy and the changing of clothes. During inmate interviews, a common complaint made by inmates was that an inmate had to step outside the shower curtain, into full view, to put on clothing. Examination of the shower stalls, coupled with interviews with staff and random inmates confirmed that inmates can dress behind the shower curtain, however, many inmates choose to dress in full view. During the on-site audit and facility tour, Auditor visited every housing area of all three jails and saw the showers being used on numerous occasions, Auditor saw no one in a state of undress outside the shower curtains. Configuration of the shower stalls in each facility was confirmed by auditor during the facility tours. Practice was confirmed through inmate and staff interviews and personal observation.

AGENCY MEETS THIS ELEMENT

115.42 (g) The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.

Inmates housed with the FCSO, by policy D-360, section VII, subsections A-G, pages 10-12, are screened for appropriate placement, housed based on their likelihood of being sexually abused and re-assessed at a minimum of every 30 days for appropriateness of placement. The FCSO has units which primarily house LGBTI inmates, however, by policy, LGBTI inmates may be housed in general population based on a case by case evaluation. This ensures the inmates health and safety as well as the likelihood of such placement creating management or security problems. The inmates housed in these units are not housed solely based on their identification as LGBTI. Interviews with PREA Coordinator, classification staff, random staff and random inmates, confirmed that housing is determined on a case by case basis, the inmates likelihood of being victimized in General Population and the desire of the individual. Every thirty days, all inmates are re-assessed for appropriate housing placement and this includes units which house primarily LGBTI inmates. Placement of inmates in housing other than general population is documented and the reason for the placement is articulated. Auditor was provided access to classification determinations of housing assignments and no inmates were housed bases solely on their status as LGBTI inmates. During the facility tour, auditor identified several LGBTI inmates within general population housing units, which confirms compliance with policy as well as this particular element.

AGENCY MEETS THIS ELEMENT

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Review of Intake screening forms, 30 day re-assessment forms 4. Interviews with PREA Coordinator, random inmates, staff responsible for risk screening 5. Facility tour 115.43 (a) Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment. Policy D-130 "Inmate Classification", section XIV, subsection A, pages 3-4, directs that inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. This policy goes on to state that If the assessment cannot be conducted immediately, the inmate may be held in involuntary segregated housing for less than twenty-four (24) hours while the assessment is completed. Interviews with staff and inmates confirmed that all inmates have been assessed individually for being "at high risk" for sexual victimization and are housed accordingly. Review of Intake and 30 day assessments as well as review of files of inmates in segregated housing chosen from alpha rosters and based on JID number, confirmed that inmates are housed no longer than 24 hours in involuntary segregated housing while the assessment is being completed. There were no examples of inmates being held in segregated housing pending housing assignment as all initial assessments are completed within the first 12 hours of incarceration. There were however, inmates housed in segregated housing following an incident or based on information received that required involuntary segregation. AGENCY MEETS THIS ELEMENT 115.43 (b) Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) The reasons for such limitations. Inmates placed in segregation, per policy D-130, section XIV, subsection B, shall have access to programs, privileges, education and work opportunities to the extent possible. Restrictions to the described list shall be documented. Auditor confirmed compliance through interviews

with random inmates as well as personal observation of programs being held for those in segregated housing. Auditor also confirmed that restricted access to privileges is documented through random file reviews of inmates in segregated housing, chosen at random from alpha rosters and based on JID number.

AGENCY MEETS THIS ELEMENT

115.43 (c) The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

Policy D-130, Section XIV, subsection C, page 4, directs that segregation shall not ordinarily exceed a period of thirty (30) days. Section D states that every thirty (30) days, a classification review shall be done to determine whether there is a continuing need for separation from the general population. Interviews with PREA Coordinator, random staff and segregated inmates confirmed that this is the practice as well as the policy. Agency provided access to classification files, chosen at random from alpha rosters and based on JID number, which confirmed this practice.

AGENCY MEETS THIS ELEMENT

115.43 (d) If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document: (1) The basis for the facility 's concern for the inmate 's safety; and (2) The reason why no alternative means of separation can be arranged.

Documentation of the need for segregation is required in Policy D-130, section XIV, subsections A through C. Interviews with staff as well as documentation review of files of inmates placed in involuntary segregated housing, confirmed that articulation of reasons for involuntary segregation is clearly stated.

AGENCY MEETS THIS ELEMENT

115.43 (e) Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.

The requirement for a thirty (30) day review, as discussed previously, is outlined in Policy D-130, section C and D and compliance was confirmed through interviews and documentation reviews.

AGENCY MEETS THIS ELEMENT

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Review of PREA posters, Inmate handbook 4. Interviews with PREA Coordinator, random inmates, random staff, Internal affairs staff 5. Facility tour 6. Testing of technology used to report 115.51 (a) The agency 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. Agency has provided inmates multiple ways of reporting sexual abuse and harassment, retaliation or staff neglect. Inmates have at least five different methods of reporting to include writing directly to the Sheriff's Office Internal Affairs Office. These methods are outlined on posters and in the inmate handbook. The facility tour, interviews of staff and inmates, as well as review of the Inmate Handbook and agency policies confirmed that all methods are available and in use. During the facility tour, the ability to use the inmate phone system to call an outside reporting source was found to be inoperable. The PREA Coordinator immediately began looking into the issue and corrected the problem within hours. During interviews with inmates, auditor found that methods of reporting are clearly spelled out in the Inmate Handbook given to every inmate as well as clearly visible on the PREA posters and yet inmates had a difficult time verbalizing these methods. Many of the inmates were not aware that phone conversations with entities designated for outside reporting are not recorded or monitored in any fashion. This too was spelled out on both the PREA posters and in the Inmate Handbook. AGENCY MEETS THIS ELEMENT 115.51 (b) The agency shall also provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security. Agency has designated the California Attorney General's Office as the outside agency to which inmates may report sexual victimization. The Fresno County Sheriff's Office is a federal holding facility so it has also made available the U.S. Department of Justice, Office of the Inspector General and the Department of Homeland Security as alternative outside agencies to which federal and immigration inmates may report sexual victimization. All of these

resources are spelled out on both the PREA posters as well as in the Inmate Handbook. Review of both resources confirmed that the resources are made available to inmates. Inmates designated as ADA or in need of interpretive services are identified in Intake and are made aware of these resources by designated commissioned staff. Auditor confirmed this practice through review of agency policy and through random interviews with staff and inmates.

AGENCY MEETS THIS ELEMENT

115.51 (c) Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

Policy D-360, section XII, subsections A-E, pages 15-17 states that all reports of sexual victimization may be reported verbally, in writing, anonymously and from third parties. All reports received by whatever means, are promptly documented. Auditor confirmed this practice through review of policy, interviews of PREA Coordinator, random staff and inmates as well as through personal observation of reports being taken by staff from third parties. Auditor received and relayed information from several inmates who asked for assistance or displayed behavior which required attention by commissioned staff and psychiatric services. All were handled promptly and documented as evidenced through reports within the Records Management System in use by the FCSO.

AGENCY MEETS THIS ELEMENT

115.51 (d) The agency shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates.

Agency policy D-360, section XII, subsection A-C, pages 15-16, directs employees to report allegations and elaborates on alternative methods for both employees and inmates to report. Interviews with inmates and staff confirmed that alternative methods are publicized and known. All officers interviewed stated that they knew that they were allowed to privately report the abuse or harassment of inmates and also knew that they were allowed to go around the chain of command if necessary. Knowledge of this policy by all commissioned staff confirmed training on the topic had been conducted and understood. There were no cases of employees making reports on behalf of inmates for Auditor to review.

AGENCY MEETS THIS ELEMENT

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Review of Records Management System (RMS) 4. Interviews with PREA Coordinator, random inmates, random staff, Internal affairs staff 5. Facility tour 115.52 (a) An agency shall be exempt from this standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse. Agency policy E-140, section VI, Subsections A-D, pages 7-8 deal specifically with grievances regarding sexual abuse. Interviews with both staff and inmates confirmed knowledge that this policy exists and how to use it. Auditor reviewed the grievance form used by the FCSO to confirm its existence. Auditor also observed the RMS log entries for grievances and observed the investigation into safety concerns. Auditor did not have the opportunity to review any grievances regarding allegations of sexual abuse by inmates or filed on behalf of an inmate by a third party or an emergency grievance regarding substantial risk of imminent sexual abuse as there were none available for review at the time of the on-site audit. Auditor did observe the handling of verbal concerns for safety made by inmates. Auditor was also a third party reporter regarding possible sexual abuse or harassment. The allegation was sent by mail to Auditor which was not received until after the on-site audit. AGENCY MEETS THIS ELEMENT 115.52 (b) (1) The agency shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. (2) The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse. (3) The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. (4) Nothing in this section shall restrict the agency's ability to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired. Agency Policy E-140 does not impose a time limit on the submission of grievances regarding allegations of sexual abuse, however, standard time limits do apply on portions of grievances which do not allege sexual abuse. Inmates are not required to utilize the formal grievance process nor are they required to attempt to resolve grievances alleging sexual abuse with line staff. During random inmate interviews, several inmates made Auditor aware of safety and security concerns related to PREA but would not elaborate as to the specifics of their concerns. These concerns, made verbally by a third party, were taken by corrections staff without hesitation and acted on immediately as observed by Auditor. Auditor also made corrections staff aware of PREA concerns received in writing by Auditor after the on-site audit, which was also acted on immediately. Auditor was unable to confirm that inmates do not have to attempt resolution with staff as there were no incidents of this type to review at the time of

the on-site audit. Interviews with staff and inmates confirmed a working knowledge of this policy.

AGENCY MEETS THIS ELEMENT

115.52 (c) The agency shall ensure that— (1) An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and (2) Such grievance is not referred to a staff member who is the subject of the complaint

Policy E-140, section I, subsection D 1-2, page 3 allows an inmate to go outside the formal inmate grievance procedure when utilizing normal grievance channels would subject the inmate to substantial risk of personal injury or cause other serious and irreparable harm. Subsection F of this same section allows an inmate to file a grievance directly to the Bureau Commander. Section III, subsection F, page 6, specifically states an employee who appears to be involved in the matter shall not participate in any capacity in the resolution of the grievance. Auditor had no incidents of this type to review to confirm that agency complies with this element. However, interviews with staff and inmates confirmed that both understood that a complaint did not have to be given to the staff member who is the subject of the complaint and that the subject of the complaint would not be investigating the complaint.

AGENCY MEETS THIS ELEMENT

115.52 (d) (1) The agency issues a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. (2) Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal. (3) The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made. (4) At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.

Agency policy E-140, section IV, subsection A directs that grievances be investigated and processed for review within a reasonable amount of time, which is determined to be 14 calendar days. Subsection E of this same policy and section allows an inmate to appeal the outcome of a grievance to the next higher level within 5 calendar days. Section XI, subsection D, directs that the Bureau Commander or designee should issue a written response to an appeal of a grievance within 30 working days. Combined, the policy followed by the FCSO falls well within the time frames outlined in this element. The FCSO Inmate grievance policy does not allow for the lack of a response from the agency. Agency does reserve the right to close a grievance without response if the grievance contains profanity, insults, or racial slurs (unless included as an alleged direct quote of another party), contains a threat of serious bodily injury to a specific individual, is considered to be frivolous, malicious or harassing or demonstrates a pattern of abuse of the grievance system.

Auditor was granted access to the RMS where grievances, assignments of grievances and outcomes are logged and was able to confirm that the policy is being adhered to.

While agency policy does not specifically address the extension period or the requirement of

agency to notify inmates in writing of the need for extensions, by requiring a written response on all grievances within 14 days, the allowance of 5 calendar days for inmates to appeal and by requiring a written response to the appeal within 30 work days, auditor has determined that agency complies in all material ways with the standard. Substantial compliance in this case meets the standard of this element.

AGENCY MEETS THIS ELEMENT

115.52 (e) (1) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. (2) If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process. (3) If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision.

Agency policy E-140, section VI, subsection B 1-2, pages 7-8, specifically address this element of the standard. There were no examples of a third party filing requests for administrative remedies relating to allegations of sexual abuse available for review. Subsequently, there were no examples of an inmate declining to have the request processed on his or her behalf in the past twelve month period. Therefore there was no documentation to review. Auditor reviewed agency policy and found through random interviews with inmates and corrections staff, that inmates and staff are aware that third parties are allowed to assist in filing requests for administrative remedies relating to allegations of sexual abuse. The FCSO website also describes the policy and procedure for third party reporting. Due to the lack of documented evidence of compliance, agency is found to be in substantial compliance in all material ways.

AGENCY MEETS THIS ELEMENT

115.52 (f) (1) The agency shall establish procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. (2) After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision documents the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

Agency policy E-140, section VI, subsection C 1-2, page 8 establishes policy regarding the filing of an emergency grievance if an inmate believes they are subject to substantial risk of imminent sexual abuse. A grievance of this type is directed, as required by standard 115.52, element (f), to a review level at which immediate action may be taken and in the case of the FCSO, that level is designated as the Watch Commander. Subsection C 1-2 directs that the grievance be assigned and investigated and that an initial response and final decision be documented. Where this policy falls short is that it does not direct that an initial response be

given within 48 hours and a final decision be given within 5 days.

AGENCY DOES NOT MEET THIS ELEMENT

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The Auditor was provided supplemental documentation on June 20, 2017 to evidence and demonstrate corrective actions taken by the FCSO administration regarding this standard. This documentation is discussed below.

ADDITIONAL DOCUMENTATION REVIEWED:

1. The FCSO Sexual Misconduct and Abuse policy #D-360 (Modified version approved June 20, 2017 by Sheriff)

The FCSO has revised their Policy #D-360 to specify that following an emergency grievance, an initial response will be given within 48 hrs and a final response given within 5 days. This change ensures prompt responses to emergency grievances and streamlines the emergency grievance process.

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

115.52 (g) The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.

Policy E-140, section VI, subsection D, specifically states an inmate may be disciplined following the submission of a grievance alleging sexual abuse only if it can be demonstrated the inmate filed the grievance in bad faith. There were no examples of this within the previous twelve month period. Compliance was confirmed through staff and inmate interviews and policy review.

AGENCY MEETS THIS ELEMENT

Recommendation: Agency must make an addition to policy E-140 which states that an initial response to an Emergency Grievance be given with 48 hrs and that a final determination be given within 5 days. The change must be made and provided to Auditor within the corrective action period to meet this element of the standard.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Review of PREA posters 4. Interviews with PREA Coordinator, random inmates, random staff, Rape crisis hotline personnel 5. Facility tour 115.53 (a) The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. The printed material given to inmates lists the phone numbers and mailing addresses to local and federal rape crisis centers and provides unmonitored phone access to these centers. The FCSO also provides contact information for RCS – Rape Counseling Service of Fresno, RAINN - Rape, Abuse & Incest National Network on all PREA posters in several languages, posted throughout all facilities. Inmates have access to communication with these entities through telephone, or written communication. Telephone access is available within cells in the intake area, within the group bunk areas in the South Annex and dayroom areas in the Main Jail and North Annex. Written communication can be made through the inmate mail service available at any time. During the facility tour, Auditor observed PREA posters in all areas of all facilities where inmates have access and observed the information required by this standard. The placement of telephones in all areas described above, was also confirmed during the facility tour. AGENCY MEETS THIS ELEMENT 115.53 (b) The facility shall inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. While the inmate handbook and printed posters indicate the extent to which an inmates communication will be monitored, there is no information provided regarding the extent to which the report of sexual abuse will be forwarded to authorities in accordance with mandatory reporting laws. Interviews with staff and inmates indicated that although the inmate handbook and the printed posters indicated that calls to designated crisis call centers are not monitored, neither staff nor inmates were aware of this. Interviews with corrections staff as well as medical staff, indicated that some knew of mandatory reporting laws while others did not. Interviews with inmates indicated that almost no inmates were aware of mandatory reporting

requirements.

Review of PREA posters during the on-site visit, review of the Inmate Handbook and review of policy did not address the topic of mandatory reporting laws. Staff are required by policy to report incidents of sexual abuse or sexual harassment, but there is nothing addressing mandatory reporting as required by law.

AGENCY DOES NOT MEET THIS ELEMENT

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The Auditor was provided supplemental documentation on June 20, 2017 to evidence and demonstrate corrective actions taken by the FCSO administration regarding this standard.

This documentation is discussed below.

ADDITIONAL DOCUMENTATION REVIEWED:

1. The FCSO Sexual Misconduct and Abuse policy #D-360 (Modified version approved June 20, 2017 by Sheriff)
2. Inmate Handbook

The FCSO has revised their Policy #D-360 and the Inmate Handbook to state that information received from an inmate regarding sexual abuse and sexual harassment will be kept confidential as required by law.

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

115.53 (c) The agency shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

Agency provided an MOU for SANE/SAFE exams at the local medical facility that was for the time frame of 11-01-10 through 10-31-15. When asked about current MOU's, the PREA Coordinator stated they were actively working on updated MOU's for SAFE/SANE exams as well as the local crisis call center. Based on past MOU's being in place, agency has demonstrated their previous compliance with this element and its good faith attempt to secure ongoing MOU's. Agency has not produced past or present MOU's with emotional support service providers.

AGENCY DOES NOT MEET THIS ELEMENT

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The Auditor was provided supplemental documentation on July 13, 2017 to evidence and demonstrate corrective actions taken by the FCSO administration regarding this standard.

This documentation is discussed below.

ADDITIONAL DOCUMENTATION REVIEWED:

1. Memorandum from the FCSO PREA Manager, documenting his efforts to obtain an MOU for the utilized emotional support agency.

Agency utilizes the services of the local crisis call center for inmate emotional support. The ability to utilize this service by inmates through the inmate phone system was checked at the time of the on site audit. Auditor found the service to be operational and a subsequent interview with the provider confirmed that they do receive calls from FCSO inmates. The PREA Manager has attempted on numerous occasions to obtain an MOU from this agency, but has been unsuccessful. While the agency currently does not have an MOU in place, the service has been and is still providing emotional support services to FCSO inmates. Agency has made good faith attempts to obtain an MOU from this services and therefore is in substantial compliance with PREA Standard 115.53 (c).

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

Recommendation: Agency must add to all forms of communication having to do with the reporting of sexual abuse to inmates and staff, the extent to which such reporting is subject to mandatory reporting laws. Agency must also provide proof of past or current MOU's with emotional support agencies made available to inmates. Both the addition to all forms of communication as well as past or current MOU's or attempts to obtain MOU's with emotional support agencies, must be provided to auditor to demonstrate compliance.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Review of Inmate Handbook, FCSO website 4. Interviews with PREA Coordinator, random inmates, random staff 115.54 (a) The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate. Agency has established a method to receive third-party reports of sexual abuse and harassment. Agency policy D-360, section IV, subsection A 2e, pages 6-7 and subsection C page 8 directs that commissioned staff will take third party reports of sexual abuse and sexual misconduct. While third party reporting is not specifically mentioned in the inmate handbook, the handbook does suggest going to others besides custody staff where appropriate. The handbook also gives suggestions on how to report anonymously if desired. The agency specifically explains on the agency website, how to make a third party report on behalf of an inmate. Auditor reviewed agency policy, the Inmate Policy and the FCSO website to confirm the agencies compliance with this element of the standard. Interviews with staff and inmates confirmed that both are aware that third party reporting is appropriate and will be acted upon. AGENCY MEETS THIS ELEMENT

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff 4. Facility tour 5. Testing of technology used to report 115.61 (a) The agency 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. Policy D-360, section XII, subsection A 1, pages 15-16, directs that staff immediately report incidents of sexual abuse or sexual harassment. An example of agency compliance with this element is based upon Auditor receiving a letter from an inmate housed at the FCSO prior to the onsite visit. The letter described an allegation of abuse which occurred at another facility prior to the inmate being housed at the FCSO. During the on-site audit, Auditor interviewed the inmate who had authored the letter. The inmate explained that he had made FCSO staff aware of the incident when he arrived. Auditor found through interviews of the inmate, commissioned staff and document review that the FCSO was in compliance with agency policy by interviewing the inmate, documenting the allegation, notifying the agency where the allegation occurred and then went a step further by meeting with the involved agency to conduct further interviews for the investigation. An interview with the PREA Coordinator confirmed that the PREA office is fully aware of the inmate and the allegations. Interviews of commissioned staff, medical and mental health staff, volunteers and contractors, confirmed that this policy is practiced at the facility. Auditor reviewed training outlines and PowerPoint presentations given to all levels of staff which discuss agency policy and directs compliance. Auditor also reviewed training logs which confirmed participation and understanding of the policy on reporting. AGENCY MEETS THIS ELEMENT 115.61 (b) 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. There were no examples available of non-compliance with agency policy or this PREA standard. Policy D-360, section XII, subsection A 2, page 16, prohibits staff from revealing any information related to a sexual abuse report to anyone, other than to the extent necessary. Interviews with staff, including medical and mental health staff, confirmed that this is practiced at the facility. All staff were aware of the confidential nature of this type of allegation.

AGENCY MEETS THIS ELEMENT

115.61 (c) Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner 's duty to report, and the limitations of confidentiality, at the initiation of services.

Agency policy D-360, section XV, subsections A-C, pages 18-19 mandates reporting of allegations of sexual abuse or sexual harassment on a need to know basis for treatment, investigation, security and management decisions upon disclosure of the abuse or harassment. As discussed in section (a) of this standard, agency policy requires notification by all staff of sexual abuse or sexual victimization. Interviews with medical and mental health staff confirmed that this is the practice at the FCSO and that inmates are notified of limits on confidentiality upon delivery of services. Follow up interviews with medical staff confirmed that the contracted medical provider has no written policy to inform inmates of their duty to report at the initiation of services but that inmates are notified.

AGENCY MEETS THIS ELEMENT

115.61 (d) If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

Agency does not house inmates under the age of 18. As discussed above, agency has no written policy or printed document that mandates or discusses a duty to report. However, agency investigates its own cases of sexual abuse and sexual harassment and policy D-360, section XII directs prompt reporting by all personnel. Agency has demonstrated substantial compliance with this element.

COMPLIANCE WITH THIS ELEMENT IS N/A

115.61 (e) The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility 's designated investigators.

Policy D-360, section XII, subsection C directs that all employees shall accept reports made verbally, in writing, anonymously and from third parties. Section XVI, subsection C directs that all allegations of in-custody sexual abuse be referred to the FCSO Persons Crimes Unit for investigation. Interviews with the PREA Coordinator, investigative staff and random commissioned staff confirmed that training has been conducted on this policy and that all allegations of this type are forwarded to investigators. Auditor experienced compliance with this standard when information obtained from an inmate reporting sexual abuse directly to Auditor, was passed on to FCSO staff.

AGENCY MEETS THIS ELEMENT

Recommendation: Agency must research the mandatory reporting laws for the state of California as it relates to staff, contract employees and volunteers and applicable mandatory

reporting standards must be published in policy.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff 4. Auditor personal experience 5. Review of training material 6. File review 115.62 (a) When an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate. Policy D-360, section XIV, subsection A 1 directs that upon learning of an allegation that an inmate was sexually abused, the employee shall immediately separate the alleged victim and abuser. Interviews with random commissioned staff, classification staff and review of investigative files confirmed that when an allegation is made, the inmate is separated from the potential threat. Auditor made staff aware of possible abuse reported during random inmate interviews of two inmates. In both cases, auditor observed staff immediately separating the inmate from potential threats and providing medical or mental health services. Auditor also reviewed training documentation which directed staff to take immediate action to protect the inmate. AGENCY MEETS THIS ELEMENT

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff 4. Facility tour 5. Testing of technology used to report 115.63 (a) Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. Agency policy D-360, section VIII, subsection D, pages 12-13, requires notification be made to the agency where the alleged abuse occurred. Agency head has designated the PREA Coordinator as their designee to make this notification to ensure timely notification as required by element 115.63 (b) . If the PREA Coordinator is unavailable, this responsibility falls to the Services Lieutenant and Watch Commander respectively. Prior to the on-site audit, Auditor received a letter from an inmate at the Fresno County Sheriff's Office who alleged abuse at another facility. Upon interviewing this inmate, it was determined that the allegation had been previously made to the Fresno County Sheriff's Office who had followed the policy as written. Interview of the PREA Coordinator confirmed that Agency is aware of this inmate, his allegations from the previous institution and the actions taken by the FCSO. Agency reports having made contact with the agency where the offense occurred and all followup actions taken by the FCSO, reflect compliance with this element. AGENCY MEETS THIS ELEMENT 115.63 (b) Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. Policy D-360, section VIII, subsection D, specifically requires notification to the facility where the alleged abuse occurred within 72 hours. Interviews with staff and a specified inmate confirms that this policy is being followed. AGENCY MEETS THIS ELEMENT 115.63 (c) The agency shall document that it has provided such notification. Policy D-360, section XII, subsection D 2, page 17 directs the PREA Coordinator to ensure that documentation is made indicating that such notification was provided. Interviews with staff and file reviews indicate that this policy is being followed. Agency reported that the FCSO has made three such notifications in the previous 12 month period. AGENCY MEETS THIS ELEMENT

115.63 (d) The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.

Agency does not house inmates in other facilities and does not require other facilities to comply with PREA standards. Agency ensures that all allegations received from other facilities are investigated in accordance with the PREA standards.

AGENCY MEETS THIS ELEMENT

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, volunteer staff 115.64 (a) 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: (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) 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 (4) 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. A review of agency policy D-360, section XIV, subsections A-E mirror this element of the standard. Review of staff training topics and PowerPoint presentation on the required response to an allegation of sexual abuse confirmed that staff are trained on these procedures. Interviews with staff confirmed that this is the practice at the facility. When commissioned staff were asked by auditor what specific actions were to be taken upon the allegation of sexual abuse, all staff interviewed except one, were able to describe the steps almost as written. The one commissioned staff member who could not answer the question, was a very new officer and once given slight direction, was able to give a fairly thorough answer. Interview with investigative staff confirmed that detention personnel are trained on steps to take to preserve evidence and that the steps are completed consistently and competently. Review of cases taken by commissioned staff confirmed that this element is being followed. AGENCY MEETS THIS ELEMENT 115.64 (b) 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. A review of agency policy D-360, section XIV, subsection E and the non-security staff training topics shows that non-security staff are informed of this requirement. Interviews with non-security staff confirmed that this is the practice at this facility. While not fully aware of the types of evidence that could potentially be destroyed, the volunteers interviewed confirmed that they had been trained to keep a victim inmate from destroying evidence and to immediately report the allegation to commissioned staff. There were no examples of non-security staff as first responders to an incident of sexual abuse in the previous twelve month period for auditor to

	review. Auditor reviewed the Policy Acknowledgement #D-360 given to all volunteers and contractors which specifically addresses the preservation of evidence and the immediate notification to commissioned staff (Document # D-360E1). AGENCY MEETS THIS ELEMENT
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, volunteer staff 115.65 (a) The facility shall develop 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. Agency policy D-360, section XVI, pages 19-22, outlines a coordinated response to an incident of sexual abuse. This policy coordinates the actions of staff first responders, medical and mental health practitioners, investigators and facility leadership. Auditor reviewed this policy in its entirety confirming compliance and as far as commissioned staff as first responders, file reviews confirmed compliance. AGENCY MEETS THIS ELEMENT

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion
	Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, Undersheriff 115.66 (a) Neither the agency 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. Although the PAQ shows that this standard need not be audited, interview with the agency Undersheriff contradicts this assertion. The FCSO has in fact entered into an MOU agreement since August 20, 2012. Auditor was provided an MOU agreement dated July 20, 2015. Based on the MOU agreement provided, the Fresno County Sheriff has the right to place an employee on administrative leave or to reassign an employee pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. Review of the MOU between SEIU-Local 521, Unit 2 and the County of Fresno as well as interviews with the agency Undersheriff and PREA Coordinator confirmed that the agency is not limited in its ability to remove or reassign staff. AGENCY MEETS THIS ELEMENT 115.66 (b) Nothing in this standard shall restrict the entering into or renewal of agreements that govern: (1) The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of §§ 115.72 and 115.76; or (2) Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member 's personnel file following a determination that the allegation of sexual abuse is not substantiated. COMPLIANCE WITH THIS ELEMENT IS N/A

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, Division head 115.67 (a) The agency shall establish a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff, and shall designate which staff members or departments are charged with monitoring retaliation. Agency policy D-360, section XX, subsection A, page 24 strictly prohibits retaliation against employees or inmates who report or who cooperate with a sexual abuse investigation. This policy designates the PREA Coordinator and PREA Compliance Managers (Line Sergeants) as those charged with monitoring retaliation. There were no examples of inmate or staff retaliation to review in the past 12 month period. Agency's pending changes in designation of PREA Coordinator, PREA Compliance Manager will somewhat change how PREA compliance is monitored and ensured. Line Sergeant will still be required to monitor staff and inmates for retaliation, the PREA Compliance Manager will be responsible for ensuring compliance with this element. AGENCY MEETS THIS ELEMENT 115.67 (b) The agency shall employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. The Division Head outlined in his interview, the multiple measures used by Agency to protect inmates and staff who fear retaliation. These measures included re-assignment of staff or housing changes for inmates, status checks and monitoring. Interviews with staff and inmates confirmed that they know what steps can be taken. Agency policy D-360, section XX, subsections A-C, pages 24-25 specifically address retaliation against any employee or inmate. Subsection C specifically addresses monitoring for retaliation for a minimum of 90 days and longer if warranted. This subsection outlines items that should be monitored or changed to circumvent retaliation which includes inmate disciplinary reports, housing or program changes, negative performance reviews for staff or reassignment of staff. Based on personal experience watching FCSO taking steps based on information provided by the Auditor, interviews with staff and inmates as well as review of training material, policy and case review, auditor determined FCSO staff routinely separate alleged abusers from alleged victims pending the outcome of investigations, remove inmates from potentially harmful situations pending a classification review of the inmates likelihood of being victimized and provide medical and mental health services.

AGENCY MEETS THIS ELEMENT

115.67 (c) For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

Agency policy D-360, section XX, subsections A-C, pages 24-25 specifically address retaliation against any employee or inmate. Subsection C specifically addresses monitoring for retaliation for a minimum of 90 days and longer if warranted. This subsection outlines items that should be monitored or changed to circumvent retaliation which includes inmate disciplinary reports, housing or program changes, negative performance reviews for staff or reassignment of staff. There were no incidents of this type in the past 12 month period for auditor to review.

AGENCY MEETS THIS ELEMENT

115.67 (d) In the case of inmates, such monitoring shall also include periodic status checks.

Policy D-360, section XX, subsections A-C, pages 24-25, address retaliation. Subsection C and C 2 specifically address monitoring for a minimum of 90 days and continuation of monitoring after 90 days if there is a continuing need with no limit to the duration other than to say in subsection C 3 that the obligation to monitor shall terminate if the allegation is determined to be unfounded. There were no incidents of this type within the previous 12 months for auditor to review. Agency policy D-360, section IX, subsection A, page 13 directs that the population management office of the FCSO reassess each inmates risk of victimization or abusiveness based upon any additional, relevant information received since the Intake screening. Auditor confirmed through document review of inmate reassessments, that periodic checks are being completed.

AGENCY MEETS THIS ELEMENT

115.67 (e) If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.

There is no specific language in agency policy D-360, section XX, subsections A-C, pages 24-25, that addresses "any other individual" who expresses a fear of retaliation.

AGENCY DOES NOT MEET THIS ELEMENT

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The Auditor was provided supplemental documentation on June 20, 2017 to evidence and

demonstrate corrective actions taken by the FCSO administration regarding this standard. This documentation is discussed below.

ADDITIONAL DOCUMENTATION REVIEWED:

1. The FCSO Sexual Misconduct and Abuse policy #D-360 (Modified version approved June 20, 2017 by Sheriff)

The FCSO has revised their Policy #D-360 to include protection of all involved including the catch all of "any other individual". The policy also specifies to whom a person may report to and then directs that prompt action is to be taken to protect the individual.

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

Recommendation: Revise policy language to include "any other individual" and outline in policy, what actions will be taken to protect that person. Revision of policy language must be provided to auditor to confirm compliance.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, Division head 115.68 (a) Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of § 115.43. Agency may use segregated housing to protect an inmate who is alleged to have suffered sexual abuse. The use of segregated housing for this purpose is subjected fully to the requirements of standard 115.43. AGENCY MEETS THIS ELEMENT Elements of standard 115.43 are as follows: 115.43 (a) Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment. 115.43 (b) Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) The reasons for such limitations. 115.43 (c) The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. 115.43 (d) If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document: (1) The basis for the facility 's concern for the inmate 's safety; and (2) The reason why no alternative means of separation can be arranged. 115.43 (e) Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, investigative staff 4. File reviews 115.71 (a) When the agency 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. Agency policy D-360 meets this requirement. Agency has a public policy on their agency website stating third-party and anonymous reports are welcomed. Interviews with staff, both line staff and investigatory staff and files reviewed, confirmed that cases are handled promptly, thoroughly and objectively per policy and in compliance with PREA standard 115.71(a). Evidence of prompt action taken by agency was when auditor referred an inmate to staff following an interview. Commissioned staff were notified immediately following the interview. Staff took immediate steps to protect the inmate from victimization and pursued an investigation into the issues the inmate was having. Mental health responded to the unit to speak to the inmate as well. The actions of staff occurred within approximately 10 minutes of the initial notification. Auditor also received written correspondence from an inmate at the Fresno County Sheriff's Office, alleging sexual abuse at another facility. The inmate confirmed during an interview, that the FCSO acted promptly upon his allegations regarding the other agency. AGENCY MEETS THIS ELEMENT 115.71 (b) Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to § 115.34. Agency conducts its own sexual abuse investigations and therefore received training on PREA: Investigating Sexual Abuse in a Confinement Setting. Additionally, interviews with investigative staff and PREA Coordinator confirmed that investigators received the training. The NIC training, sponsored by the DOJ and attended by FCSO investigators, is a comprehensive training which includes techniques for interviewing, Miranda/Garrity warnings, evidence collection and the criteria and evidence required to substantiate a case. Investigative staff attended this training and agency maintains and produced training certificates for all investigators from the NIC, DOJ sponsored training on Investigating Sexual Abuse in a Confinement Setting which confirmed compliance. AGENCY MEETS THIS ELEMENT 115.71 (c) 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.

Agency policy D-360, section XVI, subsection D, pages 19-20, outlines the responsibilities of investigators. All aspects of this element are listed as responsibilities. Interviews confirm that staff understand their responsibilities and this protocol and review of case files confirmed that this protocol is being followed.

AGENCY MEETS THIS ELEMENT

115.71 (d) 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.

Policy D-360, Section XIV, subsection D, directs that staff do not attempt to interrogate the alleged suspect, unless circumstances make it unavoidable. While this subsection is vague in nature regarding what circumstances would make a compelled interview appropriate, it is the practice of the Fresno County Sheriff's Office to conduct their own investigations, independent of the District Attorney's Office. Investigators conduct a timely, thorough investigation which may include compelled interviews, without consulting the prosecutor unless deemed necessary by the investigator. However, investigators may consult with the prosecution prior to a compelled interview, if it is determine that conducting the interview may be an obstacle to another criminal prosecution, separate from the sexual abuse or harassment currently being investigated. Agency is in substantial compliance with this element.

AGENCY MEETS THIS ELEMENT

115.71 (e) 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.

Agency policy D-360, section XIII, subsection A, includes this requirement in its entirety. Interviews with PREA Coordinator and investigative staff and file reviews confirmed that credibility is assessed on an individual basis. No polygraph or other truth-telling device is used as a condition for proceeding with an investigation of sexual abuse or sexual harassment on any case investigated by the FCSO.

AGENCY MEETS THIS ELEMENT

115.71 (f) Administrative investigations: (1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and (2) 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.

Investigative training and practice includes this requirement. Interviews with investigative staff and PREA Coordinator and file reviews confirmed that administrative investigations include

both of the items listed in this element. Administrative investigations are conducted in much the same way as criminal investigations. All investigations included descriptions of physical and testimonial evidence, reasoning behind assessments of credibility and gave investigative facts and findings.

AGENCY MEETS THIS ELEMENT

115.71 (g) 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.

All investigative interviews are audio and video taped and transcribed. A summary report is written including all testimony in all mediums and gives investigative facts and finding. Agency policy D-360, section XV includes this requirement. Interviews with PREA Coordinator, investigators and file reviews confirmed that agency is following this element.

AGENCY MEETS THIS ELEMENT

115.71 (h) Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

Agency policy D-360, section XVIII, subsection C has this requirement. Interviews with investigators shows that this is their practice and three cases being referred for prosecution confirmed that criminal cases are referred as directed in this element of the standard. Another eight cases since August 20, 2012 appeared to be criminal, were referred but prosecution was not taken forward by the District Attorney.

AGENCY MEETS THIS ELEMENT

115.71 (i) The agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

The audit cycle has not yet gone far enough to unequivocally say that records are kept for five years beyond the exit date. Due to the absence of any evidence that this is not happening, the agency meets this element. Cases are kept in the Records Management System utilized by the FCSO and reports in this system are kept indefinitely.

AGENCY MEETS THIS ELEMENT

115.71 (j) The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.

Agency policy D-360, section XVIII, subsection D, contains this policy in its entirety. Interviews with investigative staff confirmed that they know the policy and that it is handled in compliance with the standard. Interviews with PREA Coordinator, investigators and file reviews confirmed that all investigations reviewed were thoroughly investigated and taken to a logical conclusion regardless of the status of the victim or abuser.

AGENCY MEETS THIS ELEMENT

115.71 (k) Any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements.

Pursuant to the guidelines provided by the DOJ, the agency is not held accountable for other investigation components.

COMPLIANCE WITH THIS ELEMENT IS N/A

115.71 (l) 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.

Agency policy D-360, section VIII, subsection D-E address the requirement of agency staff to work with other agency in investigating allegations of sexual abuse and harassment. An interview with an inmate who corresponded with Auditor prior to the on-site audit, confirmed that after allegations were made by the inmate of abuse which had occurred at another facility, agency notified the other agency as outlined in policy and agency staff facilitated other investigators needing to interview the victim. Agency investigates its own cases so compliance with this element has solely to do with cases being investigated by outside investigators investigating allegation which occurred at other facilities.

AGENCY MEETS THIS ELEMENT

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, investigative staff 4. File reviews 115.72 (a) 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. Agency policy D-360, section IV, subsection A 2 (f) (i) establishes the preponderance of the evidence as the standard of evidence in administrative investigations. Interviews with investigative staff, PREA Coordinator and file review confirmed that this is the standard of evidence used to make a finding of "substantiated". AGENCY MEETS THIS ELEMENT

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, investigative staff 4. File reviews 115.73 (a) Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. Agency policy D-360, section XXI, subsection A, page 25, requires inmates to be informed of investigation outcomes. Agency conducted 18 such notifications in the past 12 months. Interviews with PREA Coordinator, investigators and file review, confirmed that notifications on all files reviewed were made in accordance with this element. AGENCY MEETS THIS ELEMENT 115.73 (b) If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate. Agency conducts its own investigations. COMPLIANCE WITH THIS ELEMENT IS N/A 115.73 (c) Following an inmate 's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever: (1) The staff member is no longer posted within the inmate 's unit; (2) The staff member is no longer employed at the facility; (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. Agency policy D-360, section XXI, subsection A-B, page 25 requires inmates to be informed of investigation outcomes and that certain actions be taken. There were no cases where staff had been alleged to have committed sexual abuse against an inmate during the past 12 months, so there is no supporting documentation for this element. Based on the available documentation and in the absence of any evidence that the agency is not complying with the element, the agency is determined to be in substantial compliance with this element. AGENCY MEETS THIS ELEMENT 115.73 (d) Following an inmate 's allegation that he or she has been sexually abused by

another inmate, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

Agency policy D-360, section XXI, subsection C, pages 25, 26 requires inmates to be informed of investigation outcomes. Agency made 18 such notifications. Evidence of notification is placed in the investigative file. Interviews with PREA Coordinator, investigative staff and file reviews confirmed that agency is meeting this element.

AGENCY MEETS THIS ELEMENT

115.73 (e) All such notifications or attempted notifications shall be documented.

Agency policy D-360, section XXI, subsection D, page 26 directs that all notification be documented. All notifications were documents and placed in the investigative file. File reviews confirmed that notification were placed in the files reviewed.

AGENCY MEETS THIS ELEMENT

115.73 (f) An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.

No finding is required for this element.

COMPLIANCE WITH THIS ELEMENT IS N/A

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, investigative staff 4. File reviews 115.76 (a) Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Agency policy D-360, section XXIII, subsection D, page 27 states this requirement. However, there were no employees having had any of the adverse actions stated in the policy taken against them. Therefore, there is no supporting documentation for this element. Based on the available documentation and in the absence of any evidence that the facility is not following this policy, the facility is determined to have met this element. Interviews with the FCSO Undersheriff, Division Head and PREA Coordinator, confirmed that agency will follow this policy and therefore be in compliance with this element when confronted with this type of violation by staff. AGENCY MEETS THIS ELEMENT 115.76 (b) Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. Agency policy D-360, section XXIII, subsection B, page 26 states this requirement. However, there were no employees having had any of the adverse actions stated in the policy taken against them for sexual abuse in the previous 12 month period. Therefore, there is no supporting documentation for this element. Based on the available documentation and in the absence of any evidence that the facility is not following this policy, the facility is determined to have met this element. AGENCY MEETS THIS ELEMENT 115.76 (c) 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. Agency policy D-360, section XXIII, subsection C, page 26 states this requirement. However, there were no employees having had any of the adverse actions stated in the policy taken against them relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse). Therefore, there is no supporting documentation for this element. Based on

the available documentation and in the absence of any evidence that the facility is not following this policy, the facility is determined to have met this element.

AGENCY MEETS THIS ELEMENT

115.76 (d) 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.

Agency policy D-360, section XXIII, subsection D states this requirement. However, there were no employees having had any of the adverse actions stated in the policy taken against them for violations of agency's sexual abuse or sexual harassment policies in the previous 12 month period. Therefore, there is no supporting documentation for this element. Based on the available documentation and in the absence of any evidence that the facility is not following this policy, the facility is determined to have met this element.

AGENCY MEETS THIS ELEMENT

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, investigative staff 4. File reviews 115.77 (a) Any contractor or volunteer who engages in sexual abuse is 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. Agency policy D-360, section XXIV, subsection A, page 27 states this requirement. However, as no contractors or volunteers have received a finding of substantiated for violations of policies against sexual abuse and harassment in the past 12 months, there is no supporting documentation for this element showing that this reporting has taken place. Based on the available policy documentation and in the absence of any evidence that the facility is not following this policy, the agency is determined to have met the intent of this element. AGENCY MEETS THIS ELEMENT 115.77 (b) The facility takes appropriate remedial measures, and considers 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. Agency policy D-360, section XXIV, subsection B, page 27 states this requirement. However, as no contractors or volunteers have received a finding of substantiated for violations of policies against sexual abuse and harassment in the past 12 months, there is no supporting documentation for this element showing that remedial measures have not taken place. Based on the available policy documentation and in the absence of any evidence that the facility is not following this policy, the agency is determined to have met the intent of this element. AGENCY MEETS THIS ELEMENT

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, investigative staff 4. File reviews 115.78 (a) Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Agency policy D-360, section XXII states this requirement. Agency policy E-230 is the formal inmate disciplinary policy. The FCSO has conducted 15 administrative investigations within the previous 12 month period for inmate-on-inmate sexual abuse. No criminal findings of guilt were found in the previous 12 months. Interviews with investigative staff, PREA Coordinator and file reviews confirmed that disciplinary sanctions were given where deemed appropriate. Any and all sexual abuse or sexual harassment is prohibited within the facility and therefore all inmates are subject to disciplinary sanctions when deemed appropriate through investigation. AGENCY MEETS THIS ELEMENT 115.78 (b) Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. Agency policy E-230 outlines this element in its entirety. Interviews with staff and inmates confirmed this policy is in place and in practice. The FCSO utilizes a scale for discipline regarding disciplinary days, outlined in policy E-230, pages 21-22, which all inmates are subject to. The number of offenses within a set time frame dictates the number of disciplinary days an inmate can receive. Regarding frequency of offenses, all inmates are subject to same or similar disciplinary days. However, each case is considered based on its own circumstances which includes nature and circumstances of the abuse committed, the inmate 's disciplinary history, and sanctions imposed for comparable offenses by other inmates with similar histories. Interviews with investigative staff, PREA Coordinator, inmates and file reviews, confirmed that all disciplinary sanctions are handled pursuant to this policy. AGENCY MEETS THIS ELEMENT 115.78 (c) The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Agency policy D-360, section XXII, subsection B, page 26 has an explicit statement that an

inmate's mental disabilities or mental illness be considered when determining the type of sanction to be imposed. Interviews with investigative staff, PREA Coordinator and file reviews confirmed that mental health status is determined early in the investigation and considered when determining whether sanctions should be imposed or what type of sanctions should be imposed.

AGENCY MEETS THIS ELEMENT

115.78 (d) If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

The Fresno County Sheriff's Office does not routinely offer these services, however, both victim and offenders are offered mental health counseling and crisis intervention services as needed. Mental health services are provided by the contracted medical provider at the FCSO and are made available to both victim and suspect in a sexual abuse or sexual harassment case within the facility, confirmed through case review. Discharge planners assist inmates leaving custody who may need these services. Interviews with mental health staff and PREA Coordinator confirmed that these services are not provided by the facility. Interviews with medical and mental health staff confirmed that discharge planning is done for inmates as needed, which may include therapy, counseling or other services.

AGENCY MEETS THIS ELEMENT

115.78 (e) The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

Agency policy D-360, section XXII, subsection C, page 26 has an explicit statement on the discipline of inmates only for non-consensual contact with staff. There were no examples of this conduct within the previous 12 month period and therefore confirming documentation was not available to review. Based on the available policy documentation and in the absence of any evidence that the facility is not following this policy, the agency is determined to have met the intent of this element.

AGENCY MEETS THIS ELEMENT

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

Agency policy D-360, section XXII, subsection D, page 26 has an explicit statement on the reporting of sexual abuse made in good faith and how it shall not constitute false reporting if an investigation does not establish evidence sufficient to substantiate the allegation. Interviews with PREA Coordinator, investigative staff and inmates, confirmed that no inmates were being held under disciplinary action for making a report of sexual abuse in good faith. Document review of random investigations confirmed that no disciplinary actions were taken based on a

report of sexual abuse which could not be substantiated.

AGENCY MEETS THIS ELEMENT

115.78 (g) An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.

Agency policy D-360, section XXII, subsection E has an explicit statement regarding the prohibition of sexual activity of any type between inmates. It also states that such activity without coercion, shall not be deemed to constitute sexual abuse. Interviews with investigative staff, PREA Coordinator and inmates confirmed that no inmates were being held or charged for sexual activity with another inmate which was deemed not to have been coerced.

AGENCY MEETS THIS ELEMENT

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, medical staff 4. File reviews 115.81 (a) If the screening pursuant to § 115.41 indicates that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. Agency policy D-360, section VIII, subsection F, page 13 states this requirement. Auditor was granted access to medical logs documenting follow-up meetings which confirmed compliance. Interviews with classification staff confirmed that inmates desiring follow up meetings with a mental health practitioner occurs while the inmate is still in the booking process, which at the FCSO is routinely not longer than 12 hours. AGENCY EXCEEDS THIS ELEMENT 115.81 (b) If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening. The Fresno County Sheriff's Office is not a prison and therefore, this section is non-applicable to jails. COMPLIANCE WITH THIS ELEMENT IS N/A 115.81 (c) If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? As previously discussed in 115.81 (a), agency policy D-360, section VIII, subsection F, page 13 states this requirement. Auditor was granted access to medical logs documenting follow-up meetings which confirmed compliance. Interviews with classification staff confirmed that inmates desiring follow up meetings with a mental health practitioner occurs while the inmate is still in the booking process, which at the FCSO is routinely not longer than 12 hours.

AGENCY EXCEEDS THIS ELEMENT

115.81 (d) Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.

Agency policy D-360, section XV, subsection A, pages 18-19 indicates when, for what purposes and to whom, information related to sexual victimization or abusiveness can be released. This policy specifically allows the dissemination of this information to staff who have a need to know. All medical information is kept confidential and stored within the inmates Electronic Medical Record (EMR), administered by the contracted medical provider. All other information related to sexual victimization or abusiveness is kept by the FCSO within administrative and password protected electronic files. Release of this information is strictly limited to a "need to know" basis. Interviews with medical staff, PREA Coordinator and random commissioned staff confirmed that the information referred to in this element are kept confidential. When random commissioned staff were asked about their ability to access such information, auditor was told by staff that their access is severely limited. Auditor was granted access to the EMR and information related to sexual victimization or abusiveness. Auditor confirmed that the EMR is accessible to medical staff and others on a need to know basis only. The information related to sexual victimization or abusiveness, kept by the FCSO, was confirmed by Auditor to be protected by access rights and password and accessible on a need to know basis only.

AGENCY MEETS THIS ELEMENT

115.81 (e) Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.

The Fresno County Sheriff's Office does not house inmates under the age of 18 and therefore, that section of 115.81 (e) does not apply. Interviews with medical and mental health staff confirmed that they do not obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. California, Cal Pen Code § 11160 (Injuries that are the result of assaultive or abusive conduct) requires the reporting of injuries caused by criminal conduct. If however, the conduct was found not to be the result of criminal conduct and occurred outside of the institutional setting, an informed consent would be obtained. There were no incidents in the previous 12 month period which would have required obtaining informed consent.

AGENCY MEETS THIS ELEMENT

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, medical staff 4. File reviews 115.82 (a) 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. Agency policy D-360, section XIV, subsection A 3, pages 17-18 specifically addresses this element. The nature and scope of medical care is determined solely by trained medical and mental health care professionals, contracted with the FCSO. Any medical care provided is done while keeping in mind, the need to preserve evidence. Agency policy D-360, section XIV, subsection B, page 17, specifically directs the preservation of evidence where possible. Interviews with medical, mental health and correctional staff, review of medical documentation and case review, confirmed that agency is in compliance with this policy. AGENCY MEETS THIS ELEMENT 115.82 (b) If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners. The Fresno County Sheriff's Office operates using contracted medical and mental health providers who are on duty at all times. There is not a time when qualified medical or mental health practitioners are not on duty. Agency policy D-360, section XIV, subsection A, page 17 specifically directs first responders to take steps to protect the victim by separating victim from abuser. A review of staffing documents for medical providers and auditors visual confirmation that there were medical staff on duty, confirmed compliance with this element. AGENCY MEETS THIS ELEMENT 115.82 (c) Inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Agency policy D-360, section XVI, subsections I 3 through L, pages 21-22, discusses in detail, the offering of timely information, emergency contraception and sexually transmitted infection prophylaxis. Interviews with medical and mental health staff as well as custody staff confirmed

compliance with this policy. There were no incidents of this type within the previous 12 month period for auditor to review.

AGENCY MEETS THIS ELEMENT

115.82 (d) 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.

Interviews with medical and mental health staff and supervisors confirmed that agency policy D-360, section XVI, subsection I 2 which addresses 115.82 (d) directly, is consistently complied with. Interviews with inmates and PREA Coordinator also confirmed that they are aware that treatment services are provided without cost.

AGENCY MEETS THIS ELEMENT

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, medical staff 4. File reviews 115.83 (a) The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. Agency policy D-360 has this requirement and inmates indicated in their interviews that they were aware that receiving ongoing medical and mental health evaluations was available. Interviews with medical staff, PREA Coordinator and document review confirmed that medical and mental health evaluation and treatment are provided to all inmates when needed. Auditor provided names of three inmates needing mental health evaluation, to medical staff, following their interviews. All three inmates were provided prompt mental health evaluation within minutes of the request being made. AGENCY MEETS THIS ELEMENT 115.83 (b) The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. Agency policy D-360, section XVI, subsection L, pages 21-22 outlines this requirement. Interviews with medical/mental health staff and inmates confirmed that the policy is known and agency is in compliance. Medical document review confirmed that follow-up services, treatment plans and referrals for continued care are all coordinated by designated medical staff. AGENCY MEETS THIS ELEMENT 115.83 (c) The facility shall provide such victims with medical and mental health services consistent with the community level of care. Agency policy D-360, section I, subsection B (Mislabelled in policy as A), page 2 requires that medical and mental health care for inmates be in a manner consistent with the level of care in the community. Interviews with medical and mental health staff, review of services provided by the contracted medical provider as well as auditors extensive experience in the a detention setting, confirmed that medical and mental health services provided is consistent with the level of care in the community for the services provided. Inmates requiring services not provided by the contracted medical and mental health provider are transported to medical providers within

the community.

AGENCY MEETS THIS ELEMENT

115.83 (d) Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.

Agency policy D-360, section XVI, subsection K, page 21, specifically addresses this element. Interviews with medical and custody staff as well as SANE/SAFE staff confirmed that pregnancy tests are administered when appropriate. There were no examples of vaginal penetration within the previous 12 month period for auditor to review. Due to lack of documentation to review, agency meets this element.

AGENCY MEETS THIS ELEMENT

115.83 (e) If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

Agency policy D-360, section XVI, subsection K, addresses this element. interviews with SANE/SAFE staff, inmates and custody staff confirmed compliance. There were no examples of the need to provide timely and comprehensive information about and timely access to all lawful pregnancy-related medical services for in-custody events within the previous 12 month period for auditor to review. Due to lack of documentation for audit review, agency meets this element.

AGENCY MEETS THIS ELEMENT

115.83 (f) Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

Agency policy D-360, section XVI, subsection K addresses this element. Interviews with medical and SAFE/SANE staff confirmed that tests for sexually transmitted infections would be offered as medically appropriate. There were no examples of the need to provide this testing within the previous 12 month period for auditor to review. Due to lack of documentation to review, agency meets this element.

AGENCY MEETS THIS ELEMENT

115.83 (g) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

As discussed in standard 115.82 (d) 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.

Agency policy D-360, section XVI, subsection I 2 which addresses 115.82 (d) directly.

Interviews with medical and mental health staff, medical supervisors, PREA Coordinator and inmates, confirmed that treatment services are provided without cost. Document review confirmed that inmates are not being charged for treatment arising from PREA related incidents which occur while incarcerated.

AGENCY MEETS THIS ELEMENT

115.83 (h) All prisons attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

Agency is not a prison. This element is non-applicable.

COMPLIANCE WITH THIS ELEMENT IS N/A

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. Interviews with PREA Coordinator, random inmates, random staff, medical staff 4. File reviews 115.86 (a) The facility 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. Agency policy D-360, section XXV, subsection A outlines this element. Agency has conducted two sexual abuse investigations within the previous 12 month period. Interviews with the PREA Coordinator as well as the Division Head, confirmed that incident reviews would have been conducted, however, both investigations were determined to be unfounded. Due to the lack of documentation to be audited, agency has met the intent of this element. AGENCY MEETS THIS ELEMENT 115.86 (b) Such review shall ordinarily occur within 30 days of the conclusion of the investigation. Agency policy D-360, section XXV, subsection B address this element. No incident reviews had been conducted at the time of the audit as the two reports within the previous 12 months were both determined to be unfounded. Due to the lack of evidence, the agency has met the intent of this element. AGENCY MEETS THIS ELEMENT 115.86 (c) The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. Agency policy D-360, section XXV, subsection A, page 27 outlines who shall conduct a sexual abuse incident review and when the review is to be done. The policy does not however, designate which staff positions should be consulted for input. AGENCY DOES NOT MEET THIS ELEMENT VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT: The Auditor was provided supplemental documentation on June 20, 2017 to evidence and demonstrate corrective actions taken by the FCSO administration regarding this standard. This documentation is discussed below.

ADDITIONAL DOCUMENTATION REVIEWED:

1. The FCSO Sexual Misconduct and Abuse policy #D-360 (Modified version approved June 20, 2017 by Sheriff)

The FCSO has revised their Policy #D-360 to include line supervisors, investigators and medical/mental health practitioners as part of the Incident Review Team outlined in Standard 115.86 (c). The inclusion of these entities on the Incident Review Team provides a comprehensive overview of all incidents of sexual misconduct and abuse. The changes in this policy brings the FCSO into compliance with this element of the standard.

REVISED CONCLUSION: AGENCY MEETS THIS ELEMENT

115.86 (d) The review team shall: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) 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; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.

Agency policy D-360, section XXV, subsection C 1-6, pages 27-28 addresses this element specifically. Agency had not had an opportunity to comply with this policy at the time of the audit. Due to the lack of evidence, agency has met the intent of this element.

AGENCY MEETS THIS ELEMENT

115.86 (e) The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.

Agency policy D-360, section XXV, subsection D, addresses this element specifically. There were no incidents reviewed within the previous 12 month period. Due to lack of evidence for auditor to review, agency is determined to have met this element.

AGENCY MEETS THIS ELEMENT

Recommendations: Agency policy D-360, section XXV, subsection A, page 27 should be updated to include those positions that should be consulted for input in the incident review. Specifically, medical and mental health practitioners, line supervisors and detectives should be added to the policy. Agency must provide auditor updated policy with the changes required to meet this standard.

115.87	Data collection
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.88	Data review for corrective action
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard Auditor Discussion Evidence reviewed (documents, interviews, site review) 1. PAQ (Pre audit questionnaire) 2. Policy review 3. File review 115.401 (h) The auditor shall have access to, and shall observe, all areas of the audited facilities. Auditor had full access to all areas of the audited facilities and extensively toured all areas in a tour which exceeded 10 hours. AGENCY MEETS THIS ELEMENT 115.401 (i) The auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information). Auditor was allowed to request and received all requested documents including those documents which were electronically stored. Some documentation was received in hard copy form pre-audit, on-site and post-audit. Some documentation was uploaded into the Online Assessment System and some documentation was reviewed while on site. AGENCY MEETS THIS ELEMENT 115.401 (m) The auditor shall be permitted to conduct private interviews with inmates. Auditor was permitted to conduct and did conduct numerous private interviews with inmates in all three buildings. Interviews were conducted within individual interview rooms where available, in a gym area for one interview and in programming areas. All interviews were conducted in private without the presence of other inmates or correctional staff. AGENCY MEETS THIS ELEMENT 115.401 (n) Inmates shall be permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. The Fresno County Sheriff's Office was provided a mailing address to Auditor for inmates to correspond confidentially with Auditor. This information was posted more than six weeks prior to the on-site audit. Auditor received several correspondence from inmates housed at the facility prior to the on-site audit and one post-audit. Auditor confirmed the correspondence information was available by viewing posted signs throughout the facility, in all inmate areas. Posted notices stated the correspondence would be confidential and treated as if the inmate were communicating with legal counsel.

	AGENCY MEETS THIS ELEMENT
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115.403	Audit contents and findings
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

Appendix: Provision Findings

115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes

115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	na
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	na

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

115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".)	na

115.13 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video	yes

	monitoring, to protect inmates against sexual abuse?	
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring?	yes

	Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring ?	yes

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

115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

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

115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20,2017.)	yes

115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates?	yes

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes

115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all	yes

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

115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes

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

115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency: perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes

115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes

115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

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

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

115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes

115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

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

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes

115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes

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

115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.)	na

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

115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na

115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes

115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes

115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes

115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes

115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes

115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes

115.33 (c)	Inmate education	
	Have all inmates received such education?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	no

115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes

115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators 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 115.21(a).)	yes

115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment?	yes

115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.)	na

115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere?	yes

115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31?	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32?	yes

115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes

115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes

115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	no
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	no
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	no
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	no

115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes

115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a: Referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: Request?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes

115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes

115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes

115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes

115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes

115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes

115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes

115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes

115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes

115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations?	yes

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes

115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes

115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

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

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security?	yes

115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes

115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes

115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no

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

115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes

115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes

115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes

115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	no

115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes

115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes

115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	no
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes

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

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

115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes

115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

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

115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

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

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

115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

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

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

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

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes

115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes

115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes

115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes

115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes

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

115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes

115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes

115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na

115.73 (c)	Reporting to inmates	
	Following a inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following a inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes

115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes

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

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes

115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes

115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes

115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes

115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes

115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes

115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	no

115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes

115.78 (g)	Disciplinary sanctions for inmates	
	Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes

115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	na

115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes

115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	no

115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes

115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes

115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes

115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	yes

115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)	yes

115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes

115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	na

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

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

115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes

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

115.401 (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