

PREA Facility Audit Report: Final

Name of Facility: South Dakota Women's Prison

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/21/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Amy J Fairbanks	Date of Signature: 10/21/ 2023

AUDITOR INFORMATION	
Auditor name:	Fairbanks, Amy
Email:	fairbaa@comcast.net
Start Date of On-Site Audit:	06/27/2023
End Date of On-Site Audit:	06/29/2023

FACILITY INFORMATION	
Facility name:	South Dakota Women's Prison
Facility physical address:	3200 E. Hwy. 34, Pierre, South Dakota - 57501
Facility mailing address:	PO Box 5911, Sioux Falls, South Dakota - 57117

Primary Contact	
Name:	Brittney Lee Lengkeek
Email Address:	brittney.lengkeek@state.sd.us
Telephone Number:	6053239035

Warden/Jail Administrator/Sheriff/Director	
Name:	Aaron Miller
Email Address:	aaron.miller@state.sd.us
Telephone Number:	6057736826

Facility PREA Compliance Manager

Facility Health Service Administrator On-site	
Name:	Christopher Goff
Email Address:	christopher.goff@state.sd.us
Telephone Number:	6053675165

Facility Characteristics	
Designed facility capacity:	514
Current population of facility:	485
Average daily population for the past 12 months:	484
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Females
Age range of population:	18-72
Facility security levels/inmate custody levels:	Minimum, low medium, high medium, and maximum

Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	121
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	32
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	31

AGENCY INFORMATION

Name of agency:	South Dakota Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	3200 East Highway 34, c/o 500 East Capitol Avenue, Pierre, South Dakota - 57501
Mailing Address:	
Telephone number:	6057736636

Agency Chief Executive Officer Information:

Name:	Kellie Wasko
Email Address:	Kellie.wasko@state.sd.us
Telephone Number:	605-773-6636

Agency-Wide PREA Coordinator Information

Name:	Brittney Lengkeek	Email Address:	brittney.lengkeek@state.sd.us
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Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-06-27
2. End date of the onsite portion of the audit:	2023-06-29

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	JSI, Missouri Shores (provide victim advocacy and emotional support)

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	514
15. Average daily population for the past 12 months:	484
16. Number of inmate/resident/detainee housing units:	7
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	499
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	6
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	4
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	2

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>2</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>3</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>39</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>126</p>
<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>31</p>

<p>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>34</p>
<p>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>No text provided.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>29</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Selection made from roster by housing unit.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	14
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	4
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Overall observations confirmed this to be credible.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>3</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Overall observations and numerous informal conversations with staff and inmates confirmed this to be credible.</p>

<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>2</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>2</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>3</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>3</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Interviewed one inmate who confirmed placement was voluntary.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>

Specialized Staff, Volunteers, and Contractor Interviews

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

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	22
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff
- Intake staff

	<input type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Training Coordinator, Volunteer Coordinator, Program staff, staff who conduct background checks, Officer In Charge (OIC)ADA Coordinator, Disciplinary Hearing officer
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	2
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	2

<p>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Security/detention</p> <p><input type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input checked="" type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p>
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<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>No text provided.</p>
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SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

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

<p>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>No text provided.</p>
<p>Documentation Sampling</p>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>No text provided.</p>

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	12	1	11	1
Staff-on-inmate sexual abuse	2	1	1	1
Total	14	2	12	2

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	2	0	2	0
Staff-on-inmate sexual harassment	8	0	8	0
Total	10	0	10	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	8	3
Staff-on-inmate sexual abuse	0	0	2	1
Total	0	0	11	4

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	1	1
Staff-on-inmate sexual harassment	0	0	7	0
Total	0	0	8	1

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

14

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>12</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>2</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>10</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>8</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

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

Yes

No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

The audited facility or its parent agency

My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

A third-party auditing entity (e.g., accreditation body, consulting firm)

Other

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> • PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 • PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6 • PREA Institutional Risk Screens 1.4.B.16 • Prison Rape Elimination Act 1.3.D.06 9-21-2023 • Organization Charts (agency and facility) • Required PREA training chart • Interview with the Secretary of Corrections • Interview with the Warden

- Interview with the PREA Coordinator
- Interview with the PREA Compliance Manager (PCM)
- Observations during the audit
- FAQ

The following policy excerpts demonstrate the facility's commitment to the requirements of zero tolerance for sexual abuse and harassment as well as an outline for preventing, detecting, and responding to allegations of sexual harassment and abuse. As a result of corrective action relevant to other standards, the PREA policy was updated into one policy to address all PREA related requirements.

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, It is the policy of the South Dakota Department of Corrections (DOC) to have zero-tolerance regarding sexual assault/rape, sexual misconduct, and sexual harassment of offenders [PREA 115.11]. It is the policy of the DOC to provide a coordinated victim-centered response to reports of sexual assault. This includes providing medical and behavioral health counseling to victims of sexual assault/rape, sexual harassment and fully investigating and aggressively prosecuting those who are involved in such conduct. This policy will be followed in conjunction with DOC policy 1.1.C.3 Staff Reporting Abuse or Neglect and other mandatory reporting requirements of the department.

The DOC trains all employees, contract workers, and volunteers to recognize sexual assault/rape, sexual misconduct, and sexual harassment and how to take appropriate actions. The DOC provides a mechanism for pursuing disciplinary and/or criminal prosecution, when warranted, for those who engage in sexual assault/rape, sexual misconduct, and sexual harassment. The DOC will utilize the PREA offender admission screen and the PREA admission review screen to determine an offender's potential vulnerability or potential aggression to sexual abuse.

The purpose of this policy is to provide guidance to address sexual assault/rape, sexual misconduct, and sexual harassment, and procedures to identify, monitor, counsel, and track offenders who have a propensity for committing sexual assault/rape, sexual misconduct, and sexual harassment and also the offenders vulnerable to becoming a victim of sexual abuse, sexual assault/rape, or sexual harassment.

PREA Institutional Risk Screens 1.4.B.16 addresses the initial screen, PREA risk screen and Risk screen review.

Staff Supervision of Offenders 1.1.C.2 further reinforces the following: *Sexual Abuse, Harassment, Discrimination and Offensive Behavior: A. Sexual abuse or sexual harassment or harassment based on race, color, religion, national origin, gender, sex, pregnancy, genetic information, disability or other protected status or characteristic of an offender is expressly forbidden and a violation of DOC policy. 1. Any staff member who engages in sexual abuse or sexual harassment or other forms of harassment of an offender, or who has knowledge of the sexual abuse or sexual harassment or other forms of harassment inflicted upon an offender by a staff*

member, who does not report the abuse or harassment immediately to their supervisor, is subject to disciplinary action, including termination of employment. 2. Any person employed by the state or within any state prison who knowingly engages in an act of sexual penetration with an offender in detention and under the custodial, supervisory, or disciplinary authority of the person, is guilty of a class 6 felony (See SDCL § 24-1-26.1). 3. The Prison Rape Elimination Act (PREA) requires the reporting of any act of a staff member engaging in sexual misconduct with an inmate in a DOC facility (See DOC policy 1.3.E.4 Prevention of Offender Sexual Assault/Rape). 4. Staff will not engage in harassment or discriminatory or offensive behavior when interacting with offenders and shall avoid any conduct which could be viewed as harassing, discriminatory or offensive. Such behavior may be verbal, non-verbal or physical in nature. B. Staff members should always keep in mind the following: 1. Some offenders have been the victims of sexual abuse and may not know when or how to say "no" to others. 2. Even if an offender consents to a sexual relationship/activity, legal/criminal action may determine that sexual abuse has occurred as offenders are detained and under the custodial, supervisory and disciplinary authority of the DOC/staff. 3. If and when practical, it is preferred to have at least one (1) other staff member present when dealing with offenders of the opposite sex in an isolated area.

Evidence reviewed/analyzed by provision:

(a) As illustrated, the agency has a written policy which mandates a 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. Both the previous and updated policies address the requirements of the standard. The new policy is twenty-four (24) pages and addresses all aspects of the agency's obligations to meet the PREA standards. It will be referenced throughout this report.

(b) The agency organization chart specifies that the PREA Coordinator reports directly to the Inspector General who reports directly to the Secretary of Corrections. In her interview, she confirmed that she has the time and authority to address all her PREA related duties. She currently also serves as the ADA Coordinator but relates that soon she will only have PREA related duties as they agency has been reviewing all policies and practices to determine how to better improve with the goal of eliminating sexual abuse and sexual harassment. The PREA Coordinator was present during the audit and further demonstrated efforts towards improvement throughout the audit. The agency maintains a chart for required PREA training. It was updated 3/30/2023. The goal for the PREA Coordinator is to complete the following: NIC: Coordinator Roles and Responsibilities NIC: Your role responding to sexual abuse NIC: Communicating Effectively with LGBTIQ NIC: Audit Process DOC: PREA Annual training PREA Resource Center: PREA 101 PREA: Investigating sexual abuse in a confinement setting PREA: Investigating sexual abuse in a confinement setting: Advanced YouTube videos Proper Use of Miranda and Garrity Rights PowerPoint Evidence Collection in Confinement settings PowerPoint Interviews and interrogation Techniques of investigation interviewing and advanced interrogation. The interview with the Secretary of Corrections further confirmed that PREA compliance is a priority in this agency.

(c) The facility organization chart specifies the PCM reports to the Warden. She also has the duty of ADA Coordinator which further ensures that requirements for meeting the needs of those with disabilities regarding PREA are addressed. The agency maintains a chart for required PREA training. It was updated 3/30/2023. The goal for the PCM is to complete the following: NIC: PREA Investigator Course Basic & Advanced Certification. NIC: Coordinator Roles and Responsibilities NIC: Your role responding to sexual abuse. NIC: Communicating Effectively with LGBTIQ NIC: Audit Process DOC: PREA Annual training PREA Resource Center: PREA 101. During her interview, the PCM confirmed she has the time and authority to meet her obligations in this role. She reports directly to the Warden. It was evident to the auditor during the onsite audit that she has direct access to the Warden.

Summary of evidence to support findings: Policy excerpts noted above support compliance, as did the previous policies that addressed PREA requirements. Some policy recommendations/requirements are noted throughout the report in other sections. Interviews with the Secretary of Corrections, Warden, PREA Coordinator and PCM demonstrates a strong commitment to improving the program to prevent, detect and respond to sexual abuse and sexual harassment. The interviews supported that the PREA Coordinator reports to the Inspector General but does have direct access to the Secretary of Corrections and the PCM has direct access to the Warden, supporting compliance with the clarification issued with the FAQ January 2015. As the PREA Coordinator was able to get updates to policy and other relevant documents and forms, the auditor concludes she has the authority and influence necessary to effect change. The auditor finds the facility compliant with the standard/provisions.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Interview with the Agency Contract Monitor · Review of contracts/contract monitoring forms · PAQ <p>The PAQ confirms that the agency contracts for the confinement of inmates. Currently there are four contracts for the confinement of inmates that the agency entered into or renewed with private entities or other government agencies on or after August 20,</p>

2012, or since the last PREA audit.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, All contracts with public, private, government, or other entities for confinement of offenders sentenced to the DOC will include an obligation that the facility adopt and comply with all applicable PREA standards and allow the DOC to monitor to ensure the contractor is complying with PREA standards. This may include a review of the facility's most recent PREA audit report. The PREA coordinator will provide input concerning contracts with vendors who have contact with offenders.

Policy mirrors the standard requirements and additionally ensures the input of the PREA Coordinator.

Evidence reviewed/analyzed by provision:

(a)(b) The following contracts were reviewed:

- Cornerstone Rescue Mission 5/31/2022 residential services 48 male offenders agree to comply with PREA requirements: contract monitoring form 2023
- Cornerstone Women's and Children's Home July 1, 2022, to June 30, 2023, residential services 16 female adult offenders agree to comply with PREA requirements
- Cornerstone Women's Program July 1, 2022, to June 30, 2023, residential care for up to 10 females - agrees to comply with PREA, access to the state for monitoring, failure will result in termination: contract monitoring form 2023
- St. Francis House July 1, 2022, to June 30, 2023, thirty (30) adult offenders agree to comply with PREA requirements; contract monitoring form 2023
- St. Francis House July 1, 2022, to June 30, 2023, fifty-seven (57) adult offenders agree to comply with PREA requirements; contract monitoring form
- Hughes County Jail house up to forty-eight (48) SDDOC inmates November 1, 2022, to June 30, 2024, agrees to comply with the Prison Rape Elimination Act standards/contract monitoring form 2023
- North Dakota Juvenile Division house juvenile offenders June 2023 to May 2022 agrees to comply with PREA and monitoring by the State of South Dakota; contract monitoring form

The interview with the Contract Monitor confirmed that these agencies are working towards PREA compliance; they have not yet completed a PREA audit.

Summary of evidence to support findings: Policy (new and revised), review of contracts, review of the PREA Monitoring form and the interview with the contract monitor provided sufficient evidence. The auditor finds the facility compliant with the standard provisions.

115.13	Supervision and monitoring
	<p data-bbox="256 188 959 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 544 300">Auditor Discussion</p> <p data-bbox="256 340 1406 416">The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul data-bbox="256 456 1481 1877" style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · SDWP Staffing Review · Facility diagram · Review of PREA incidents · Randomly requested staffing rosters · Documentation of deviation from the staffing plan (March, April, April, February, May) · Documentation of 15-minute camera checks (complete documentation for August 2022, July 2022, June 2022, May 2022, September 2022, October 2022, January 2023, February 2023, April 2023, March 2023, November 2022, December 2022) · Documentation of unannounced rounds · Annual Staffing Review · Interview with the Warden · Interview with the PREA Coordinator · Interview with the PCM · Interview with the Secretary of Corrections · Interviews with supervisors formal and informal · Random staff interviews · Observations · PAQ <p data-bbox="256 1917 1458 2029">The PAQ indicates that the average daily population since the last PREA audit is 484. However, the staffing plan is predicated on an inmate population of 514, the facility capacity. Deviations from the staffing plan are documented.</p>

The following policy excerpt supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, Supervision and Monitoring

Whenever necessary, but no less frequently than once each year, each facility operated by the DOC, the warden in consultation with the PREA coordinator and PREA facility compliance manager, will assess, determine, and document whether adjustments are needed to the facility staffing plan (see attachment #1 - Facility Staffing Plan). The overall rate of compliance with the approved staffing plan during the past year shall be considered, in addition to the number of documented incidents of sexual abuse and deviations from the staffing that occurred at the facility during the review period.

Once the review is complete, any recommendations will be forwarded to the warden and director of prisons. If the recommendations are approved, these will be briefed to the secretary of corrections (SOC). Lieutenants or higher-level supervisors will conduct and document unannounced rounds to identify and deter sexual assault/rape, sexual abuse, sexual misconduct, and sexual harassment. Such unannounced rounds will occur during all shifts and be documented via the rounds tracking system and/or COMS shift log. DOC employees are prohibited from alerting others that these supervisory rounds are occurring unless such announcement is related to the legitimate operational functions of the facility.

Evidence reviewed/analyzed by provision:

(a) The interview with the Warden and review of the staffing plan confirmed the following:

(1) The facility uses generally accepted detention and correctional practices - conducting audits with National Institute of Corrections security guidelines and aligning policies to American Correctional Association standards as they are updated. Additionally, the Health Care services has been accredited by NCCHC.

(2) There are no judicial findings of inadequacy;

(3) There are no findings of inadequacy from Federal investigative agencies;

(4) There are no findings of inadequacy from internal or external oversight bodies

(5) All components of the facility's physical plant are reviewed. Video monitoring is used; specific information regarding placement of cameras was reviewed during the audit.

(6) The composition of the inmate population has been the same for several years.

(7) The number and placement of supervisory staff has been reviewed and determined to be adequate. Review of rounds and staffing occur regularly.

(8) Institution programs occurring on a particular shift have a detailed evaluation of

the time and days of the programs occurring. This includes volunteer services.

(9) Any applicable State or local laws, regulations, or standards are reviewed.

(10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse are addressed. This is additionally analyzed in the Annual Report.

(11) No other relevant factors have been identified.

The Staffing Plan addresses security positions, noting when they are a 24-hour post, number of positions available and minimum number for operations and who/how supervised. It addresses all requirements of this provision.

(b) Deviations from the staffing plan were attributed to short staffing. The facility uses a DOC Facility Staff Shortage form to demonstrate when positions are closed and efforts to adjust this. The Warden confirmed that staffing levels are monitored by lieutenants daily. The auditor requested staffing rosters from July 1, 2022, October 1, 2022, February 1, 2023, and May 1, 2023, which demonstrated that staffing levels are assigned and monitored.

(c) The auditor reviewed the Facility Annual Staffing Plan dated 4/18/2023. It confirmed there are no judicial findings of inadequacy, no findings of inadequacy from Federal investigative agencies, and no findings from internal or external oversight bodies. There is a review of the facility components to include blind spots (two detected and cameras are recommended). No state or local laws, regulations or standards have an effect on PREA compliance, prevalence of substantiated and unsubstantiated incidents of sexual abuse. This includes a review of the Facility Organizational Chart and composition of the inmate population. This is the only facility in this state for housing female offenders. The Staffing plan review was completed by the PCM, copied to the PREA Coordinator and signed by the Warden.

(d) Policy supports that unannounced rounds will be conducted. The auditor interviewed two supervisors who conduct these rounds. Both confirmed a technique used to ensure that staff are unaware of the rounds being conducted. Additionally, the auditor randomly asked staff when conducting staff interviews (both shifts). All asked confirmed that the supervisor does make rounds at least once a shift, they are not informed of when the supervisor is coming and do not inform other staff when the supervisor is making rounds.

Summary of evidence to support findings: Both the prior policy and the updated policy support compliance with the provisions of the standard. The staffing plan (establishing minimum staffing requirements), the Annual staffing plan review, interviews with the Warden and observations during the onsite audit provided sufficient evidence. The auditor finds the facility compliant with the standard provisions.

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5
- Adjudicated Delinquents and Children in Need of Supervision 1.4.B.6
- Juvenile and Adult Joint Transportation Procedures 1.1.A.8
- Prison Rape Elimination Act 1.3.D.06 9-21-2023
- Interview with the Warden
- Interview with the PREA Coordinator
- Age of majority
- Interview with the youngest inmate

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, *Youthful offenders will not be placed in housing units in which they will have sight, sound, or physical contact with any adult offender through use of a shared dayroom or other common space, shower area, or sleeping quarters (also see DOC policy 1.4.B.06 - Adjudicated Delinquents and Children in Need of Supervision).*

In areas outside of housing units, the DOC will either: maintain sight and sound separation between youthful offenders and adult offenders or provide direct staff supervision (is defined as staff being present in the same area as the offenders and maintain direct visual observation of the offenders) when youthful offenders and adult offenders have sight, sound, or physical contact (see DOC policy 1.1.A.08 Juvenile and Adult Joint Transportation Procedures)

Facilities will make best efforts to avoid placing youthful offenders in isolation to comply with this provision. Absent exigent circumstances, facilities will not deny youthful offenders daily large-muscle exercise or any legally required special education services to comply with this provision. Youthful offenders will also have access to other programs and work opportunities to the extent possible.

Adjudicated Delinquents and Children in Need of Supervision 1.4.B.6 states, A child under the age of eighteen years of age shall not be housed in any South Dakota Department of Corrections adult correctional facility.

Juvenile and Adult Joint Transportation Procedures 1.1.A.8 supports that when juveniles and adults are transported together, juveniles will be placed in seats

	<p>separate from adults, special attention is applied during the loading the unloading of offenders to ensure no contact, and action is taken to prevent verbal or physical interaction between juvenile and adult offenders.</p> <p>As verified by the Interstate Commission for Juveniles, the age of criminal majority in this state is 18 years old.</p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a)(b)(c) Both the previous and updated policy, in addition to the Commission for Juveniles supports that the agency will not house inmates under the age of 18 years old. Interviews with the Warden and the PREA Coordinator confirmed this. Observations during the tour and the request to interview the youngest inmate (18 yrs. old) provided the auditor with sufficient information/evidence to support a finding of not applicable - compliant.</p>
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Searches - Institutions 1.3.A.5 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Interview with the PREA Coordinator · Interviews with random staff (males and females) · Interviews with Warden · Interview with random inmates/transgender inmates · Observations of living areas · Observations of strip search areas · Review of video monitoring · Demonstration of an offender intake search process · Training curriculum/training completion/interview with the training coordinator · PAQ · Frequently Asked Questions - Clarification of Application to PREA Standards

Provisions (FAQ)

The PAQ indicates that there has been no cross-gender strip or cross-gender visual body cavity searches of offenders no cross-gender strip or cross-gender visual body cavity searches of offenders.

The following policy excerpts supports compliance with the requirements of this standard:

Searches - Institutions 1.3.A.5

Body Cavity Search A visual, manual and/or instrument inspection of an offender's anal and/or vaginal cavity or opening. The search shall be conducted only by outside medical staff. Examinations of an offender's body cavities conducted for medical purposes by a medical professional is not considered a body cavity search.

Body Scanning Device A device that functions with millimeter wave advanced imaging technology, which uses non-ionizing radio-frequency energy in the millimeter spectrum to generate an image based on the energy reflected. Designated DOC facilities will use ADANI COMPASS DV Class A (full body scan) devices within a limited-use system to detect contraband and weapons concealed in or on an offender's body or clothing. This device is capable of producing an image of discernable body contours and/or actual body images, including outlines of breasts, buttocks, and genitalia.

Direct Supervision Direct, continuous, uninterrupted, and unobstructed on-site visual observation and supervision of an offender and their surroundings by an employee.

Dry Cell Watch An offender is housed in a cell designated to securely house an offender without plumbing fixtures or plumbing fixtures that are capable of being shut off.

Strip Search A systematic, visual inspection, during which an offender is required to remove all his/her clothing. The unclothed offender, including the offender's ears, nose, mouth, under arms, soles of the feet, between the toes, breasts, buttocks, anus, and genitalia, will be visually inspected. The offender will not be touched during such a search; however, his/her clothing, shoes and any personal affects will be physically searched/examined.

Transgender Refers to the broad spectrum of individuals who identify with a gender different than their birth-assigned sex. A transgender individual may or may not have a clinical diagnosis of gender dysphoria, depending on the presence or absence of clinically significant distress or impairment caused by gender identity.

Universal Pat Search Consists of the removal of outer protective clothing, the emptying of pockets, the physical search of an offender or visitor, screening by any device which does not require disrobing, and the inspection of papers, bags, books, or other items being carried. Pat searches of male offenders may be conducted by DOC employees or contract workers of either sex; female offenders may only be pat searched by female DOC employees or contract workers unless a crossgender pat

search is necessitated by an emergency or immediate security concern. If an offender identified as transgender or intersex, the offender may request to be strip searched and pat searched (pat search for female transgender offenders only) by an employee of the gender the offender identifies with. The request will be honored if an employee of the designated gender is available and willing to conduct the search unless exigent circumstances dictate the need for an immediate search by available personnel.

All offenders are subject to a universal pat search at any time and in any location. The purpose of conducting universal pat searches is to detect and halt the movement of contraband. B. Employees are trained in how to conduct universal pat searches of all offenders to include male, female, transgender, and intersex offenders, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. 1. Universal pat searches of male offenders may be conducted by employees or contract workers of either sex; female offenders will not be universal pat searched by cross-gender employees or contract workers, except in exigent circumstances. 2. Offenders that identify as female transgender may request to be pat searched by a female employee. The request will be honored if an employee of the designated gender is available and willing to conduct the search unless exigent circumstances dictate the need for an immediate search by available personnel. 3. Opposite gender universal pat searches of female offender will be documented in an incident report.

Hand pat searches of offenders shall be conducted in accordance with the offender's identified gender, except in exigent circumstances. Exigent circumstances are defined as any set of temporary and unforeseen circumstances that require immediate action to combat threats to security or institutional order, such as escape, riot or disturbance, mass assault, or when delaying the search may result in the likely loss of concealed contraband or is contrary to preservation of the legitimate penological interests of the DOC. The OIC must be contacted immediately following or during any cross-gender search. 1. Cross-gender pat searches that are inconsistent with an offender's identified gender will be documented on an Informational Report, unless the search is the result of the transgender, intersex, or gender dysphoric offender's approved request for gender specific pat searches. a. Documentation will include at a minimum the following information: 1) name of the staff member conducting the search, 2) the name of the offender; and 3) reason for the exception. b. The report shall be forwarded immediately to the Warden and/or designee.

An offender's access to required programming, work, vocational training, medical appointments, or attorney visits will not be restricted by the availability of same-gender staff to conduct a universal pat search.

A strip search, including a non-invasive visual inspection of offender body cavities, will be conducted based on a reasonable belief that the offender is carrying contraband or other prohibited material. 3. Reasonable belief is not required when offenders return from contact with the general public or from outside the facility. Such searches will be conducted by an employee of the same gender as the offender being searched, except in exigent circumstances or when performed by medical practitioners. a. Offenders that identify as transgender or intersex, may request to be

strip searched by an employee of the gender the offender identifies with. The request will be honored if an employee of the designated gender is available and willing to conduct the search unless exigent circumstances dictate the need for an immediate search by available personnel. b. Exigent circumstances resulting in an opposite-gender strip search by non-medical staff will be documented in an incident report.

Strip searches will be conducted by staff who are the same gender as the offender being searched, except in exigent circumstances. a. The OIC must be contacted immediately following or during any cross-gender search. b. Opposite gender staff strip searches of an offender; or occasional, inadvertent, incidental viewing of an unclothed offender's breasts (female), buttocks, or genitals by a staff member of the opposite gender, (including control room staff monitoring security cameras), must be documented on an Informational Report. The report will include at a minimum, the name of the staff member, the name of the offender, the reason for the search and details of what caused the viewing. The report shall be promptly forwarded to the Warden or designee.

Body Scan Search Procedures: A. Body scan searches will be conducted by staff with the training and skills necessary to properly conduct the search. Staff conducting the search shall be of the same gender as the offender being viewed/searched, except in exigent circumstances. This device is capable of producing an image of discernable body contours and/or actual body images, including the outlines of breasts, buttocks, and human genitalia. B. To maintain the security of the institution, a thorough investigation and analysis of the body image of an offender identified as potentially concealing contraband internally, shall be completed by trained internal and/or external investigators. Opposite gender viewing of recorded body images of an offender when part of an official investigation, procedural review, or audit and consistent with lawful intent is permitted. 1. Images, including identifying documentation, i.e., offender name, ID number, date, and time, may be saved and used as evidence. C. Each staff member's training, specific to the body scan system, will be maintained in the staff member's training records. D. Staff will utilize the body scanning system to supplement existing search processes and search offenders for concealed contraband. Body scan searches are conducted without any physical/tactile contact of the offender by staff. Body scan searches are not a substitute for hand pat searches or strip searches. 1. Random body scan searches are searches in which the offender is instructed to perform and follow all requirements of the body scan process, but the offender is not exposed to any screening dose of radiation. 2. Random searches may be incorporated into the body scan procedures.

Transgender and Intersex Searches: A. Staff will not search or physically examine transgender or intersex offenders for the sole purpose of determining the offender's genital status. If an offender's genital status is unknown, this may be determined during conversations with the offender, a review of the offender's medical records, or as part of a broader medical examination conducted by Health Service staff. B. Transgender or intersex offenders may request to be pat searched by staff who are of the same gender as the offender's identified gender. Female gender staff may search any transgender or intersex offender. C. All offenders, including transgender or intersex offenders, shall be permitted the opportunity to shower, perform bodily

functions and dress/undress without nonmedical staff of the opposite gender viewing their exposed breasts (female), buttocks, or genitalia, except in exigent circumstances. This shall include close observation of an offender's genitals during a urine test (UA) or monitoring offenders with security cameras.

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, In order to allow offenders to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks, staff of the opposite gender will announce their presence when entering a housing unit at the beginning of each shift. If the opposite gender status quo changes during the shift another announcement is required.

Example: if an identified female staff member is assigned to an identified male housing unit for the duration of a shift, only one (1) announcement at the beginning of the shift is required in regard to that gender's presence. If the opposite gender leaves the area and later reenters the area, an announcement of their presence in the housing unit or area where offenders may be showering, performing bodily functions, or changing clothing will be made. The announcement will be made in such a manner that is most likely to be heard, such as an intercom system, and will be made clear that a staff member of the opposite gender has entered the unit (i.e., "cross gender supervision is monitoring the unit"). Opposite-gender announcements only need to be made based on the gender of the facility or unit overall.

However, on graveyard shift, the announcement can be made verbally. It should be loud enough for those offenders who are awake to hear, but not loud enough to disturb those sleeping.

Non-routine visits to the unit, to include tours or vendors will be announced, by the housing control/pod staff and logged into COMS shift report.

Employees will be trained in how to conduct a universal pat search which includes searches of transgender and intersex offenders.

The facility will not search or physically examine a transgender or intersex offender for the sole purpose of determining the offender's genital status. If the offender's genital status is unknown, it may be determined during conversations with the offender, 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.

An offender that identifies as transgender or intersex, may request to be strip searched and pat searched by an employee of the gender the offender identifies with. The request will be honored if an employee of the designated gender is available and willing to conduct the search unless exigent circumstances dictate the need for an immediate search by available personnel. If the requested gender is not available or willing to conduct the search, an informational report shall be written in COMS and forwarded to the PREA facility compliance manager.

Policy excerpts above articulate the definition of searches, definition of supervision, exigent circumstances and directions for conducting searches to include when a cross-gender universal search is acceptable (female staff on male staff, not male staff on female offenders). It addresses the requirement for procedure/practice for opposite gender staff announcements and support that offenders are to be able to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breast, buttocks, or genitals, except in exigent circumstances or when such viewing is incidental to routine cell checks. It additionally addresses use of the Body Scanner. It addresses specific rules relating to inmates who identify as transgender/intersex, to afford their request to have the gender of their identification conduct the search, supporting that staff will not search or physically examine transgender or intersex offenders for the sole purpose of determining the offender's genital status. It confirms that staff will be trained on conducting cross-gender pat down searches and searches of transgender/intersex inmates. All provisions of the standard are addressed to include the compliance with the FAQ issued December 2016. At this facility which houses females, females are to conduct searches of transgender inmates (an option noted in the FAQ).

Evidence reviewed/analyzed by provision:

(a) (b) As indicated, policy restricts cross-gender strip searches or cross-gender visual body cavity searches except if there are exigent circumstances. This includes cross-gender searches of female residents/detainees. This is additionally the policy/practice regarding the body scanner use. The auditor observed several female officers during the onsite tour which led her to conclude that there would not be an exigent circumstance due to staffing that would require cross gender searches. The auditor was informed this are female only assignments. Additionally, the auditor asked all twenty-nine (29) inmates about any concerns with searches. All confirmed that they have been conducted by females, privately and with respect. Programming has not been restricted; the facility only houses female inmates.

(c) Policy requires that cross-gender searches be documented. The PAQ and interviews confirm that no cross-gender searches have occurred. The auditor found this credible based on the audit experiences.

(d) The auditor observed during the onsite visit cross-gender announcements are documented in the electronic logbook as the "Gender Announcement". All random staff interviews and random resident interviews confirmed that this announcement is made every time an opposite gender staff enters the unit or at the beginning of shift when a male staff is working. Residents are able to shower, use the toilet and change clothes without being seen when using the toilet, showering or changing clothes.

During the tour, the auditor observed the toilets and showers located in the housing facilities and security monitors. Some cells have a sink and toilet in the room to the right of the window. Staff can casually see that an inmate is using the toilet, but it takes effort to see any more. Other housing units have common bathrooms with toilets with full solid doors and showers with long shower curtains. For those in a dormitory setting where the camera can observe the beds, they are instructed to

change clothes in the toilet stall or shower area. Two inmates interviewed did express concern regarding the view of the toilet in the room. The auditor found this view to be incidental. The other twenty-seven (27) indicated they are able to shower, use the toilet and change clothes without male staff observing. The auditor observed all areas where strip searches may occur and confirmed that they offer appropriate privacy for the search (intake at the main facility, intake at the minimum facility).

The facility provided evidence to support that when offenders are placed in cells due to reaching capacity that have cameras that the fixed cell camera and the monitor have covers to ensure they are not observed under "observation" status.

(e) As stated in the policies, transgender or intersex offenders are not searched or physically examined to determine genital status. All staff interviews supported that they were knowledgeable regarding this requirement of the standard, and this has not occurred at this facility. The training curriculum reinforces this requirement. All inmates at this facility are searched by female staff, as confirmed by all inmate interviews. This supports compliance with the FAQ issued December 2016.

(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. The training staff showed the auditor that the "Guidance on Cross-Gender and Transgender Pat Searches" is used to train staff on cross gender/transgender searches. The auditor reviewed the training Guidance in Cross-Gender and Transgender Pat Searches. The thirty-two (32) minutes video, published by the PREA Resource Center addresses the requirements of the standard. All staff interviewed who conduct searches confirmed they have been trained with the male staff reaffirming that they do not search female inmates. Review of training records provided demonstrated staff acknowledgment of Universal Search Procedures. Which included the following: Appropriate circumstances when a cross gender pat search is allowed including transgender/intersex pat searches, pat search techniques, the quadrant search method including proper stance, press and release, the use of the blade of your hand, identifying exigent circumstances, and identifying how past trauma is important. Staff sign acknowledging they received and understood the training. Thirty (30) examples of this acknowledgement were provided to the auditor. All security staff interviewed confirmed they have received this training.

Summary of evidence to support findings: Policies excepts reinforce the requirements of all provisions of the standard. Observations of video monitoring and strip search areas assured the auditor that inmates are not subjected to being seen by male staff when showering, changing clothes, using the bathroom and being striped. This includes use of the body scanner. Interviews by staff and inmates confirmed that this is true. Male staff are announcing their presence as required. The auditor found no evidence of programming being adjusted due to non-availability of female staff. Staff interviews and the interview with the training coordinator confirmed that staff are trained in cross-gender/transgender searches. Policy and all staff interviews confirmed knowledge that they are not to search a transgender/intersex to determine genital status. The auditor finds the facility compliant with the standard provisions.

<p>115.16</p>	<p>Inmates with disabilities and inmates who are limited English proficient</p> <hr/> <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Americans with Disabilities Act (ADA) 1.1.E.7 · ADA training · Interview with Secretary of Corrections · Interview with the PREA Coordinator/ADA Coordinator · Interview with the PCM/ADA Coordinator · Inmate Living Guide (English and Spanish) · PREA Notice – Housing Units (English and Spanish) · Language Line Contract · Observations during the tour, PREA information · Random staff interviews · Interview with disabled inmates · Review of investigations · PAQ <p>The PAQ indicates that the number of instances where incarcerated individual interpreters, readers, or other types of incarcerated individual assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the resident’s safety, the performance of first-response duties under § 115.64, or the investigation of the resident’s allegations is zero.</p> <p>The following policy/documentation excerpts supports compliance with the requirements of this standard:</p> <p><u>Inmate Living Guide</u></p> <p>AMERICANS WITH DISABILITIES ACT (ADA) <i>In accordance with the requirements of Title II of the Americans with Disabilities Act (ADA), the DOC will not discriminate</i></p>
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against inmates with disabilities and will make reasonable accommodations to ensure inmates with disabilities have equal opportunity to participate in programs, services and activities. To ensure effective communication with inmates who are deaf, hard of hearing or have a speech disability, the DOC will provide appropriate auxiliary aids and services, free of charge. Aides and services include qualified sign language interpreters and oral transliterators, TTY's, videophones, note-takers, computer-assisted real time transcription services, written materials, telephone handset amplifiers, assistive listening devices and systems, telephones compatible with hearing aids, closed caption decoders, or TV's with build-in captioning, and open and closed captioning of any programming. See DOC policy 1.1.E.7 American's with Disabilities Act for more information. If you require accommodation because of a disability, please contact the facility ADA Coordinator. If you wish to file a grievance relating to an ADA related issue, including discrimination on the basis of a disability or denial of reasonable accommodation, you may do so through the Administrative Remedy Process. See DOC Policy 1.3.E.2 Administrative Remedy for Inmates.

Americans with Disabilities Act (ADA) 1.1.E.7 It is the policy of the South Dakota Department of Corrections (DOC) to prohibit discrimination on the basis of disability and to provide offenders with disabilities, with or without reasonable accommodation, equal access to programs, services, and activities consistent with legitimate penological interests.

ADA Facility Coordinator: The staff person assigned to facilitate ADA compliance at each DOC facility and investigate disability-related issues and complaints made by an inmate within the facility. The coordinator has authority to make recommendations to the Warden and ADA Coordinator and implement approved corrective actions to ensure compliance with ADA.

Effective Communication: Communication with persons who are deaf, hard of hearing, have a speech disability, blind, or have low vision that is as effective as communication with those without a disability. The purpose of effective communication is to ensure persons with a disability can communicate with, receive information from, convey information to, and understand the context of communication with DOC staff.

Persons with Disabilities: Anyone who has a physical or mental impairment that substantially limits one or more major life activities; "major life activities" includes functions such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, and working; "substantially limits" means that the impairment imposes a significant barrier in the performance of a major life activity; anyone who has a record of such an impairment; and anyone who is regarded as having such an impairment.

Qualified Interpreter: An interpreter who, via Video Remote Interpreting (VRI) services or on-site appearance, is able to interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, given the language, skills, and education of the inmate. Includes sign language interpreters, oral transliterators, and cued language transliterators.

Prison Rape Elimination Act 1.3.D.06 9-21-2023 states, *DOC may not rely on offenders for assistance if an offender is a suspect or a victim is deaf or hard of hearing, blind or low vision, or for those who have an intellectual, psychiatric, speech, or are limited English proficient consistent with the Americans with Disabilities Act (ADA) and DOC Policy 1.1.E.7 - Americans with Disabilities Act (ADA)*).

Policy excerpts noted provide detailed information which supports that ensuring meaningful and successful communication with those with limited English and other disabilities provide meaningful access to prevent, detect and respond to sexual abuse and sexual harassment. The Inmate Living Guide provides information to the inmates regarding their rights under ADA. All provisions of the standard are addressed.

Evidence reviewed/analyzed by provision:

(a)The PCM serves as the ADA Coordinator for this facility and is able to ensure that these inmates are provided 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. The auditor observed this action during the onsite audit (providing assisted device to an inmate who is hard of hearing.) Additionally, the auditor was able to interview a hard of hearing inmate with the personal assistance of an interpreter (American Sign Language) who is located close to the facility. The interpreter confirmed to the auditor that she has provided this service. Her service is available in person and via a kiosk in the unit and visiting room.

Staff receive training on ADA inmates. The training provides information that inmates can report through a third party, a TTY will be provided along with visual training materials and by listening to training materials. The interview with the Secretary of Corrections confirmed the agency's commitment to ensure that inmates with disabilities are provided equal opportunity to participate in or benefit from all aspects of the agency's effort to prevent, detect and respond to sexual abuse and sexual harassment.

(b) The posters regarding PREA and the Inmate Living guide are available in Spanish. However, there were no LEP inmates at the time of the onsite audit. Observations and informal conversations with random staff confirmed that they do not recall having any LEP inmates. The PREA training reinforces that inmates with LEP will be provided with staff interpreters and the use of a qualified language line at no cost to the inmate. The auditor was provided a copy of the contract with North American Master Services Agreement for Language Line Services with the South Dakota Department of Corrections. The interview with the Secretary of Corrections confirmed the agency's commitment to ensure that inmates who are LEP are provided equal opportunity to participate in or benefit from all aspects of the agency's effort to prevent, detect and respond to sexual abuse and sexual harassment.

(c) Policy, the PAQ and all random staff interviews confirmed that inmate interpreters, readers, or other types of incarcerated individual assistants have not been used and it was not the case that an extended delay in obtaining another interpreter could compromise the resident's safety, the performance of first-response duties under § 115.64, or the investigation of the resident's allegations. Review of the investigations

	<p>supported this to be true.</p> <p>Summary of evidence to support findings: Policy, both previous and updated and the Inmate Living Guide support the requirements of the standard provisions. Staff are trained in ADA and LEP needs. The Inmate Living guide provides information to the inmate population regarding their rights to ensure effective communication.</p> <p>Interviews confirmed that these needs are addressed, and resources are readily available to provide the assistance needed to ensure that inmates with disabilities or who are LEP 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. The auditor finds the facility compliant with the standard provisions.</p>
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Screening of Staff, Volunteers and contractors for Prior Sexual Abuse 1.1.C.13 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Staff Code of Ethics 1.1.C.1 · Documentation of background check · Observations · Interviews with the Human Resources staff · Review of personnel files - newly hired, contractor, promotions, status employees · PAQ <p>The PAQ indicates that forty-four staff (44) have been hired who may have contact with offenders in the previous twelve months, eleven contractual staff, 100% had criminal background record checks.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Screening of Staff, Volunteers and Contractors for Prior Sexual Abuse 1.1.C.13</p> <p><i>The Department of Corrections (DOC) will not hire or promote an individual, or enlist the services of any volunteer or contractor to work within a DOC facility, before</i></p>

completing a pre-employment screening to identify if the individual has engaged in institutional or community sexual abuse or sexual harassment, or whose criminal history reveals a history of sexual misconduct. The DOC will screen all individuals identified for possible assignment to a DOC facility and current staff members considered for promotion.

Contractor: Any non-staff person who provides a service within a DOC institution on a reoccurring basis, and who may have contact with inmates when not under the constant, direct supervision of a DOC staff member. Includes those providing vocational training, programming, medical or dental treatment, behavioral health services, information and technology support, building maintenance, etc.

NCIC III: National Crime Information Center (NCIC) III is a computerized index of criminal justice information (i.e. criminal record history information, fugitives, stolen properties, missing persons).

Sexual Abuse in the Community: A conviction or civil or administrative adjudication for 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.

Staff Member: For the purposes of this policy, a staff member is any person employed by the DOC that is assigned to work within an institution housing DOC offenders, full or part time. This includes individuals under contract, employees of another State agency and student interns. Volunteer: For the purposes of this policy, a level 1 or level 2 volunteer who donates time and effort on a recurring basis to enhance the activities and programs provided at a DOC facility (See DOC Policy 1.1.D.3 Facility Access & ID Requirements).

Criminal Records Checks: A. A criminal records background check shall be conducted by the DOC and Bureau of Human Resources (BHR) utilizing the NCIC III for all potential new hires and existing staff, volunteers and contractors with unsupervised contact with inmates who is assigned to a DOC facility or considered for providing services within a DOC facility. The background will be completed for each person every five (5) years, beginning in the year 2012 and continuing every five (5) years thereafter. B. Supervisors or BHR representatives assigned to review the results of a criminal records check/background check, shall identify any convictions that exist within and individual's record for engaging or attempting to engage in sexual offenses facilitated by force, overt or implied threats of force, coercion, or if the victim did not consent or was unable to consent or refuse. The reviewer shall have proper training and authorization to possess, access, interpret and review such criminal records. All charges, arrests, or convictions involving any sexual misconduct shall be noted and reported to the Warden or designee. 1. Sexual offenses shall include all offenses contained within SDCL § 22-24B-1 and chapter 22-22 Sex Offenses. C. The facility may hire or contract with an individual who would otherwise be prevented from such employment due to a history of sexual misconduct without violating the PREA standard, only if the Secretary of Corrections (1) determines that the individual does not pose a safety threat, based on considerations such as the

length of time that has passed since the activity described in standard 115.17 (a) (1)-(3) and evidence of rehabilitation and other relevant factors supporting the person is unlikely to reoffend or pose a risk to inmate safety; (2) considers the individual to be important to the success of a specialized inmate rehabilitative program; and (3) does not permit the individual to have contact with inmates without staff supervision.

Staff Member New Hires: A. During the interview process, applicants may be asked about involvement in any sexual misconduct.

B. Prior to an offer of employment, employers and supervisors listed by the applicant will be contacted by the DOC supervisor and/or Bureau of Human Resources (BHR) representative for information, whenever there is evidence to support substantiated allegations of sexual misconduct have occurred, or the individual resigned during a pending investigation of sexual misconduct or in lieu of termination. C. A criminal records background check must be conducted prior to any offer of employment. D. The supervisor and BHR representative will review all related information pertaining to the individual being considered for hire and may make inquiry regarding any allegations of sexual misconduct and shall completely investigate any reports or investigations of sexual misconduct involving the individual. E. The supervisor must take into consideration the results of sections A., B., C. and D. above when making an offer of employment to an individual and shall not make an offer of employment to an applicant with a demonstrated history of sexual misconduct, unless so approved by the Secretary of Corrections or designee.

Promotions of Staff: A. During the promotion process, a staff member being considered for a promotion may be asked if they have had any personal involvement in institutional sexual abuse, sexual abuse in the community or sexual misconduct. The supervisor and BHR representative will review the personnel file of the staff member being considered for promotion for any reports or information supporting sexual misconduct and may make inquiry regarding any allegations of sexual misconduct and shall completely investigate any reports or investigations of sexual misconduct involving the individual. B. Employers or institutional supervisors will be contacted if there is new information supporting an incident of sexual misconduct has occurred since the individual was initially hired and the preemployment screening was completed. C. A criminal records background check will be conducted for those individuals with a background check that exceeds five (5) years since the report was last reviewed. D. The supervisor must take into consideration the results of sections A, B and C above in making a promotional offer to any staff member with a demonstrated history of sexual misconduct. No promotional offer may be extended to any staff member with a history of sexual misconduct since initially hired, unless so approved by the Secretary of Corrections or designee. 4. *Volunteers and Contractors:* A. Criminal record background checks will be conducted on all Level 1 and 2 volunteers and contractors. B. A volunteer or contractor assigned to, or providing a service to a DOC facility, will not be admitted to the facility if the criminal records background checks reveals a prior history of sexual misconduct or sexual offenses, unless approved by the Secretary of Corrections or designee. 5. *Staff Members, Volunteers, and Contractors Required to Disclose Sexual Misconduct:* A. Staff, volunteers, and contractors assigned to or providing a service to a DOC facility are

required to notify their supervisor or the facility BHR representative within one business day if they become involved in any sexual misconduct investigation; are indicted, charged or convicted of any sexual offense; or disciplined for sexual misconduct in an employment setting (See DOC policy 1.1.C.1 Staff Code of Ethics). B. Material omissions or providing materially false information shall be grounds for disciplinary action, including and up to termination.

Responding to Requests for Information About Staff Misconduct: A. Requests for information about a staff member, contractor or volunteer's involvement in possible misconduct, pursuant to an application for employment/contract completed by the individual with an outside employer, including any possible involvement in sexual misconduct or allegations of sexual misconduct while employed or contracted by the DOC, shall be forwarded to the Bureau of Human Resources. B. Requests for such information/records must be in writing and should be accompanied by a signed authorization, release/waiver from the applicant and are subject to all state and federal laws regarding confidentiality and employment records.

Staff Code of Ethics 1.1.C.1

Any staff member who has been arrested or charged, or who has reasonable knowledge they will be arrested or charged with any felony or misdemeanor crime, must report this information to their supervisor the next business day. Violation of criminal law, either on or off duty by a staff member, may be a breach of the code of ethics. This includes but is not limited to: 1. Any sex offense; violation of criminal drug statute; use, possession or distribution of illegal drugs, and driving under the influence (See SDCL § 32-23-1).

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, Hiring authority will ensure any incidents of sexual harassment are considered in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with offenders. Bureau of Human Resources (BHR) personnel will be responsible to notify the hiring authority after their selection has cleared the background process. Any staff member, contractor, or volunteer who is found to have engaged in sexual abuse or sexual harassment of an offender is subject to the provisions of DOC policy 1.1.C.13 - Screening of Staff Volunteers and Contractors for Prior Sexual Abuse.

Policy excerpts noted ensure that all new candidates with contact with inmates (staff, contractors, and volunteers) will be asked about prior sexual abuse and harassment, criminal records checks (which are national) will be conducted prior to contact and every five years, and those getting promoted will be screened in the same manner. Two policies require staff to have a continuing duty to disclose misconduct. It provides direction to staff on responding to requests for information about staff misconduct (provision h.)

Evidence reviewed/analyzed by provision:

(a) (b) (f) The auditor reviewed one non custody application, seven new hire applications (corrections officers) and four promotional records. Additional records

were requested. The auditor was able to determine for the non-custody staff and correctional staff that they were asked the following questions: Have you ever engaged in any sexual abuse or sexual harassment in a prison, jail, lock up, community confinement facility, juvenile facility, or other institution or outside of work in the community. Review of documents regarding background checks (5 yr. or promotion), the staff person is required to address the questions in provision (a). For two candidates there was evidence of reference checks specific to prior correctional experience. However, two different forms were used, for one the form was not completed but evidence of the check was noted in the reference check section. For security staff, they are additionally asked to acknowledge that if hired they have a continuing duty to disclose any adverse contact with law enforcement regarding sexual misconduct throughout the terms of your employment.

(c)The auditor reviewed one non custody application, seven new hire applications (corrections officers, med tech) and four promotional records. The auditor requested documentation demonstrating that staff with the last name beginning with C.L.S. and W had a background check within the last five years but did not receive any information on this. Evidence provided demonstrated that a background check was conducted on the newly hired non-security staff. No evidence provided for promotional candidates indicating that a background check was conducted; a background check waiver is signed. Four of the documents pertaining to a background check did not allow the auditor to conclude that this occurred.

(g) Review of new hire applications supported that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. It is included in the application process for which candidates sign acknowledging this.

(h) The interview with the HR Director confirmed that when a former employee applies for work at another institution, if requested by the institution, the facility will provide information on substantiated allegations of sexual abuse or sexual harassment. She indicated that the PREA Coordinator will be contacted. The PREA Coordinator confirmed that they have disclosed this information in the past.

Summary of evidence to support findings: It is not clear if the questions noted in provision (a) are asked of all staff who may have contact with inmates. Policy does not address this. Sexual harassment is not asked; therefore, it is unlikely the reference check will reveal this for consideration. Evidence of background checks was unclear as indicated above. Update: Additional documentation was received that addressed the auditor's concerns. The interview questions address the questions in both provision (a) and (b). Additional documentation of 5 year and promotion background checks were received that addressed the questions in provisions (a) and verified completion of the background check - eight total. The agency has a process in place to ensure compliance with the provisions. Policy, additional documentation received, and interviews provided the auditor with sufficient evidence to support a finding of compliance.

115.18	Upgrades to facilities and technologies
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5/ Attachment 1 · Prison Rape Elimination Act 1.3.D.06 9-21-2023/Attachment 2 · Observations of camera monitoring, cameras · Interviews Secretary of Corrections · Interview Warden · PAQ <p>The PAQ indicates the facility has acquired any new facilities or made any substantial expansions or modifications of existing facilities since the last PREA audit and has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,</p> <p><i>When designing or acquiring any new facility, or planning any substantial expansion or modification of an existing facility, or installing or updating a new video monitoring system, electronic surveillance system or other monitoring technology, the PREA facility compliance manager and PREA coordinator will consult with the director of prisons and warden or designee to consider any effects of the design, acquisition, expansion, update, or installation may potentially have on staff's ability to protect offenders from sexual abuse.</i></p> <p><i>The physical plant manager or staff designated by the warden will complete the Upgrades to Facilities and Technology form (see attachment #2) describing any expansion, modification, installation, upgrade, etc. A copy of this report will be sent to the warden, director of prisons, PREA facility compliance manager, and PREA coordinator.</i></p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b) During the audit, observations were made demonstrating modifications in some area. The Warden confirmed as did the Secretary of Corrections that cameras have been upgraded and a project for additional upgrades is approved. Review of</p>

	<p>one Sexual Abuse Incident Review did support placement of additional cameras which the auditor observed on the tour. Dialogue with the Warden and observations confirmed that the physical plant has received substantial modifications for incoming programming; conversations with staff led the auditor to conclude that sexual safety was considered when designing these plans. Observation of the area confirmed this to be true to the auditor.</p> <p>Summary of evidence to support findings: Policy (both the previous policy and the updated policy), Attachment #2, interviews, observations all provided sufficient evidence. The auditor finds the facility compliant with the standard provisions.</p>
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115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · PREA First Responder: Responding to Sexual Assault · Records of attendance (38 attendees) · Sexual Incident Protocol and Reference Book (41 pages - updated) · Sexual Incident Checklist: Officer in Charge · MOU advocacy services · Interview with Director of Advocacy services · Verification of SANE exams available · Interview with investigator · Uniform evidence protocol · Interview with PCM · Interview with offender who reported abuse · Observations · PAQ

The PAQ indicates there have been no forensic medical exams, no SANE/SAFE exams nor exams performed by a qualified medical practitioner during the previous twelve months. The auditor found no evidence to dispute this during the audit process.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,

The OIC will initiate victim advocate services if requested by the victim, a victim advocate or behavioral health will accompany and support the victim through the forensic medical examination process and investigatory interviews and will provide emotional support, crisis intervention, information, and referrals. If a victim advocate from a rape crisis center is not available to provide victim advocate services, behavioral health staff from the department will respond accordingly.

The PREA coordinator shall pursue and maintain any memoranda of understanding (MOU), or other agreement with a community service provider who agrees to provide offenders with confidential emotional support services related to sexual abuse. The PREA coordinator will maintain copies of such agreements or documentation showing attempts to enter into such agreements and renew these as necessary.

Sexual assault collection of evidence.

The SIU investigator will follow a sexual assault uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Collection of trace evidence will be done by a qualified DOC PREA first responder and/or DCI.

The requesting SIU investigator will be onsite and present to ensure appropriate chain of custody, during trace evidence collection at the facility, prior to transport for a forensic medical exam (the only exception is when an investigator is not geographically available to the facility).

During the trace evidence collection, any anatomical exam will be done in accordance with clinical standards and procedures for sexual assault/rape.

In the event that the offender's injuries prevent the offender from standing to participate in trace evidence collection, the offender will have this process conducted at the hospital by the SANE. A medical facility with available SANE staff is preferred to ensure proper procedures are followed for the collection of evidence.

Access to forensic medical examinations will be free of charge. Once the SIU Investigator determines a forensic medical examination is needed, such examinations will be performed by Sexual Assault Forensic Examiners (SAFE) or SANE where possible. If a SAFE or SANE cannot be made available, the examination can be performed by other qualified medical practitioners at the hospital. DOC will document efforts to provide a forensic medical exam performed by a SAFE or SANE.

Policy excerpts noted describe the responsibility of the SIU investigator, OIC, and

PREA Coordinator to ensure that inmates who allege sexual abuse are provided access to a SANE exam, and qualified victim advocate. It assures these services are free of charge. It describes the process to ensure uniform collection of evidence.

Evidence reviewed/analyzed by provision:

(a) First Responders have attended training in Responding to Sexual Assault. The seventy (70) page PowerPoint presentation addressed the following: Definitions, the Role of the Sexual Assault Nurse Examiner (SANE), process of the medical forensic exam and evidence collections in hospitals, who is a first responder (lieutenant and above), scene commander, evidence collection and DOOC investigation, role of DOC healthcare, collaborative response, victim's rights, and psychological stages of the impact of the rape.

Staff are designated as PREA first responders and through this training were provided specific directions on evidence collection. The OIC is directed to gather information and evidence and report this directly to the Special Investigation Unit. This occurs by completing the OIC checklist on the computer.

The Sexual Incident Protocol and Reference Book, updated, provides a detailed guide to include the following: goals, definitions, coordinated team approach, first response, evidence and documentation, transportation review and SANE preparation, SANE, documentation and evidence overview and facility specific requirements.

(b) In the Sexual Incident Protocol and Reference Book under Acknowledgements, it states This protocol is based upon 'A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents, second edition" April 2013, the South Dakota Department of Corrections Policies: Compliance with the Prison Rape Elimination Act and Response and Investigation of Sexual Abuse/Harassment, Final Adult PREA Standards, South Dakota Department of Corrections policy and the NIC PREA Investigators Training for Trainers lesson plan.

(c) The PREA First Responder: Responding to Sexual Assault training addresses the need for SANE exam and how to proceed with this process, which includes preserving evidence and arranging for a SANE exam or exam at the emergency room in a hospital. The auditor spoke with the Manager at the hospital about the availability of SANE exams. She indicated they are successful in providing SANE exams when needed due to the use of the telehealth system; there would be no hindrance to providing a SANE exam to an inmate.

(d) (e) There is an MOU with Missouri Shores Domestic Violence center that indicates they will provide a victim advocate who will provide services to DOC offenders to include accompany and support of the victim through the forensic medical examination process and the investigatory interviews.

The interview with the hospital staff confirmed that this organization is contacted if the victim agrees. The interview with the Director from Missouri shores confirmed that they provide these services to all victims of sexual abuse as they are contacted by the hospital to provide these services.

	<p>(f) The agency is responsible for investigating administrative and criminal allegations of sexual abuse.</p> <p>Summary of evidence to support the findings: The auditor finds the facility is now compliant with the standard. The Coordinated Response Plan was updated to ensure that the victim is asked to not shower, wash, brush teeth, change clothes, urinate, defecate, drink or eat, and ensure the alleged perpetrator does not shower is added. Training on the updated Coordinated Response Plan was conducted with thirty-eight supervisory participants. The updated policy and Sexual Incident Protocol and Reference Book (41 pages - updated) further confirm compliance with the requirements of the standard and provide detailed information relating to the process.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6 · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · South Dakota Department of Corrections web page Prison Rape Elimination Act :: SD Dept. of Corrections · Observations · Interviews Secretary of Corrections · Interviews Investigative staff · Review of investigations · The Sexual Incident Protocol and Reference Book · PAQ · FAQ <p>The PAQ indicates there have been one hundred twenty (120) allegations one hundred eighteen (118) resulting in administrative investigations and two resulting in criminal investigations in the past 12 months. It was reported that this number reflects allegations for the agency.</p>

	<p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated mirrors the requirements of the standard.</p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b) (c) Policy (both previous and current) supports the requirements of the provision. During the audit, the auditor interviewed random staff, inmates who reported sexual abuse and all investigations for the previous twelve months. This review process confirmed to the auditor that the facility does ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. The interview with the Secretary of Corrections confirmed the agency's commitment to ensure all allegations of sexual abuse and sexual harassment are investigated. The interview with investigative staff confirmed to the auditor that they have not become aware of an allegation of sexual abuse or sexual harassment that was not reported to them. The auditor verified that the policy is available on the agency website.</p> <p>The Sexual Incident Protocol and Reference Book defines who investigates. It reinforces through the PREA Response Facility Checklist that the SIU investigator will be contacted for allegations of sexual abuse with additional detailed instructions for separating the offenders, ensuring proper medical care if provided to include an assessment by clinical services up to and including transport for a SANE exam.</p> <p>Summary of evidence to support findings: Policy, the Sexual Incident Protocol and Reference Book, the interview with the Secretary of Corrections, the interview with investigators, and interviews with random staff all provided evidence to support that the agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. This policy is available on the agency website for review. The auditor finds there is sufficient evidence to support a finding of compliance.</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Annual Prison Rape Elimination Act Report · Staff Training Requirements 1.1.D.1

- Prison Rape Elimination Act 1.3.D.06 9-21-2023
- Training curriculum
- Staff training records/acknowledgment of comprehension
- Interview with the training coordinator
- Observations
- Interviews random staff
- PAQ
- FAQ

The PAQ indicates that all employees who have contact with offenders were trained on PREA requirements as outlined in the provision.

The following policies/documentation excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, PREA training will be provided to all employees who may have contact with offenders tailored to the gender of the offenders at the facility during the basic training academy. Contract workers, temporary staff, interns, volunteers, and chaplains will receive the training in the basic volunteer training. All staff will take a refresher course on an annual basis thereafter. Training will include but will not be limited to

Review of this policy, the Prison Rape Elimination Act of 2003, and any other applicable state or federal laws.

Information on DOC's policy of zero tolerance for sexual assault/rape, sexual misconduct, and sexual harassment.

How to fulfill their requirements under DOC's sexual assault, and sexual harassment prevention, detection, reporting, and response policies and procedures.

Information on reporting and responding to such incidents.

Recognition of warning signs that someone has been a victim of sexual assault/rape and sexual harassment and regarding available medical and behavioral health treatment.

Information related to the investigation of incidents of sexual assault/rape, and sexual harassment, and the prosecution of perpetrators.

In addition to the above, training will cover the following:

Common reactions of victims

Sensitivity to offender allegations of sexual assault/rape, sexual misconduct, and

sexual harassment.

Offenders right to be free from sexual assault/rape and sexual harassment and to be free from retaliation for reporting such behavior

How to communicate effectively with offenders, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming

Confidentiality.

Dynamics of sexual assault/rape, sexual misconduct, and sexual harassment in confinement

Recognition of signs of predatory offenders and potential victims.

Employee, contract worker, or volunteer involvement with offenders and how to avoid inappropriate relationships with offenders

Compliance with relevant laws related to mandatory reporting of sexual assault/rape and sexual harassment; and

Consequences for failure to report

Each employee, contract worker, and volunteer will document through signature that they understand the training they have received. The original will be maintained in the employees training file.

The Annual Prison Rape Elimination Act Report ensures that preservice training includes the following:

(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' right 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.

Staff Training Requirements 1.1.D.1

Pre-Service Training Content: Prevention of sexual abuse and sexual harassment of offenders. a. The pre-service Prison Rape Elimination Act (PREA) training shall apply to all staff members that may have contact with inmates. The training shall include: 1) Zero-tolerance policy for sexual abuse and sexual harassment. 2) How to fulfill staff responsibilities under DOC sexual abuse and sexual harassment prevention,

detection, reporting and response policies and procedures. 3) Inmates' right to be free from sexual abuse and sexual harassment. 4) The right of inmates and staff members to be free from retaliation for reporting sexual abuse and sexual harassment. 5) The dynamics of sexual abuse and sexual harassment in a confinement/correctional setting. 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 conforming inmates. 10) How to comply with relevant laws related to mandatory reporting of sexual abuse to law enforcement. b. Such training shall be tailored to the gender of the inmates at each DOC facility. Staff members shall receive additional training if the staff member is reassigned from a male facility to a female facility or vice versa.

In-Service Training: A. In-service training topics for the second and subsequent years of employment will be identified with input by staff, through needs assessment and as determined by institution/unit based procedures. B. In-service topics will include those topics necessary for fulfillment of the responsibilities of the position as well as addressing staff development needs. This includes Prevention of Offender Sexual Assault/Rape.

Attachment 2 SDCL Signature form

Attachment 3 Receipt and Acknowledgement – Unit Oms

Acknowledgement of Understanding PREA Staff Training

Evidence reviewed/analyzed by provision:

(a) The PREA Training curriculum was reviewed. It includes sixty-six (66) power point slides:

- Review of the Federal PREA standards
- Goals prevent, reduce, eliminate investigate prosecute intervention and treatment
- How goals are met
- PREA Personnel Resources
- PREA Resources
- Risk assessments
- Use of screening information
- Zero tolerance policy
- Definitions of Sexual Abuse, sexual assault/rape, sexual harassment, sexual misconduct

- Dynamics of sexual abuse in confinement
- Common Male and female inmate differences
- Common reactions of victims
- How to detect signs of sexual abuse
- How to communicate effectively
- LGTBI terminology, definitions, housing placement, communication security
- LEP and ADA
- How to avoid inappropriate relationships
- How to fulfill responsibilities when sexual activity is observed
- DOC policy/procedures in a PREA incident (emphasizing immediately)
- How to comply with Mandatory Reporting Procedures
- Documentation
- Deliberate indifference
- Staff reporting options
- Preliminary Investigation
- First responder duties
- Threshold questioning (first 10 to 15 minutes on scene)
- Crime Scene Management
- Free from retaliation
- Anecdotal information
- Review of statistics
- Follow up quiz questions

(b) As indicated, it addresses information specific to males and females. During the random staff interviews, the auditor inquired if they recall their being information specific to females, all replied yes. Some articulated that there are differences in the dynamics and reactions.

(c) All employees interviewed with experience ranging from three months to fifteen years confirmed to the auditor that they received the training.

(d) Over one hundred (100) Acknowledgement of Understanding PREA Staff Training were provided and reviewed. It indicated the following: "By my signature I hear by

	<p>acknowledge that I have received the training listed above. Furthermore, I have had an opportunity to ask any questions pertaining to the training and I understand the training provided. “</p> <p>Summary of evidence to support findings: Policy (both the previous policies and updated policy), The PREA Annual Report, interviews, and review of documents provided the auditor ample evidence that the provisions of the standard are being addressed. Training addresses the required topics indicated in the provision, addresses male and female offender dynamics and reactions, provides meaningful examples, requires a quiz and acknowledgement. The auditor finds the facility compliant with the standard provisions.</p>
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115.32	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Observations · Interview contractor (three) · Interview with a volunteers (two) · Review contractor training records/review of Volunteer training records (fifty-nine total) · Interview with the Volunteer Coordinator · Volunteer documentation · PAQ <p>The PAQ indicates there are sixty-three (63) volunteers and contractors who have been trained in agency policies and procedures regarding sexual abuse/harassment prevention, detection, and response.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,</p>

Contract workers, temporary staff, interns, volunteers, and chaplains will receive the training in the basic volunteer training.

Each employee, contract worker, and volunteer will document through signature that they understand the training they have received. The original will be maintained in the employees training file.

Evidence reviewed/analyzed by provision:

(a) (b) (c) The interview with the training coordinator confirms that her department oversees all training for volunteers and contractors. She confirmed that Volunteers and part time contractors receive eight hours of training that includes a section regarding PREA. Contractual staff who work full-time (i.e. Aramark, food service) complete the same training as employees. All volunteer records were provided for the auditor to review. It supported the requirements as illustrated in the policy but did not demonstrate that full-time contractual staff receive the same training. Two volunteers and two contractual staff were interviewed, and they provided the auditor with confidence that they are trained in the requirements regarding PREA and understand their role.

Fourteen additional training acknowledgements were received demonstrating training for full-time contractual staff, but they did not correspond to the list of contractual staff provided. They did not indicate the position of the person signing the acknowledgement. Contractual staff appeared to sign the volunteer 8-hour training record. An additional roster of staff by position to include contractual and volunteers was provided to supplement this documentation reflecting compliance. The auditor received an updated training acknowledgment form that will require the person to list their position.

Summary of evidence to support findings: Policy (both the previous policies and updated policy), interviews, the updated training form and review of documents provided the auditor evidence that the provisions of the standard are being addressed. The auditor finds the facility compliant with the standard provisions.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard: <ul style="list-style-type: none">· PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5· PREA Institutional Risk Screens 1.4.B.16· Prison Rape Elimination Act 1.3.D.06 9-21-2023

- Inmate Living Guide
- PREA Video What you need to know
- Observations posters, pamphlets
- Demonstration of the intake process
- Demonstration of Orientation
- Interviews Intake staff
- Interviews with staff who conduct Orientation
- Inmate Living Guide
- PAQ

The PAQ indicates that 709 offenders were admitted that were given information at intake, 703 stayed past 30 days who received comprehensive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

The following policy/documentation excerpts supports compliance with the requirements of this standard:

PREA Institutional Risk Screens 1.4.B.16 states, *During the admission process, staff will present the inmate with information explaining the DOC's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of, sexual abuse or sexual harassment (See DOC policy 1.4.A.2 Inmate Admission). This information is contained in the Inmate Living Guide , which inmates have access to upon admission to a DOC facility, either in printed format or electronically through their DOC issued tablet or a kiosk. 1. Unit staff completing the Initial PREA risk screen will document the presentation of Prevention of Sexual Abuse/ Harassment Information- part 1 on Attachment 4.*

Inmate Living Guide

PRISON RAPE ELIMINATION ACT (PREA) Sexual abuse is any unwanted sexual contact from another inmate, or any sexual contact involving a staff member, even if it is consensual. Consensual sexual activity between inmates is against the rules. Sexual activity involving inmates and staff is a violation of DOC policy and state law.

Sexual abuse does not have to be a violent act. If the victim feels they would be harmed or retaliated against if they refused, then it is sexual abuse. Sexual harassment is repeated comments or gestures that are sexual nature, unwelcome sexual advances or requests for sexual acts from another. The DOC has a zero-tolerance policy relating to all forms of sexual abuse and sexual harassment, retaliation by inmates or staff for reporting sexual abuse and harassment, or staff neglect or violation of responsibilities that may have contributed to such abuse or

harassment. The DOC will cooperate in the investigation and prosecution of anyone involved in committing or attempting to commit sexual abuse or sexual harassment. If you believe you are the victim of sexual abuse or sexual harassment, please report this information to any staff member as soon as possible. If you become aware another inmate may be the victim of sexual abuse or harassment, or may be at risk of victimization, it is your obligation to notify a staff member immediately. If you are not comfortable reporting sexual abuse or sexual harassment directly to a staff member, either in writing, verbally or through an anonymous note, you may report the abuse or harassment through the institutional telephone "hotline", or by contacting the South Dakota Division of Criminal Investigation, 1302 East Hwy 14, Suite 5, Pierre, SD 57501-8505. If you choose to report the sexual abuse or harassment to a friend or family member, they may report this information directly to the DOC or Division of Criminal Investigation. The DOC will respond to all reports of sexual abuse or harassment and take steps to protect the victim. Inmates who are a victim of sexual abuse or sexual harassment have access to community victim advocate services. See DOC policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse/Harassment. Inmates who identify as transgender or intersex may contact unit staff or Behavioral Health staff to request certain accommodations permitted by policy. See DOC policy 1.4.E.13 Management of Gender Dysphoria. For more information, please refer to the "An Inmate's Guide: Sexual Abuse and Sexual Harassment Awareness" brochure available through your Unit Staff. DOC policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse/Harassment includes information about the department's commitment to comply with the Federal Prison Rape Elimination Act (PREA) standards. AMERICANS WITH DISABILITIES ACT (ADA) In accordance with the requirements of Title II of the Americans with Disabilities Act (ADA), the DOC will not discriminate against inmates with disabilities and will make reasonable accommodations to ensure inmates with disabilities have equal opportunity to participate in programs, services and activities. To ensure effective communication with inmates who are deaf, hard of hearing or have a speech disability, the DOC will provide appropriate auxiliary aids and services, free of charge. Aids and services include qualified sign language interpreters and oral transliterators, TTY's, videophones, note-takers, computer-assisted real time transcription services, written materials, telephone handset amplifiers, assistive listening devices and systems, telephones compatible with hearing aids, closed caption decoders, or TV's with built-in captioning, and open and closed captioning of any programming. See DOC policy 1.1.E.7 American's with Disabilities Act for more information. If you require accommodation because of a disability, please contact the facility ADA Coordinator. If you wish to file a grievance relating to an ADA related issue, including discrimination on the basis of a disability or denial of reasonable accommodation, you may do so through the Administrative Remedy Process. See DOC Policy 1.3.E.2 Administrative Remedy for Inmates.

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, Offender Orientation and Education

Admissions and Orientation (A&O) and intake staff shall conduct an intake screen and PREA safety briefing assessment on all new admissions to the facility within seventy-

two (72) hours of arrival to identify risks of victimization and abusiveness .

Within thirty (30) days of intake, the DOC will provide all offenders entering all facilities comprehensive education and orientation material regarding their rights to be free from sexual assault/rape, and sexual harassment, and to be free from retaliation for reporting such incidents or behavior, and regarding agency policies and procedures for responding to sexual assault/rape, sexual harassment, or sexual misconduct. PREA information is also provided to offenders via tablets as an addition to the orientation of PREA.

The orientation information will be communicated orally, either in person or by video, and in written form in a manner that is clearly understood by the offender. In accordance with Americans with Disabilities Act - Offender Request for Accommodation, appropriate provisions will be made to ensure effective communication for offenders not fluent in English, those with low literacy levels, and persons with disabilities. The DOC will provide offender education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills. DOC will maintain documentation of offender participation in these education sessions. Information provided will include, but not be limited to:

The DOC zero tolerance policy.

Self-protection.

Prevention/intervention.

Reporting procedures

Treatment and counseling.

Protection against retaliation.

Disciplinary actions for making false allegations.

Offenders will be shown the "PREA: What you need to know" video and receive a copy of the "An Offender's Guide to sexual abuse and sexual harassment awareness" brochure at intake. In addition to providing such education, the facilities will have key information continuously and readily available or visible to offenders through posters, offender living guides, or other written format.

Offenders will be required to sign the PREA Acknowledgement of Prevention of Sexual Abuse/Harassment Information acknowledging receipt of this information. A copy of the offender orientation verification form will be maintained in the electronic file (see attachment #8 - Acknowledgement of PREA Procedures). Offenders who have not been offered education and information explaining the zero tolerance policy regarding sexual abuse and how to report incidents or suspicions of sexual abuse will be offered education and information during the offender's case planning within one (1) year and review with unit staff (see DOC policies 1.1.E.6 - Case Management for Male Offenders and 1.1.E.8 - Case Management for Female Offenders).

Policy/documentation notes above ensure that inmates receive information on PREA upon intake and within 30 days thereafter. It illustrates the information provided to them in the Inmate Living Guide.

Evidence reviewed/analyzed by provision:

(a) PREA Pamphlet – The auditor reviewed the PREA pamphlet which is provided to inmates upon intake. It addresses what to do if sexually abused, how to report, relief from retaliation zero tolerance, and definitions of sexual abuse and sexual harassment. All inmates interviewed confirmed they received the pamphlet upon arrival. An interview with intake staff confirmed this process. Upon arrival, inmates are assigned a Inmate Living Guide which is also in the tablet. As indicated, it further provides information as detailed above. Inmates interviewed confirmed access to the Inmate Living Guide. No inmate interviewed said they did not have a tablet.

(b) While housed in the Admission and Orientation unit (approximately three weeks), the A & O case manager confirmed that he reviews the video, PREA: What You Need to Know, produced by JDI with the inmate and has individual follow up regarding PREA. This is also when the second risk assessment is completed. The video is approximately sixteen minutes long and discusses the following: confined persons right to be free from sexual abuse and sexual harassment, there is a zero tolerance to any form of sexual abuse or sexual harassment, right to report privately and safely, free medical, mental health and trained sexual abuse counseling, definitions of sexual harassment, sexual abuse, avoiding behaviors that will help maintain safety, third party reports, the facility's requirement to continually provide information on how to report, including outside the facility; and reasonable communication with sexual abuse advocacy groups. Interviews with inmates confirmed they reviewed this video and explained the contents to the auditor.

(c) It is reported that all inmates have received PREA education. The auditor further confirmed this by interviewing the inmates housed here the longest (2000) who confirmed knowledge and education regarding PREA and her rights under the law.

(d) see comments to 115.16

(e) Confirmation of the receipt of the pamphlet and orientation is maintained in the computerized management system. Two examples from the previous twelve months for each month (twenty-four total) were reviewed online with the PREA Coordinator and PCM and demonstrated that receipt of this information is documented.

(f) PREA posters were visible throughout the facility and referenced by the inmates during their interviews. The contain information on how to report Sexual Abuse and obtain emotional support services. They are securely posted by inmate phones with other relevant communication. All inmate interviews confirmed knowledge.

Summary of evidence to support findings: Policy (both the previous policies and updated policy), interviews, and review of documents provided the auditor ample evidence that the provisions of the standard are being addressed. Inmate interviews provided strong support that they received this information and are aware of their rights under this law, and how to find information on reporting. The auditor finds the

	facility compliant with the standard provisions.
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Required PREA training chart · PREA Specialized Training curriculum · NIC training - PREA: Investigating Sexual Abuse in Confinement Settings · Training records · Documentation of regular PREA training · Observations · Interviews Investigative staff · PAQ # of investigators agency <p>The PAQ indicates there are currently ten investigators trained to handle and respond to sexual abuse allegations.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, <i>Administrative and criminal SIU will remain current in required training. SIU will be trained in:</i></p> <p><i>Conducting investigations of sexual assault/rape and sexual harassment in confinement settings.</i></p> <p><i>Interview techniques.</i></p> <p><i>Trace evidence collection in confinement settings.</i></p> <p><i>Criteria required to substantiate a case for administrative action or prosecution referral; and</i></p> <p><i>Proper use of Miranda and Garrity advisements.</i></p>

Documentation verifying completion of the specialized training will be recorded in each individual's training record and will be forwarded to the PREA coordinator.

Evidence reviewed/analyzed by provision:

(a) (b) (c) The agency maintains a chart for required PREA training. It was updated 3/30/2023. For investigators it includes the following: PREA: Your role in responding to sexual abuse PREA: Investigating sexual abuse in a confinement setting PREA: Investigating sexual abuse in a confinement setting: Advanced YouTube videos Proper Use of Miranda and Garrity Rights PowerPoint Evidence Collection in Confinement settings PowerPoint Interviews and interrogation Techniques of investigation interviewing and advanced interrogation. PREA training records were provided for nine investigators. Two investigators specifically complete the investigations at this facility. They were both interviewed and confirmed that they have received specialized training and will be completing more. Training records provided confirmed they have completed the NIC training intro and advanced, DOC investigator training and interview and interrogation techniques. They both confirmed they have been trained on 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. Training records were provided demonstrating that investigators received regular PREA training.

Summary of evidence to support findings: Policy (both the previous policies and updated policy), interviews, and review of documents provided the auditor ample evidence that the provisions of the standard are being addressed. The auditor finds the facility compliant with the standard provisions.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none">· PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5· Prison Rape Elimination Act 1.3.D.06 9-21-2023· Required PREA training chart· Specialized medical and mental health training curriculum· Training records/Acknowledgement of the training and understanding Specialized medical and Mental Health care (eleven total)

- Documentation of regular PREA training
- Observations
- Interviews medical staff and mental health staff
- PAQ

The PAQ indicates that the facility has twenty-five (25) medical and mental health staff, 100% have received specialized training.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, PREA training will be provided to all employees who may have contact with offenders tailored to the gender of the offenders at the facility during the basic training academy. Contract workers, temporary staff, interns, volunteers, and chaplains will receive the training in the basic volunteer training. All staff will take a refresher course on an annual basis thereafter. Training will include but will not be limited to

Review of this policy, the Prison Rape Elimination Act of 2003, and any other applicable state or federal laws.

Information on DOC's policy of zero tolerance for sexual assault/rape, sexual misconduct, and sexual harassment

How to fulfill their requirements under DOC's sexual assault, and sexual harassment prevention, detection, reporting, and response policies and procedures

Information on reporting and responding to such incidents.

Recognition of warning signs that someone has been a victim of sexual assault/rape and sexual harassment and regarding available medical and behavioral health treatment

Information related to the investigation of incidents of sexual assault/rape, and sexual harassment, and the prosecution of perpetrators.

In addition to the above, training will cover the following:

Common reactions of victims

Sensitivity to offender allegations of sexual assault/rape, sexual misconduct, and sexual harassment.

Offenders right to be free from sexual assault/rape and sexual harassment and to be free from retaliation for reporting such behavior

How to communicate effectively with offenders, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming

Confidentiality.

Dynamics of sexual assault/rape, sexual misconduct, and sexual harassment in confinement

Recognition of signs of predatory offenders and potential victims.

Employee, contract worker, or volunteer involvement with offenders and how to avoid inappropriate relationships with offenders [

Compliance with relevant laws related to mandatory reporting of sexual assault/rape and sexual harassment; and

Consequences for failure to report

Each employee, contract worker, and volunteer will document through signature that they understand the training they have received. The original will be maintained in the employees training

Employees will be trained in how to conduct a universal pat search which includes searches of transgender and intersex offenders

All full-and part-time clinical services staff (medical and mental health care practitioners) who work regularly in facilities will be trained in:

How to detect and assess signs of sexual assault/rape and sexual harassment

How to preserve physical evidence

How to respond effectively and professionally to victims of sexual assault/rape and sexual harassment; and

How and to whom to report allegations or suspicions of sexual assault/rape and sexual harassment

Medical health care professionals will attend PREA First Responders training and behavioral health clinicians will attend Trauma Informed Practice training. Clinical staff will complete specialized PREA approved training and certifications will be forwarded to the PREA coordinator. Documentation of completion of this training will be recorded in each individual's training record.

Evidence reviewed/analyzed by provision:

(a) The agency maintains a chart for required PREA training. It was updated 3/30/2023. Medical staff are required to complete the following: NIC PREA: Medical Care for Sexual Assault Victims in a Confinement setting. NIC PREA 201 for Medical and Mental health Practitioners PRC/YouTube training. Mental health staff complete the following: PREA: Behavioral Health for Sexual Assault Victims in a Confinement Setting PREA 201 for Medical and Mental Health Practitioners PRC/YouTube training.

(b) Not applicable, another agency provides this service.

	<p>(c) At the time of the auditor, eleven certificates were provided that medical staff confirmed training and understanding of (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. Additional certificates were provided demonstrating that mental health staff have received this training.</p> <p>(d) Documentation of attendance at regular PREA training was provided.</p> <p>Summary of evidence: The auditor finds the facility is compliant with the standard provisions. Documentation of specialized training for mental health and regular PREA training for medical and mental health training was provided. The training curriculum ensures that the four requested topics are addressed. This evidence supports a finding of compliance.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · PREA Institutional Risk Screens 1.4.B.16 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Risk Assessment tool · Interviews Staff who perform risk screens · Risk assessments initial, 30-day reassessment, when warranted or referred · Random review risk assessments · Interview PREA Coordinator · Interview with the PREA Manager · PAQ · FAQ <p>The PAQ indicates that 708 (100%) offenders were screened for risk of sexual victimization or risk of sexually abusing other offenders within 72 hours of their entry</p>

into the facility, 703 offenders remained past 30 days) who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,

Offender Screening Assessments and Placement

All offenders are assessed within seventy-two (72) hours of arrival at the admissions facility for potential vulnerabilities or tendencies of acting out with sexually aggressive behavior in person and in a private location. This initial screening will be conducted by trained admission and orientation (A&O) staff.

Offenders will not be disciplined for refusing to answer, or for not disclosing complete information, in response to any questions asked for the PREA risk assessments.

Appropriate controls will be used on the dissemination of information in order to ensure that sensitive information contained in responses to all PREA Risk Screen Assessment is not exploited by staff or other offenders. All PREA Risk Screen scores are confidential and not to be released to offenders or unauthorized staff.

Offender Screening for Risk of Sexual Victimization and Abusiveness.

The PREA Risk Screens are assessments (screens) based upon the Final Adult PREA National Standards. The goal of this screening is to aid in the determination of an offender's potential for sexually abusing others (aggressor) or being sexually abused by others (victim) using an objective screening instrument.

All PREA Risk Assessment codes are available for all staff, the questionnaire uses offender's demographics, results of a NCIC background check, sentencing information, pre-sentence investigation (PSI), classification, assessment information, and any documented/known institutional, probation, or parole behaviors that are available. This questionnaire's answers are restricted to assigned staff (see attachment #7 - PREA Offender Admission Review Screen Scoring).

The screenings will consider prior non-institutional acts or history of sexual assault/rape, sexual harassment, or sexual misconduct; prior convictions for violent offenses, and history of prior institutional violence or sexual assault/rape, sexual harassment, or sexual misconduct in assessing offenders for risk of being sexually aggressive.

When scoring the PREA risk screen in COMS and scoring a PREA risk screen item as a "YES", it is mandatory the assessor put comments in the question comments field of COMS documenting why an item was scored "YES".

Within thirty (30) days from the date of arrival at all facilities, a trained admissions case manager or unit case manager will assess or reassess the offender's risk of

sexual victimization or sexual aggressiveness creating an updated PREA Risk Screen Assessment. The screening will be in person and conducted in a private location.

The case manager will re-assess the offender's risk level annually or when the offender's classification is reviewed and will update the PREA Risk Screen assessment. The reason for a PREA Risk Screen Review will be documented in the COMS PREA Risk Screen Comments section if changes occurred.

After a PREA risk screen review has been completed and it is determined that there are no changes to the offender's PREA risk screen on file, a PREA case note can be entered into COMS under Case Management / Case Notes / Note Type: PREA / Note Sub Type Review.

If an offender is suspected of being a potential sexual victim or potentially sexually aggressive at any time during their incarceration; is found guilty of an offense in custody for rape or sexual misconduct/sexual harassment; or if the offender is involved in an incident of sexual assault/rape, sexual harassment, or sexual misconduct during their incarceration, a PREA Risk Screen re-assessment will be conducted in-person and in a private location to determine the appropriate risk level and the following will occur:

When an offender is identified as the victim in an incident of sexual assault/rape or sexual harassment, the PREA facility compliance manager will request the case manager to review and update the offender's PREA Risk Screen assessment. If the victim is self-identified as transgender or intersex, the PREA facility compliance manager will refer the offender to a multi-disciplinary staff review team hearing to review before having the facility conduct an in-person assessment with the victim and updating the PREA Risk Screen assessment.

When an offender is identified as the aggressor in an incident of sexual assault/rape, or sexual harassment or receives a felony conviction for an institutional sexual assault, the PREA facility compliance manager will request the case manager update the offender's PREA Risk Screen assessment.

When an offender is identified as being involved in an incident of sexual misconduct where no victim or aggressor is identified, the PREA facility compliance manager will review the offender's PREA Risk Screen assessment on all offenders involved in the incident, the PREA facility compliance manager will refer this to the case manager if there is a need for an update.

In incidents with confidential information or involving employees, contract workers, or volunteers, the PREA facility compliance manager will request the unit case manager update the appropriate offender's PREA Risk Screen assessment.

The policy excerpts noted provides detailed information on the requirement for the risk assessments and how the agency ensures its implementation and use. It clarifies the resources used for making the determination and that there is a section in the database for comments. It confirms compliance with all provisions, including the 30-day re-evaluation. It emphasized that the interview is to be in a private setting

and that the information received is confidential. It addresses that an updated risk assessment is to be conducted if the inmate is involved in a sexual abuse incident of sexual misconduct during incarceration, or when deemed necessary. Policy specifies that the information is protected and confidential; inmates are not to be disciplined for not disclosing information or refusing to answer. Therefore, it addresses all requirements of the standard provisions.

Evidence reviewed/analyzed by provision:

(a)(b) Policy, interviews with Intake staff and demonstration of intake support that an initial intake screen is completed immediately upon arrival to assess risk of sexual abuse or risk of being sexually abused.

(c)(d) (e) An example of the screening tool was provided with the pre-audit documentation. The objective screening tool used considers the following information:

Risk of being sexual victimization

- mental, physical, development disability
- age
- physical build (different parameters for females)
- first incarceration
- convictions for sex offense against an adult or child
- perception of or self identifies as gay, lesbian, bisexual, transgender, intersex or gender nonconforming
- crimes exclusively nonviolent
- previous experience as a victim of sexual abuse community and/or while incarcerated
- inmate's perception of vulnerability

The risk screen developed and used at this facility addresses all of the requirements of the provision. No additional questions are used to make the objective determination. The facility does not hold offenders who are detained solely for civil immigration. The screen is completed upon arrival by the intake case manager, typically within hours but can take up to the 72-hour time limit. This conclusion was based on interviews with staff who conduct the screens, intake staff, inmates and review of risk assessments.

(e) The screening tools addresses the following:

Risk of being Sexually Abusive

Institutional incidents of sexually abusing other offenders

	<p>Offender has prior acts of violent sexual abuse (non-institutional)</p> <p>Offender has prior convictions for violent offenses</p> <p>Offender has prior violence within institutional setting or jail</p> <p>The questions are asked verbally and in private according to the interview with the person who conducts risk assessments and demonstration of the intake process, as well as confirmed by inmates who were randomly asked.</p> <p>(f) The auditor interviewed the staff who complete the 30-day reassessment. It was confirmed to the auditor that this occurs in person, privately and the offender is verbally asked the questions again. This practice does meet the expectations clarified in the FAQ that requires that the 30-day reviewed be conducted in person with the offender. The auditor requested and received inmate Risk Surveys demonstrating completion of the Risk Survey initially and within 30 days for the first two inmates who arrived each month - 26 total examples. As these are documented in the management system, they were reviewed electronically with the PREA Coordinator and the PCM.</p> <p>(g) Policy and interviews with the random staff assured the auditor that staff are observant and would communicate any information to the PCM that may initiate an updated (when warranted referral, receipt of additional information or request) risk assessment would be completed. And, the PCM assured the auditor in addition to policy that a updated risk assessment would be completed upon conclusion of a sexual abuse investigation.</p> <p>(h) The interview with the intake staff/staff who conduct risk assessments confirmed to the auditor that they would not require an offender to answer sensitive questions - (d)(1), (d)(7), (d)(8), or (d)(9) if they did not want to respond. Interviews with the inmates confirmed that none responded that they believe they would be disciplined if they did not respond to the questions.</p> <p>(i) Per the interview with the PCM and observation of the offender record storage area, risk assessments are maintained in the computerized management system which has appropriate controls on which staff can access the information. Summary of evidence to support findings: Policy (both the previous policies and updated policy), interviews, and review of documents provided the auditor ample evidence that the provisions of the standard are being addressed. The auditor finds the facility compliant with the standard provisions.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5
- PREA Institutional Risk Screens 1.4.B.16
- Prison Rape Elimination Act 1.3.D.06 9-21-2023
- Review of the inmate roster demonstrating the code from the risk assessment
- Observations
- Interviews PREA Coordinator
- Interview with the PCM
- Interview with staff who conduct the risk screen
- Policy on transgender/intersex assessment
- Interviews transgender/intersex offenders
- Interview with staff who make housing assignments
- Interview with programming staff
- Interview with transgender committee member

The following policy excerpts supports compliance with the requirements of this standard:

PREA Institutional Risk Screens 1.4.B.16

Utilization of the PREA Risk Screen score: A. An inmate's PREA risk screen score will be considered when assigning housing for the inmate to help separate inmates who are high risk for being sexually victimized from inmates assessed as high risk of being sexually abusive.

Cell/Room Assignment Based on PREA Risk Screen score:

Programming / Education / Work Assignments Based on PREA Risk Screen score: Work supervisors and those providing education and programming to groups of inmates are responsible for knowing the identity of inmates assessed with victim potential and aggressor potential and providing necessary supervision to protect inmates from sexual abuse. If vulnerable and potentially abusive inmates are present in the area, at the same time, supervisors shall directly supervise the inmates.

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,

Information obtained during the intake assessment and reassessment processes will be used to assist in the classification and facility assignment of the offender, in accordance with policies addressing Male/Female Offender Classification, Adult

Internal Management System (AIMS), and Restrictive Housing. The facility will make individual determinations about how to ensure the safety of each offender. Unit staff will use information from the PREA Risk Screen assessments to determine housing, bed, work, education, and program assignments with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually aggressive.

The case manager will meet individually in person and in a private location with offenders who identify as transgender and intersex. Offenders will be re-assessed every six (6) months to review placement and programming assignments to review any threats to safety experienced by the offender. In addition, the case manager will inquire about the offender's opportunity to shower separately from other offenders. The case manager will complete documentation in COMS under case management/ case note: case management/Subtype: Transgender review.

Policies noted above address the requirements of the provisions. Detailed information is provided on how to ensure housing, bed assignment, work and programming based on the results of the objective screening. Staff are required to use the score and make decisions based on the designation to include housing staff, work assignment supervisors and programming supervisors.

Evidence reviewed/analyzed by provision:

(a)(b) With the system for screening inmates, all housing staff, program staff and those who assign inmates to work assignments have access to the code and are aware of any needs related to a potential aggressor or potential victim. The auditor randomly questioned programming staff and housing staff who confirmed this knowledge to the auditor.

(c) Policy supports that placement at a facility will not be based exclusively on external genitalia.

(d)(e) Policy supports the requirements of this provision. Interviews with transgender inmates supported compliance.

(f) Policy supports this requirement. Interviews with transgender inmates supported compliance.

(g)The facility does not have a housing unit for housing lesbian, bisexual, transgender, or intersex inmates as determined by observations, policy and interview with the PREA Coordinator and PCM.

Summary of evidence to support findings: Policy (both previous and updated) supports the requirements of the provisions. The auditor analyzed the process for ensuring that individualized decisions are made to ensure the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive is effective but does not reveal information about each individual to make this determination. Transgender/intersex individuals are afforded individual showers if needed, and they are monitored at least every six months to assess their view on safety. Interviews all confirmed compliance. The auditor finds

the facility compliant with the standard provisions.

115.43 Protective Custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6
- Prison Rape Elimination Act 1.3.D.06 9-21-2023
- Observations of Restricted Housing (RH)
- Interview Warden
- Interviews staff who supervise RH
- Interview with inmate in RH - PC
- PAQ

The PAQ states that no offender has been placed in involuntary protective custody due to their high risk of sexual victimization. The auditor found no evidence to dispute this during the audit process.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,

Offenders at high risk for sexual victimization or alleged to have suffered sexual abuse or sexual assault will not be placed in involuntary restrictive housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the offender in involuntary restrictive housing for less than twenty-four (24) hours while completing the assessment.

The facility will document the basis for this housing determination and the reason why no alternative can be arranged. Offenders placed in restrictive housing for this purpose will 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 will document the opportunities limited, the reason for such limitations, and the duration of the limitation.

The facility may assign victim offenders to restrictive housing for investigative purpose (IP) only until an alternative means of separation from likely abusers can be arranged, and such an assignment will not ordinarily exceed a period of thirty (30) days.

If an involuntary restrictive housing assignment is made for this purpose the facility will clearly document, utilizing the IP status form, the basis for the facility's concern for the offender's safety; and the reason why no alternative means of separation can be arranged. The PREA facility compliance manager or designee will monitor the offender's removal from population and document the reason for the limitations such as restricted access to programs, privileges, education, or work opportunities and the duration of the limitations. All efforts to restore program, privileges, education, and work opportunities should be made as soon as possible, but no longer than thirty (30) days. Once the offender is removed from IP status and access to opportunities has been restored, the PREA facility compliance manager can stop the monitoring.

Offenders at high risk for sexual victimization or alleged to have suffered sexual abuse or sexual assault requiring IP housing beyond thirty (30) days will be held and reviewed in accordance with DOC Policy 1.4.A.04 - Special Management. A housing and programming plan will be developed to identify potential threats or risks to an offender's safety. Those involved in identifying housing and programming placement and/or needs include, but are not limited to, security, housing, case management, medical, behavioral health, SIU investigator, PREA facility compliance manager, warden, or designee. If an offender is transferred to another facility, the PREA facility compliance manager will ensure information is provided to the receiving facility's PREA facility compliance manager.

Evidence reviewed/analyzed by provision:

(a) (b) (c) (d) (e) Policy supports the requirements of these provisions. The PAQ indicates that Restrictive Housing has not been used to house inmates at high risk for sexual victimization on an involuntary status. The auditor interviewed one inmate who initially refused the interview, but at cell side confirmed that she was placed in this status voluntarily, related to being at high risk for sexual victimization. This status was initiated recently before the start of the onsite audit.

Summary of evidence to support findings: Policy, interview with the Warden, staff who regularly supervisor RH, and the interview with an inmate in this housing unit for protective custody all provided the auditor with sufficient evidence. The updated version of the PREA policy provides clearer direction with meeting the language and spirit of the standard. The auditor finds the facility compliant with the standard provisions.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5
- Prison Rape Elimination Act 1.3.D.06 9-21-2023
- Inmate Living Guide
- PREA Intake Information
- Interviews random staff
- Interviews random inmates
- Verification of outside reporting mechanism/ immediate and anonymous
- Staff reporting private process
- Review of investigations
- Observations

The following policy excerpts supports compliance with the requirements of this standard:

Inmate Living Guide

PRISON RAPE ELIMINATION ACT (PREA) Sexual abuse is any unwanted sexual contact from another inmate, or any sexual contact involving a staff member, even if it is consensual. Consensual sexual activity between inmates is against the rules. Sexual activity involving inmates and staff is a violation of DOC policy and state law.

Sexual abuse does not have to be a violent act. If the victim feels they would be harmed or retaliated against if they refused, then it is sexual abuse. Sexual harassment is repeated comments or gestures that are sexual nature, unwelcome sexual advances or requests for sexual acts from another. The DOC has a zero-tolerance policy relating to all forms of sexual abuse and sexual harassment, retaliation by inmates or staff for reporting sexual abuse and harassment, or staff neglect or violation of responsibilities that may have contributed to such abuse or harassment. The DOC will cooperate in the investigation and prosecution of anyone involved in committing or attempting to commit sexual abuse or sexual harassment. If you believe you are the victim of sexual abuse or sexual harassment, please report this information to any staff member as soon as possible. If you become aware another inmate may be the victim of sexual abuse or harassment, or may be at risk of victimization, it is your obligation to notify a staff member immediately. If you are not comfortable reporting sexual abuse or sexual harassment directly to a staff member, either in writing, verbally or through an anonymous note, you may report the abuse or harassment through the institutional telephone "hotline", or by contacting the South

Dakota Division of Criminal Investigation, 1302 East Hwy 14, Suite 5, Pierre, SD 57501-8505. If you choose to report the sexual abuse or harassment to a friend or family member, they may report this information directly to the DOC or Division of Criminal Investigation. The DOC will respond to all reports of sexual abuse or harassment and take steps to protect the victim. Inmates who are a victim of sexual abuse or sexual harassment have access to community victim advocate services. See DOC policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse/Harassment. Inmates who identify as transgender or intersex may contact unit staff or Behavioral Health staff to request certain accommodations permitted by policy. See DOC policy 1.4.E.13 Management of Gender Dysphoria. For more information, please refer to the "An Inmate's Guide: Sexual Abuse and Sexual Harassment Awareness" brochure available through your Unit Staff. DOC policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse/Harassment includes information about the department's commitment to comply with the Federal Prison Rape Elimination Act (PREA) standards.

INMATE HOTLINE The inmate hotline is a confidential line of communication between you and security staff. You may remain anonymous when reporting information on the hotline. Examples of information that can be reported include threats to the safety and security of the institution, assaults or fights, gang activity, major rule violations, activities involving drugs, alcohol, cell phones, weapons or other contraband, sexual abuse or harassment, excessive use of force by a staff member, escape attempts, etc. Directions for use of the hotline are posted near the telephones.

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states

Offender Reporting Methods

Offenders incarcerated in a DOC facility or contract facility may report any act of sexual assault/rape, sexual misconduct, or sexual harassment or retaliation for reporting such behavior by the following means:

Tell a DOC employee, contract worker, or volunteer.

Call the Offender Reporting Line at 0-605-367-5638 or the Offender Rape Crisis Hotline at #21 or #22 (after hours). These numbers are located on posters throughout the penitentiaries in living areas, in offender living guides, beside the phones, in the brochures, and on the offenders' tablets. These phone calls are not recorded, considered confidential, and allowing the offender to remain anonymous upon request.

Mail a letter to the PREA Coordinator at PO Box 5911, Sioux Falls, South Dakota, 57117.

Send a kite or give a note directly to any DOC employee, contract worker, or volunteer.

Request to talk to clinical services.

Send a note or letter in an envelope to the SIU investigator, unit staff, or warden

[PREA 115.51].

Offenders can report sexual abuse, sexual assault, or sexual harassment to an agency that is not part of the DOC. The outside PREA reporting agency - the Division of Criminal Investigations (DCI) will immediately forward written reports of sexual assault or sexual harassment to the IG. Offenders can remain anonymous by not identifying themselves in the letter. Correspondence addressed to this address will be treated as confidential.

Division of Criminal Investigation 1302 E Hwy 14 Suite 5

Pierre SD 57501-8505

Reports of sexual assault/rape, sexual misconduct, and sexual harassment can be made by a third-party on behalf of an offender by calling the PREA reporting line or mailing a letter to the PREA Coordinator at the address mentioned above.

Additional information on how to report sexual assault/rape, sexual misconduct, and sexual harassment is located at South Dakota Department of Corrections :: DOC (sd.gov) under the trending topics section then Prison Rape Elimination Act [PREA] link.

DOC Employee/Contract Worker/Volunteer Reporting Procedure:

DOC employees, contract workers, and volunteers will accept reports made verbally, in writing, anonymously, and from third parties and will promptly document any reports and will immediately, confidentially, and directly report to their supervisor or the shift commander (report "directly" means the reporting person must speak directly to the supervisor or shift commander via radio, telephone, or in person).

If a DOC employee, contract worker, or volunteer believes they cannot go through their normal facility protocol to make a report, DOC provides a private reporting phone line at (605) 367- 4496 or 605-369-5561.

As illustrated, the Inmate Living Guide and policy provide inmates with detailed direction on how to report with multiple methods to include private, verbally, anonymously, in writing, and third party. It includes the method to report to an outside agency and remain anonymous. It requires that reports made verbally, in writing, anonymously, and from third parties be accepted by all staff. Information for staff to report privately is included.

Evidence reviewed/analyzed by provision:

(a) Inmates are provided with information on how to report through numerous avenues. Posters near the phone articulate that they can call Crime Stoppers (free call), Missouri Shores domestic violence Center, pamphlets received at intake indicate they can tell any staff call Crime Stoppers, call or write the local Rape Crisis Center and/or write or call family or friend. Review of the investigations revealed that one report was received anonymously and third party, one was received through the hotline (Missouri Shores) they others were written allegations or verbally made to

	<p>staff. The interview with the inmates confirmed that they could report to any staff, verbally and in writing and most (27 out of 29) indicated they knew they could report on behalf of another inmate.</p> <p>(b) There is an established MOU with Missouri Shores Domestic Violence Center. It confirms that this organization will provide a phone number that is available 24/7 for confidential report of any sexual abuse or sexual harassment of offenders and that they will immediately report back to the facility any allegations received and allow the offender to remain anonymous. Additionally, the agency provides information on posters by phone in which they can call Crime Stoppers.</p> <p>(c) Policy, training, all staff interviews and review of the investigations provided evidence that staff are aware they are to report immediately any allegations, information, or suspicions immediately to the OIC and then provide a written follow up report.</p> <p>(d) Staff interviewed struggle to articulate that they were aware of phone numbers available to them to report privately. This is addressed in training, but the auditor could not find the specific information in policy. It is considered not compliant at this time. The auditor is suggesting that the phone number be added to the individual response cards issued to staff. Update: Staff were issued an updated Response card that addresses the coordinated response plan, reporting to include immediate, written verbal, third-party and anonymous, phone number for how to report anonymously (for both staff and inmates).</p> <p>Summary of evidence to support findings: Policy (updated) supports the requirements of the provisions. Inmates are provided information through the handbook (on the tablets issued daily) and with posters viewed throughout the facility, typically located by the phones with other relevant communication. Inmate interviews and review of the investigations supported that they are informed and aware of how to report any concerns with sexual abuse or sexual harassment. The updated Response cards provide staff with a quick reference should they wish to report concerns anonymously which is private. The auditor finds there is sufficient evidence to support a finding of compliance.</p>
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Grievance for Offenders 1.3.E.2

- Grievance Form
- Interview Warden
- Interview with Grievance Coordinator
- PAQ

The PAQ provided the following information:

Three grievances regarding sexual abuse

Two grievances alleging sexual abuse that reached final decision in 90 days

One grievance alleging sexual abuse that involved extensions (documentation provided)

Zero grievances that took longer than a 70-day extension to resolve

Zero grievances alleging sexual abuse files by inmates in which the inmate declined third-party assistance

Zero emergency grievances alleging imminent risk of sexual abuse

Zero grievances alleging sexual abuse written in bad faith resulting in disciplinary action

The following policy excerpts supports compliance with the requirements of this standard:

Grievance for Offenders 1.3.E.2, Offenders may not request or submit a grievance on behalf of another offender, unless the request is for the following: 1. Information provided in the grievance supports an offender may be the victim of an incident of sexual abuse or sexual harassment. The information/grievance will be referred to the sexual abuse/harassment investigative grievance procedure. a. The offender who is the alleged victim must provide a written statement or agreement accepting or declining to have the request proceed. If the offender declines to have the request processed on his or her behalf, the agency shall document the offender's decision. b. The alleged victim is responsible for ensuring any subsequent steps or requirements to move the request forward are completed as directed. If a third-party files such a request on behalf of an offender, 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. 2. Information provided supports an offender may be at substantial risk of imminent sexual abuse. Such information/request will be forwarded to the shift commander for response. The information/request will be referred to the sexual abuse/sexual harassment investigative grievance process. 3. All information/requests for grievance indicating another offender may be at risk of serious harm or injury, including but not limited to self-harm, suicide, assault, or victim of excessive force by staff. The information/request will be forwarded to the shift commander for response and action. Staff will respond

to the request promptly. 4. Offenders may not have other offenders sign a grievance as a form of petition complaint.

Emergency Grievances and Issues: A. Offenders who believe their grievance or issue is an emergency must contact a staff member directly, either through written correspondence (kite or completed Request for Informal Resolution form marked "Emergency" or "Urgent") or verbally. The request may be submitted to unit staff, Officer in Charge (OIC), or staff of equal or higher rank. Staff receiving the grievance will determine if compelling circumstances exist, based on the information provided and known at the time, which support an immediate response/action. 1. If staff determines the grievance or issue does not require immediate response/action, the offender will be directed to the normal grievance process. 2. If staff determines the grievance or issue requires immediate response/action, the staff member will promptly address the grievance or issue. If the staff member does not have the authority or ability to respond or take action, they will forward the request without substantive review to the appropriate staff person. 3. The offender will be notified of the response/resolution by the staff person responsible for disposition of the request, either in writing or verbally. This will be considered an informal response. If the offender is not satisfied with the response, they may submit a Step II grievance. B. Emergency grievances or issues that require prompt action. 1. While not intended to be an inclusive list, examples of an emergency grievance or issue include: a. Medical or mental health issues that require immediate attention or accommodation to avoid substantial risk of personal injury or serious irreparable harm. b. Requests for protective custody or separation. c. Information supporting possible imminent threat to safety or security. d. Information pertaining to or describing incidents of sexual abuse, sexual harassment, self-harm, suicide, assault, or excessive force by staff. e. Information alleging or supporting an offender, staff member, or other may be at risk of personal injury or other serious irreparable harm. f. Issues that are determined by staff to be time sensitive and that require a prompt response, such as impending discharge dates, special visits, court dates, etc.

The investigation procedures, conclusion, outcome, or staff response pertaining to the offender's allegation of sexual abuse or sexual harassment. 1. There is no time limit for an offender to file a grievance regarding the investigation procedures, conclusion, outcome of the investigation, or staff response to the offender's allegation of sexual abuse or sexual harassment. The agency shall not impose a time limit on when an offender may submit a grievance regarding an allegation of sexual abuse. 2. Reports or grievances involving sexual abuse or sexual harassment will be forwarded to the Special Investigative Unit (SIU) staff for investigation. A copy of the report should be sent to the facility PREA Coordinator. 3. An offender's grievance regarding the investigation procedures, conclusion, outcome of the investigation, or staff response to an allegation of sexual abuse or sexual harassment, is NOT subject to informal resolution and shall be forwarded to the appropriate investigate authority (directly to the formal resolution (Step 2). The agency shall not require an offender to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse). 4. The offender can submit the Request for Administrative Remedy/Grievance form to a staff member who is not the subject of

the sexual abuse or harassment allegation. An offender who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint. a. The grievance will not be referred to, investigated, or formally responded to by a staff member who is the subject of the sexual abuse grievance. Such grievance is not referred to a staff member who is the subject of the complaint).

Requests for informal resolution may be initiated by speaking with a staff member about the grievance and accepting the resolution offered by the staff member, or in writing, via a kite or completed Informal Resolution Request form (See Attachment 1), which must be directed to a staff member. Grievances that involve the following DO NOT require the offender to seek informal resolution: 1. If the issue or grievance involves the alleged sexual abuse or sexual harassment of an offender, the offender bringing forth the grievance may be directed to the sexual abuse/harassment grievance process for action and formal response. 2. Grievances involving the investigation procedures, conclusion of the investigation, or staff response to an allegation of sexual abuse or sexual harassment, are not required to go through Informal Resolution process and are not subject any time limit restricting when the grievance can be filed. The agency shall not impose a time limit on when an offender may submit a grievance regarding an allegation of sexual abuse, and the agency shall not require an offender to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.

Grievance policy updated additionally states, The process for all PREA related grievances will NOT exceed seventy (70) days. 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.

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, Upon receiving an emergency grievance alleging imminent/substantial risk of sexual abuse, the staff member in receipt of the grievance will immediately forward the grievance to the PREA facility compliance manager for review and have an initial response with 48 hours and will issue a final agency decision within 5 calendar days in compliance with 1.3.E.2 - Grievance for Offenders.

Reports of sexual assault/rape, sexual misconduct, and sexual harassment made in good faith based upon a reasonable belief that the alleged conduct occurred will not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Evidence reviewed/analyzed by provision: The auditor reviewed the grievances noted in the PAQ. They were grievances regarding the investigation of sexual harassment, not grievances alleging sexual abuse.

- (a) This agency is not exempt from this standard.*
- (b) Policies noted above supports compliance with this provision.*
- (c) The auditor concludes that the policies supports this provision.*

	<p>(d) Policies address this provision requirement in that responses will be completed within 70 days, not 90. An extension of 70 days can be requested if notifying the inmate in writing of the extension.</p> <p>(e) Although the policy does address third party grievances by another inmate, it does not address the following as required in the provision: (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 file 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. The policy was updated and now includes these requirements.</p> <p>(f) Policy addresses the requirements of this provision specific to emergency grievances alleging imminent sexual abuse.</p> <p>(g) The updated PREA policy addresses this requirement.</p> <p>Summary of evidence to support findings: Policies(updated) supports the requirements of the provisions of the standard. Grievances alleging sexual harassment were referred for appropriate investigation demonstrating that these will be processed by immediate referral for investigation. The auditor finds there is sufficient evidence to support a finding of compliance.</p>
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Inmate Access to Telephones and Tablets 1.5.D.4 · Offender Correspondence 1.5.D.3 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · MOU with Missouri Shores · Interview with Missouri Shores Director

- Observations - PREA Postings phone number and address
- Interviews random offenders
- Review of access to mail and telephones
- Receipt of correspondence marked “Legal mail” from an inmate.

The following policy excerpts supports compliance with the requirements of this standard:

Offender Correspondence 1.5.D.3 defines the following:

Incoming and outgoing correspondence from the following sources is considered privileged/legal: 16. Organizations or entities which are known to provide rape crisis/victim advocate services (such as Compass Center, Missouri Shores, Working Against Violence, and River City Domestic Violence Center).

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, Offenders shall have access to outside victim advocates. Offenders will be provided mailing addresses and telephone numbers (including toll-free hotline numbers, where available) of local, state, or national victim advocacy or rape crisis organizations.

Correspondence with a Victim Advocate/Rape Crisis Center is privileged. Offenders are allowed privileged telephone calls with Victim Advocate/Rape Crisis Centers Calls from the offender telephones or tablets will not be monitored and/or recorded for content. Messages sent from offender tablets are not confidential and subject to reading by staff (See DOC policies 1.5.D.04 - Offender Access to Telephones and Tablets and 1.5.D.03 - Offender Correspondence).

Victim Services

The facility will provide offenders with access to outside victim advocates for emotional support services through the following:

The contact information for statewide, national, and local rape crisis centers, is available through the PREA facility compliance manager and/or offender tablet.

Offenders can contact the rape crisis hotline at #21 (or #22 after hours). Offenders will be advised these calls are free, confidential, anonymous, and are not recorded or monitored. The rape crisis advocates are mandatory reporters and are required to report threats of suicide or homicide and reports of child abuse to the DOC or appropriate agency.

Policies confirm that access to Victim Advocates/Rape crisis counselors is available via mail and phone. Mail is considered “privilege”, and the phone is not monitored or recorded.

Evidence reviewed/analyzed by provision:

(a) (b) The facility provides emotional support services through an organization called

	<p>Missouri Shores. Inmates are informed of how to access this support by providing telephone number and mailing address via posters located by the phones, observed during the audit and confirmed by inmate interviews. The poster indicates that the call and mail is free and is considered privileged legal correspondence, privileged phone call which is supported by policy. Further evidence of this occurred when the auditor received a letter from an inmate post audit which was marked legal mail. The interviews with the inmates confirmed the following: eight had no idea these services exist, four really knew the details of the service, seventeen knew of the service, knew there was information by the phone or on a poster but did not any other details.</p> <p>(c)There is an established MOU with Missouri Shores Domestic Violence Center. It confirms that this organization will provide a phone number that is available 24/7 for confidential report of any sexual abuse or sexual harassment of offenders and that they will immediately report back to the facility any allegations received and allow the offender to remain anonymous. The agency will provide victim advocates who can enter the facility and provide emotional support service in person, and they will provide emotional support on the phone or through correspondence. The MOU supports that the phone call is confidential, and it supports that both entities will protect personally identifiable information gathered from offenders and follow the confidentiality and mandatory reporting laws and rules for their respective agencies and programs. A telephone interview was conducted with the Director. She confirmed that the MOU dated March 2013 is still in effect. She confirmed that her staff are qualified by taking a 40-hour course offered through the Office for Victims of Crime (OVC) in this state. Confidentiality is addressed when a call is received. She indicated approximately one to two times a year they receive correspondence.</p> <p>Summary of evidence to support findings: Policies (both previous and updated) support the requirements of the provisions. The mail and telephone policies support that communication to the rape crisis/victim advocate is considered privileged. The MOU confirms services are provided. The interview with the Director for Missouri Shores confirmed that the services are provided, and the MOU is in effect; staff (victim advocates) are qualified. Inmate interviews mostly knew of the services. The auditor finds the facility compliant with the standard provisions.</p>
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Interview with the PREA Coordinator

- Observations
- Agency website
- A Family and Friends Guide Sexual Abuse Sexual Harassment Awareness on the website, located visitor lobby
- Interview with the Warden
- Interview with the PREA Coordinator
- Random staff interviews
- Testing of third-party reporting
- FAQ

The following policy excerpts demonstrate compliance with the provisions of the standards.

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, *The DOC website includes information about how a third-party may report incidents of sexual assault/rape, sexual misconduct, and sexual harassment involving an offender and/or on behalf of an offender within a DOC facility: <http://doc.sd.gov> or email DOC.ADULTPREA@state.sd.us, or write DOC-Adult Division PREA Coordinator PO Box 5911 Sioux Falls, SD 57117 or call 605- 367-4496.*

The agency website has the following information:

To report an incident of sexual abuse or harassment of an inmate or juvenile offender, the public may use the following contact information:

DOC-Adult Division
 PREA COORDINATOR
 PO Box 5911
 Sioux Falls, SD 57117
 (605) 367-4496
DOC.ADULTPREA@state.sd.us

A Family and Friends Guide Sexual Abuse Sexual Harassment Awareness on the website provides the following:

Response to reports of sexual abuse

Relief from retaliation

Contact numbers for the institutions

Crisis Centers contact information

Zero tolerance

	<p>How you can help</p> <p>Review of the PREA law</p> <p>The auditor tested the phone number located on the website and reached a person who could take a complaint and also sent an email and received a timely response.</p> <p>Summary of evidence to support findings: Policy (both previous and updated), review of the website, review of the Friends and Family information and testing of the reporting information posted provided the auditor with sufficient evidence to find the facility compliant with the standard provisions.</p>
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6 · Staff Reporting Abuse or Neglect 1.1.C.3 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Sexual Incident Protocol and Reference Book updated · Interview with the PREA Coordinator · Sexual Abuse Response Cards (pocket size), issued to staff · Interview with investigators · Observations · Interviews random staff · Facility information to offenders · Training curriculum · Interview with medical and mental health professionals · Specialized medical mental health training · Mandatory reporting laws

The following policy excerpts supports compliance with the requirements of this standard:

Staff Reporting Abuse or Neglect 1.1.C.3 defines and requires staff to report any instances of abuse or suspected abuse (emotional, psychological, or physical), neglect, or exploitation of a child, and elder, or adult with a disability, in accordance with the requirements of the policy and state law.

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,

A Release of Information form from clinical services signed by the offender may be required prior to release or request of confidential information about the about the offender which may be requested from outside sources. Clinical services will inform offenders of the practitioner's duty to report, and the limitations of confidentiality and management decisions.

Any DOC Employee/Contract Worker/Volunteer with knowledge, suspicion, or information (including third party and anonymous kites, letters, and reports), regarding incidents of sexual assault/rape, sexual misconduct, and sexual harassment in a correctional setting, (including DOC prisons, private prisons, and community confinement facilities); incidents of retaliation against offenders or DOC employees, contract workers, or volunteers who reported such incidents; and staff neglect or violation of responsibilities that may have contributed to an incident or retaliation who willfully fails to report shall be subject to disciplinary action.

If a DOC employee, contract worker, or volunteer believes they cannot go through their normal facility protocol to make a report, DOC provides a private reporting phone line at (605) 367- 4496 or 605-369-5561.

The shift commander or OIC will notify the Duty Officer, the PREA facility compliance manager, and the SIU investigator of all allegations of sexual assault/rape and harassment by phone call and email. A detailed report should be completed pursuant to policy, a written informational and a copy of this report sent to the PREA coordinator by email from the PREA facility compliance manager.

DOC employees, contract workers, and volunteers will not reveal any information related to a sexual assault/rape, sexual misconduct, or sexual harassment report to anyone other than to supervisors, investigators, and designated officials. Such information will be limited to information necessary to make treatment, investigation, and other security and management decisions.

If the alleged victim is under the age of eighteen (18) or considered a vulnerable adult in accordance with SDCL 22-22-7.6: Sexual acts between jail or juvenile correctional facility employees and detainees-- Felony, the DOC will report the allegation to the designated state or local services agency under applicable mandatory reporting laws.

Evidence reviewed/analyzed by provision:

(a) All random staff interviews confirmed their knowledge to report 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. They articulated that they would report immediately verbally and then submit a written report.

(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 to make treatment, investigation, and other security and management decisions. Policy supports this requirement. Staff interview responses provided the auditor with assurances that staff are aware of the need to maintain confidentiality. This is reinforced in the Sexual Incident Protocol and Reference Book (updated) which states, DOC employees, contract workers, and volunteers will not reveal any information related to a sexual assault/rape, sexual misconduct, or sexual harassment report to anyone other than to supervisors, investigators, and designated officials. Such information will be limited to information necessary to make treatment, investigation, and other security and management decisions.

(c) Medical and mental health staff recently became Department of Corrections employees (formerly contractual or worked for another state agency within the prison). Interviews with both medical and mental health staff confirmed they are aware of the requirement to report any knowledge of sexual abuse. Policy supports this requirement.

(d) Review of the state law in South Dakota confirmed to the auditor that inmates can be deemed vulnerable adults. Policy supports the fact that a report to the appropriate state agency is required.

(e) Policy supports the requirements of this provision. The OIC checklist supports that all allegations will be reported to the investigators. The auditor asked the investigators if they became aware of any allegations that were not reported to them, they indicated no.

Summary of evidence to support the findings: Policy, Sexual Incident Protocol and Reference Book updated versions reinforce the requirements of this standard. Employee response cards have been updated. It now includes additional information to reinforce immediate staff response, to include written, verbal and third-party and anonymous allegations received and a phone number to report privately. The auditor finds there is sufficient evidence to support a finding of compliance with the requirements of this standard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Observations · Interviews Secretary of Corrections · Interview Warden · Interview random staff · PAQ <p>The PAQ indicates there have been no times the facility determined that an offender was at risk of imminent sexual abuse. The auditor found no reason to dispute this during the audit process.</p> <p>The following policy excerpts demonstrate compliance with the provisions of the standards.</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, <i>If any employee, contract worker or volunteer learns that an offender is subject to a substantial risk of imminent sexual abuse, that person will take immediate action to protect the offender.</i></p> <p>The interview with the Secretary of Corrections and the Warden confirmed that an inmate at imminent risk of sexual abuse or any imminent risk of harm shall have immediate action taken to ensure his safety. All staff interviews confirmed to the auditor that they would take immediate action if they believed an offender was at imminent risk of sexual abuse. Staff confirmed that this request to intervene before something has occurred would be supported, and action would be taken to protect the offender before the suspected event occurred.</p> <p>Summary of evidence to support findings: Based on information noted above (policy, interviews) and overall observations during the audit, the auditor found staff credible and that protecting inmates is an integral part of the culture of this facility. The auditor finds the facility compliant with the standard provisions.</p>
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5
- Prison Rape Elimination Act 1.3.D.06 9-21-2023
- Interview with Secretary of Corrections
- Interview with the Warden
- Review of notifications
- PAQ

The PAQ indicates that one allegation was received that an offender was abused while confined at another facility, one allegation of sexual abuse was received from another facility. Review of the notifications confirmed that the PAQ should reflect two allegations received that an inmate was abused while confined at another facility, zero received.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, Upon receiving an allegation that an offender was sexually assaulted or sexually abused while confined at another facility, the warden will notify the warden of the facility or appropriate office where the alleged sexual assault or sexual abuse occurred. Such notification will be provided as soon as possible, but no later than seventy-two (72) hours after receiving the allegation. Agency to agency referral (see attachment #9 - Reporting to Other Confinement Facilities) will be completed and placed with the written report that will be generated by SIU investigator and a copy will be sent to the PREA facility compliance manager and PREA coordinator. The warden that receives any such notification will ensure that the allegation is investigated.

Evidence reviewed/analyzed by provision:

(a), (b) (c) (d) The interview with the Secretary of Corrections and the Warden confirmed understanding and compliance with this requirement. As this is the only facility that houses females the auditor found the low numbers on the PAQ to be credible. Information received regarding this requirement was unclear as one example did not make it evidence that the report was provided within the 72 hours requirement. An updated form was developed and included in policy which would ensure that documentation will reflect that the notification was made within 72 hours of the report being received.

Summary of evidence to support findings: The policy was updated to reflect that the Warden will provide verification of the notification, timeline of the allegation and the notification, and who the notification was sent to and is included as an attachment in the updated policy. Therefore, the auditor finds the agency compliant with the provisions of the standard.

115.64 Staff first responder duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5
- PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6
- Prison Rape Elimination Act 1.3.D.06 9-21-2023
- PREA Response OIC Checklist
- Sexual Incident Protocol and Reference Book updated
- PREA First Responders Card
- Training curriculum
- Observations
- Random staff interviews
- PAQ

The PAQ indicates there were thirty-six (36) allegations of sexual abuse;

Thirty-six times the first security staff member responded separated the alleged victim and abuser;

Zero times that allowed for the collection of physical evidence.

The auditor found no reason to dispute this during the audit process.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 states, Immediate Response Procedures:

Each facility, including contracted facilities, must use the checklist, to develop a written PREA facility response plan. The facility specific PREA response plan will coordinate actions among first responders, clinical staff, SIU investigator or local law enforcement, facility leadership, victim rights, and advocacy in response to an incident of sexual assault or sexual activity.

Appropriate security procedures will include, at a minimum:

Separate the perpetrator and victim.

Preserve and protect the crime scene, isolate, and cordon off the crime scene until appropriate steps can be taken to collect any evidence or receiving further direction from the SIU investigator.

First responding staff will instruct the suspect and request the victim within a time period that still allows for collection of physical evidence not to shower, wash, brush their teeth, urinate, defecate, eat, drink, and change clothing or anything else that might destroy evidence.

The first responding staff will notify the OIC who will follow their PREA Response Facility Checklist to determine if there is a victim of sexual abuse and complete a Major Incident Report and the PREA Response Facility Checklist.

Secure perpetrator, under supervision, in a holding cell, and ensure the perpetrator is not allowed to wash, shower, brush their teeth, urinate, defecate, eat, drink, change clothes, or anything else that might destroy evidence. Assign an employee to secure the perpetrator, if necessary.

Evidence reviewed/analyzed by provision:

(a)(b) All staff interviews confidently confirmed they will report any information, allegations or suspicions to the OIC. With prompting, staff could indicate they would ask the victim and ensure the perpetrator preserves evidence by asking them not to shower, etc. All staff had a Response Card readily available, but it does not include this information. It instructs staff on the following: 1. Immediately report to the OIC, 2. Assess victim's needs for life-threatening or serious injury, 3. Address safety needs of victims and others on the scene, separate the alleged victim and abuser, 4. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, 5. Seek basic information from victims about the abuse in order to identify the abuse and facilitate crime scene preservation. 6 Make sure to separate the victim and the abuser. Make sure this is sight and sound separation.

The OIC does prompt information about separation but does not include this information, nor whether a SANE exam might be warranted. The investigator database does address if there was injury but not if a SANE was warranted or an advocate contacted.

Summary of evidence to support findings: The auditor finds the facility was not compliant with the standard provisions. Policies, training and the Sexual Incident Protocol and Reference Book and Response cards do not include:(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. Update: Policy, a Response Plan and training have all been updated. Training was provided to thirty-eight key staff. It clarifies how line staff are to respond and the checklist developed ensures the victim

	<p>is asked not to wash, shower, brush their teeth, urinate, defecate, eat, drink, change clothes, or anything else that might destroy evidence and they perpetrator is secured to ensure they cannot wash, shower, brush their teeth, urinate, defecate, eat, drink, change clothes, or anything else that might destroy evidence. Staff have been issued new Response Cards. They include reporting sexual abuse immediately. It includes instructions to separate the perpetrator and victim, preserve and protect the crime scene, instruct the suspect, request the victim not to shower, brush their teeth, use bathroom, eat, drink, or change clothing and notify the OIC immediately. With the updates and actions regarding training, the auditor finds the facility is compliance with the requirements of the standard.</p>
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115.65	Coordinated response
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Sexual Incident Protocol and Reference Book (41 pages) · Sexual Abuse Response Checklist · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Random staff interviews · Interview Warden · Interview with the OIC · Observation of the Response Plan <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Sexual Incident Protocol and Reference Book, updated, contains the following:</p> <p>Goals</p> <p>Definitions</p> <p>Coordinated Team approach</p> <p>Evidence and Documentation</p> <p>Transportation Review and SANE Preparation</p> <p>SANE</p>

Documentation and evidence overview

Facility specific requirements

Each section provides detailed information regarding the topics noted. Instructions regarding the Sexual Abuse check list are provided for each step o the checklist.

Prison Rape Elimination Act 1.3.D.06 9-21-2023 states, Immediate Response Procedures:

Each facility, including contracted facilities, must use the checklist, to develop a written PREA facility response plan. The facility specific PREA response plan will coordinate actions among first responders, clinical staff, SIU investigator or local law enforcement, facility leadership, victim rights, and advocacy in response to an incident of sexual assault or sexual activity.

Appropriate security procedures will include, at a minimum:

Separate the perpetrator and victim.

Preserve and protect the crime scene, isolate, and cordon off the crime scene until appropriate steps can be taken to collect any evidence or receiving further direction from the SIU investigator.

First responding staff will instruct the suspect and request the victim within a time period that still allows for collection of physical evidence not to shower, wash, brush their teeth, urinate, defecate, eat, drink, and change clothing or anything else that might destroy evidence.

The first responding staff will notify the OIC who will follow their PREA Response Facility Checklist to determine if there is a victim of sexual abuse and complete a Major Incident Report and the PREA Response Facility Checklist. The Major Incident Report and the PREA Response Facility Checklist will be emailed to the PREA facility compliance manager using the facility's email distribution group for reporting PREA incidents. The PREA facility compliance manager will load the information from these two documents into the COMS Reportable incident section and give SIU Investigator the reportable incident number.

The OIC will conduct threshold questioning and then contact the SIU investigator following facility protocol if there is an alleged victim. The OIC will relay information to the SIU investigator describing the sexual activity or behavior. The OIC will email SIU investigator and the PREA facility compliance manager the PREA Response Facility Checklist. The SIU investigator will direct the OIC on what actions, to take, if any.

A SIU investigator will immediately respond if there is any reasonable suspicion that a sexual assault or sexual activity has occurred. It is the responsibility of the SIU investigator to determine whether a victim is transported for a forensic medical exam.

The OIC will notify medical and behavioral health supervisors. If no qualified clinical services staff are on duty at the time a report of sexual assault is made, security staff/first responders will take preliminary steps to protect the victim and will immediately notify the appropriate medical administrator or designee and the on-call behavioral health clinician for immediate response.

Transport the victim to clinical services for a cursory medical assessment, who will contact the local emergency department if a sexual assault nurse examiner (SANE) exam is necessary.

Secure perpetrator, under supervision, in a holding cell, and ensure the perpetrator is not allowed to wash, shower, brush their teeth, urinate, defecate, eat, drink, change clothes, or anything else that might destroy evidence. Assign an employee to secure the perpetrator, if necessary.

Under the instruction of the SIU investigator, a qualified PREA first responder will collect trace evidence at the facility. This will be conducted prior to transport for a SANE exam as instructed by the SIU investigator.

The SIU investigator is required to conduct a follow-up interview with both offenders the next day following the incident. The offenders will be kept separate until the SIU investigator conducts interviews.

Delayed Reporting Response Procedures.

When anonymous information (kite or letter) regarding sexual abuse is received, the OIC will conduct threshold questioning. The OIC will be immediately notified if the on-call SIU staff determine there is a reasonable suspicion of sexual abuse of any type.

If, through observation or credible information, the OIC has determined that offenders have engaged in non-coerced or non-forced sexual misconduct; it may not be treated as a sexual assault or sexual abuse. The crime scene will remain secured until released by an SIU investigator.

During the investigation or at any point thereafter, if an offender reports being forced or coerced, protocols for sexual assault will be taken immediately.

The policy addresses the requirement of the standard, providing specific responsibility for notifications and additionally the use of a PREA Response Facility Checklist.

Summary of evidence to support findings: Although the response plan includes the required information, it is not effective. See comments to 116.64. Suggestions are to determine who is to interview the witnesses, should probably be the OIC or who he/she delegates this to. It is unclear if the investigator response is immediate or not. The auditor finds the facility is not compliant with the standard provisions. Update: Policy has been updated and includes the Coordinated Response Plan. First Responders have attended training in Responding to Sexual Assault. The 70-page PowerPoint presentation addressed the following: Definitions, the Role of the Sexual Assault Nurse Examiner (SANE), process of the medical forensic exam and evidence collections in hospitals, who is a first responder (lieutenant and above), scene

	<p>commander, notification to the Inspector General, evidence collection and DOC investigation, role of DOC healthcare, mental involvement, collaborative response, victim's rights, and psychological stages of the impact of the rape. Additionally, the Sexual Incident Protocol and Reference Book has been updated and provides staff with detailed information on how to address each step of the Coordinated Response Plan. The auditor finds these updates to be clear and effective information on the response steps to be taken.</p>
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<p>115.66</p>	<p>Preservation of ability to protect inmates from contact with abusers</p>
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · Interview Secretary of Corrections · Interview with the Warden · Observations · PAQ <p>The PAQ indicates that the facility has not entered into a collective bargaining on the agency's behalf.</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,</p> <p><i>The DOC will not enter into any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with offenders pending the outcome of an investigation or a determination of whether and to what extent discipline is warranted.</i></p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a)(b) The interview with the Secretary of Corrections confirmed that she has no restrictions from removing a potential abuser from assignment pending an investigation. There is no union. This was supported by informal interviews during the onsite audit. Review of one investigation did support the removal of an alleged abuser pending the outcome of the investigation.</p> <p>Summary of evidence to support findings: Policy, the interview with the Secretary of Corrections, Warden, the PAQ and observations provided the auditor with sufficient evidence to support that the facility/agency is not restricted from removing alleged staff sexual abusers from contact with any offenders pending the outcome of an investigation or of a determination of whether and to what extent discipline is</p>

warranted. The auditor finds the facility compliant with the standard provisions.

115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6
- PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5
- Prison Rape Elimination Act 1.3.D.06 9-21-2023/Attachment 5
- Interviews Secretary of Corrections
- Interview Warden
- Interview with designated staff members charged with monitoring for retaliation
- Documentation of retaliation monitoring
- Interview with inmates who reported abuse
- Investigation data base
- PAQ

The PAQ indicates that the length of time that the agency/facility monitors the conduct or treatment is 90 days. There were no reported incidents of retaliation occurred. The auditor found no reason to dispute this during the audit process.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,

The DOC has zero tolerance for retaliation or acts of intimidation. Offenders, employees, contract workers, and volunteers have the right to be free from retaliation from reporting sexual assault/rape, sexual misconduct, and sexual harassment and for cooperating with investigations. The PREA facility compliance manager will initiate retaliation monitoring, when the allegation is reported, on offenders who report sexual abuse or cooperate with an investigation of sexual abuse. The PREA facility compliance manager will monitor for any disciplinary reports, housing changes, program changes, grievances filed, classification changes, and

negative offender case notes. Periodic in person status checks for offenders will be completed by the PREA facility compliance manager. For employees, contractors, and volunteers who report sexual abuse, retaliation monitoring will be completed by the PREA facility compliance manager or PREA coordinator and will include monitoring for any negative performance reviews or reassignments. Retaliation monitoring will last for at least ninety (90) days but may continue past ninety (90) days if the initial monitoring indicates a continuing need. Any retaliation against individuals because of their involvement in the reporting or investigation will be reported to the inspector general (IG) and a copy sent to the PREA coordinator. If a case is determined to be unfounded the retaliation monitoring will be stopped (see attachment #5 - Retaliation Monitoring).

Policy mirrors the requirements of the standard, assigning responsibility for the monitoring to the PCM.

Evidence reviewed/analyzed by provision:

(a) (b) The agency has 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. Policy does dictate who is responsible for monitoring but indicates it starts at the completion of the investigation, not at the time of the report. The two policies noted above are conflicting.

(c) Monitoring is for 90 days and longer if deemed necessary. The agency has developed a Retaliation Status Checklist. As policy indicates, it too addresses that the form is to start after the investigation if deemed substantiated or unsubstantiated.

There is evidence that the investigator does review for retaliation, but it appears to be a question to the alleged victim and is recorded in the investigation database. Thirty-, sixty- and ninety-day status checks are noted. They appear to be conducted on exactly thirty, sixty and ninety days. Questions are asked such as issues with inmates or staff related to the incident, currently feel safe where housed, review of disciplinary reports, housing assignments and program changes, and if the victim was provided information on how to access help for emotional support. A section for summary of this status is available for each check. A review of the need for additional time is assessed.

(d) Monitoring does include status checks every thirty (30) days, but of all the forms reviewed, they were all dated every thirty days. It is recommended that this be a guide not an absolute requirement or reflect so accurately if it was not the date noted.

(e) Review of the retaliation monitoring and investigations did not reveal any need to monitor any other person. Policy does support this will occur if needed as did the interview with the staff who monitors for retaliation.

(f) Policy does not address that their obligation to monitor shall terminate if the agency determines that the allegation is unfounded.

Summary of evidence to support the findings: The auditor finds the facility not

	<p>compliant with the standard provisions. There appears to be a gap between when the investigator inquiries about retaliation and when the formal retaliation monitoring starts. Policy and the form need to be changed to better reflect compliance with the standard starting the monitoring at the time of the report. Additionally, some monitoring forms did not appear to be complete, and the periodic contact is due on the 30th day. This should be an ongoing process and encourage regular check-ins but not exactly on the 30th day to better ensure this is an effective process, not a routine task. Update: Policy and the form were revised to better ensure a more effective process, intermittent periodic reviews and that it meets the requirement of starting the monitoring at the time of the report.</p>
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115.68	Post-allegation protective custody
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Interview Secretary of Corrections · Interview staff who supervise restrictive housing · PAQ <p>The PAQ indicates there has been no incident where inmates who suffered sexual abuse were held in involuntary segregated housing in the past twelve months. The auditor found no reason to dispute this during the audit process.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, Offenders at high risk for sexual victimization or alleged to have suffered sexual abuse or sexual assault will not be placed in involuntary restrictive housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the offender in involuntary restrictive housing for less than twenty-four (24) hours while completing the assessment.</p> <p>Summary of evidence to support findings: See comments to §115.43. Policy, the interview with the Secretary of Corrections and staff who supervisor Restricted Housing regularly in the previous twelve months all provided confirmation that</p>

	<p>placement in involuntary protection has not occurred, but if circumstances warranted, the provisions of the standard, as illustrated in §115.43 would be met, in accordance with policy. The auditor finds the facility compliant with the standard provisions.</p>
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115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6 · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Sexual Incident Protocol and Reference Book updated · Observations · Interview with investigators · Interview with the Warden · Interview with the PREA Coordinator · Interview with offenders who reported sexual abuse · PAQ <p>PAQ indicates two substantiated allegations of conduct that appeared criminal were referred for prosecution since the last PREA audit.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,</p> <p><i>SIU will ensure that a criminal investigation is completed for all allegations of sexual abuse and sexual assault/rape and will ensure that for all cases alleging criminal behaviors are referred for investigation to an agency with the legal authority to conduct criminal investigations. SIU investigators will document all such referrals in the COMS reportable incident reporting system. When outside agencies conduct investigations, the facility will cooperate with outside investigators and will endeavor to remain informed about the progress of the investigation.</i></p> <p><i>Criminal investigations will be documented in a written report containing a thorough</i></p>

description of physical, testimonial, and documentary evidence with copies of all documentary evidence attached where feasible SIU will document such investigations from DCI in reportable incidents in COMS.

The SIU investigator will provide an Offender PREA brochure to victims of sexual assault or sexual harassment and victims of retaliation related to the reporting of such behavior. The SIU investigator will explain the right(s) the offender has concerning the investigation and prosecution.

The credibility of an alleged victim, suspect, or witness will be assessed on an individual basis and will not be determined by the person's status as offender or staff. DOC will not require an offender who alleges an act of sexual assault/rape, or sexual harassment to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

Substantiated allegations of conduct that appear to be criminal will be referred for prosecution. For each allegation of sexual assault, sexual abuse, or sexual harassment, the PREA coordinator, PREA facility compliance manager, SIU investigator, or appointing authority will determine whether the allegation is:

Substantiated: The allegation was determined to have occurred.

Unsubstantiated: Evidence was insufficient to make a final determination that the allegation was true or false; or

Unfounded: The allegation was determined not to have occurred.

After completing an investigation of sexual abuse, sexual assault, or retaliation for reporting such behavior in a correctional setting that was substantiated, SIU or the outside agency DCI investigator will submit the findings to the Office of the Attorney General for prosecution.

The departure of the suspect or victim from the employment or control of the facility or agency will not provide a basis for terminating an investigation.

Evidence reviewed/analyzed by provision:

(a) The agency is moving towards conducting all of its own investigations. At the time of the audit, the Department of Criminal Investigation (DCI), the state police agency, would receive referrals for investigations deemed criminal. The agency has developed a new department who has the authority to investigate all allegations, administrative and criminal - the Inspector General.

(b) All investigators receive training. See 115.34

(c) Investigations demonstrated that the investigators did gather and preserve direct and circumstantial evidence and are able to consult the database for prior allegations involving either the potential victim or potential perpetrator. They gathered video evidence, review of phone calls, email/messages on tablets and sought to find potential witnesses which were interviewed. If DNA is involved, the investigators

	<p>confirmed that the kit is given to them by the hospital for proper handling with the police.</p> <p>(d) (e) The investigators confirmed, and review of investigations supported that investigations were referred to DCI when appearing to be criminal. Additionally, polygraph tests are prohibited in accordance with the and therefore not used in any aspect of the investigation for sexual abuse or sexual harassment. Review of investigations supported that the credibility of victim, suspect or witness is based on alignment with established facts. Credibility assessment was confirmed by the interview with the investigators. Additional detailed information is provided to investigators in the Sexual Incident Protocol and Reference Book regarding credibility assessment to includes review of source evaluation, consistency, corroboration, verifiability, motives and bias, context, quality of evidence, track record and common sense.</p> <p>(f) (g)The interview with the investigators did confirm that staff actions are reviewed in every case. Review of investigations supports that investigations are standardized, written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings, both administrative and criminal until it was turned over to DCI.</p> <p>(i)A data base stores all investigations and supports the retention requirements.</p> <p>(j)The departure of an alleged abuser or victim from employment or control of the agency does not provide a basis for terminating an investigation, as confirmed by the interview with the two investigators. Three investigations reviewed supported the requirement that the investigation continues even when the alleged victim or perpetrator left the facility.</p> <p>(k) Auditor is not required to audit this provision.</p> <p>(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. Evidence to support this was reviewed in investigations, interviews with the investigators, interviews with the Secretary of Corrections and the Warden.</p> <p>Summary of evidence to support findings: Policy (both previous and updated), review of the investigations, interviews all provided the auditor with sufficient evidence. As indicated, the agency is in the preliminary stages of changing the department with the addition of an Inspector General’s office who reportedly will be able to address all administrative and criminal investigations.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Sexual Incident Protocol and Reference Book · Observations · Interviews Investigative staff · Review of investigations using preponderance of evidence (administrative) <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,</p> <p><i>DOC will impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual assault, sexual abuse, or sexual harassment are substantiated. Substantiated allegations of conduct that appear to be criminal will be referred for prosecution. This criterion is reinforced in the Sexual Incident Protocol and Reference Book.</i></p> <p>The SIU investigators make the determination of substantiated, unsubstantiated and unfounded. The interview with the investigators (two) confirmed to the auditor that this is the criteria used. This is reinforced in their specialized training. The auditor observed and agreed with the conclusions based on evidence when reviewing the investigations. In the investigation database, investigators are prompted to support their findings by addressing the criteria used for the conclusion.</p> <p>Summary of evidence to support findings: Policy (both the previous policy and updated policy), Sexual Incident Protocol and Reference Book, interviews, review of the investigations and the investigation database all provided sufficient evidence for analysis. The auditor finds the facility compliant with the standard provision.</p>
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6

- Prison Rape Elimination Act 1.3.D.06 9-21-2023
- Interview Secretary of Corrections
- Interviews with inmates who reported sexual abuse
- Notification to offender victim (policy attachment and computerized)
- Offender Notification form
- PAQ

The PAQ indicates the following:

Twenty-three investigations of alleged sexual abuse completed

Twenty-one investigations of alleged sexual abuse completed where inmate was notified of the results (verbally or in writing)

Two sexual abuse investigations completed by an outside agency

One notification of the results of an investigation completed by an outside agency

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,

Following an investigation into an offender's allegation of sexual abuse or sexual assault, the PREA facility compliance manager will inform the offender as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded in accordance with policy with the investigation determination form [PREA 115.73] (see attachment #6 - Notice of PREA Investigation Determination).

Evidence reviewed/analyzed by provision:

(a) Policy supports this requirement. Notifications are completed by the investigators. Each investigation provided the Notification. Interviews with inmates who reported sexual abuse confirmed to the auditor receipt of the notification.

(b)The agency has created an Inspector General office who will conduct all investigations, criminal and administrative regarding sexual abuse and/or sexual harassment. Prior to this, the auditor reviewed a request made to DCI (the state police agency) for information regarding allegations at the community center. Investigators confirmed they are in continual communication with DCI regarding pending investigations. Review of investigations for the previous twelve months did confirm this to the auditor.

(c) Policy supports the requirement of the provisions. One interview with an inmate who reported sexual abuse confirmed to the auditor she was notified. Documentation was provided to the auditor demonstrating that this notification occurred.

	<p>(d) (e) (f)The auditor reviewed all notifications and attempted notifications, which are documented with the review of the PREA investigations. If the inmate was no longer present at the facility, it was noted.</p> <p>Summary of evidence to support findings: Policy support that a notification be made. Notification and documentation of aspects of the provision are imbedded in the computerized review process. Interview with inmates and review of documentation of this notification provided the auditor with ample evidence to support a finding of compliance.</p>
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115.76	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Investigation packet · PAQ <p>The PAQ indicates that one staff has been terminated, none referred to licensing bodies for violating agency sexual abuse and/or sexual harassment policy, zero staff violated agency sexual abuse/sexual harassment policies.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,</p> <p><i>Employee/Contractor/Volunteer-on-offender: Acts of sexual assault/rape, sexual misconduct, and sexual harassment against offenders; retaliation against offenders who refuse to submit to sexual activity, and intimidation of a witness may be a crime. All cases involving sexual assault/rape and sexual harassment will be forwarded to the SIU, PREA coordinator and the respective warden will be immediately notified by the PREA facility compliance manager. If appropriate, SIU will refer such cases to the Office of the Attorney General for prosecution (see DOC policy 1.1.A.03 - Staff Reporting information to DOC Administration and Office of Risk Management).</i></p> <p><i>All cases involving sexual assault/rape, sexual misconduct, and sexual harassment in community confinement facilities with offenders will be immediately reported to the local law enforcement agency with jurisdiction over the facility at which the incident</i></p>

	<p>took place. A copy of the report will be forwarded to the PREA coordinator.</p> <p>Employees, contractors, and volunteers in state owned prisons, and community confinement facilities may be criminally charged pursuant to SDCL § 22-22-7.6 (Sexual acts between jail or juvenile correction facility employees and detainees—Felony) or any other statutory provision.</p> <p>Employees, contractors, and volunteers may be subject to correction and/or disciplinary sanctions up to and including termination for violating department policies, post orders, and clinical standards.</p> <p>Disciplinary sanctions for violations of department policies relating to sexual assault or sexual harassment (other than actually engaging in sexual rape) will be commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanction imposed for comparable offenses by other staff with similar histories.</p> <p>All termination for violations of department sexual assault or sexual harassment policies, or resignation by staff who would have been terminated if not for their resignation, will be reported to law enforcement agencies and to any relevant licensing bodies unless the activity was clearly not criminal.</p> <p>The appropriate director or designee will make notification to the licensing body or agency within thirty (30) days of resignation or termination.</p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b) (c)(d) Policy noted above supports all aspects of the provisions of the standard. Review of one investigative packet supports that the agency/facility will take disciplinary action when a staff member violates the agency’s policy on zero tolerance for sexual abuse and sexual harassment. Termination was the result for an act of sexual abuse.</p> <p>Summary of evidence to support findings: Policy and evidence of practice provides sufficient evidence. The auditor finds the facility compliant with the standard provisions.</p>
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6

	<ul style="list-style-type: none"> · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Interviews Warden · Interviews with contractual staff/volunteers · PAQ <p>The PAQ notes that no contractor or volunteer has been involved in an investigation regarding sexual abuse or sexual harassment towards an incarcerated individual. The auditor found no evidence to dispute this statement during the audit process.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,</p> <p><i>Employee/Contractor/Volunteer-on-offender: Acts of sexual assault/rape, sexual misconduct, and sexual harassment against offenders; retaliation against offenders who refuse to submit to sexual activity, and intimidation of a witness may be a crime. All cases involving sexual assault/rape and sexual harassment will be forwarded to the SIU, PREA coordinator and the respective warden will be immediately notified by the PREA facility compliance manager. If appropriate, SIU will refer such cases to the Office of the Attorney General for prosecution (see DOC policy 1.1.A.03 - Staff Reporting information to DOC Administration and Office of Risk Management).</i></p> <p><i>All cases involving sexual assault/rape, sexual misconduct, and sexual harassment in community confinement facilities with offenders will be immediately reported to the local law enforcement agency with jurisdiction over the facility at which the incident took place. A copy of the report will be forwarded to the PREA coordinator.</i></p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b) Policy supports the provisions of the standard. The auditor interviewed two volunteers and three contractual staff who relayed their training information and noted that they are aware that they are subject to the law regarding zero tolerance for sexual abuse and sexual harassment. The interview with the Warden assured the auditor that he has the ability to stop any volunteers or contractor from entering the facility pending any allegations of sexual abuse or sexual harassment.</p> <p>Summary of evidence to support findings: As indicated, policy, interviews with contractors and volunteers and the interview with the warden provided the auditor with sufficient evidence to find the facility compliant with the standard provisions.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6
- Prison Rape Elimination Act 1.3.D.06 9-21-2023
- Offender Discipline System 1.3.C.02
- Inmate Living Guide
- Review of PREA investigations
- Interviews with mental health staff
- Interview with disciplinary officer
- PAQ

The PAQ indicates there have been three administrative findings or criminal findings of offender-on-offender sexual abuse, no criminal findings of inmate-on-inmate sexual abuse. The auditor found no reason to dispute this during the audit process.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, *SOMP will initiate an evaluation of all known offender-on-offender sexual aggressors referred by the PREA facility compliance manager within sixty (60) days of learning of such sexually aggressive or abusive history and offer treatment when deemed appropriate. SOMP will consider whether to require the offending offender to participate in such treatment, while incarcerated and/or in the community.*

Offender-on-Offender: All sexual abuse including sexual assault/rape, sexual misconduct, and sexual harassment between offenders is prohibited and will be reported to the officer in charge (OIC) to complete an administrative investigation. The OIC will refer to the IG any possible criminal investigation. If appropriate, the IG will refer such cases to the Office of the Attorney General for prosecution. Offenders may be disciplined and/or criminally charged for such activity and DOC policy 1.3.C.2 - Offender Discipline System.

Offender-on-DOC Employee/Contractor/Volunteer/Visitor: All cases involving sexual assault/rape, sexual misconduct, and sexual harassment will be referred to the IG for a SIU investigator to complete an investigation. If appropriate, SIU will refer such cases to the Office of the Attorney General for prosecution. Offenders may also be charged per DOC policy 1.3.C.02 - Offender Discipline System, however offenders may only be disciplined for engaging in sexual assault/rape, sexual misconduct, or sexual harassment with an employee, contract worker, or volunteer upon finding that the employee, contract worker, or volunteer was forced, threatened, or did not consent to such behavior.

Reports of sexual assault/rape, sexual misconduct, and sexual harassment made in good faith based upon a reasonable belief that the alleged conduct occurred will not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Offender Discipline System 1.3.C.02 states,

The Offender Living Guide contains a list of written rules of offender conduct that specify acts prohibited within the institution and penalties that can be imposed for various degrees of violation; divided into major and minor level rule offenses (see section "Rule Violation Definitions & Sanctions" in this policy) [ACA 5- ACI-3C-01]. Offenses in custody are prohibited behaviors that have direct and adverse effects on offenders, institutional order, and the security of the institution.

Criminal Prosecution: In addition to being subject to the offender discipline system, all offenders in the custody of the secretary of the DOC are subject to all laws of the United States and the state of South Dakota. If a violation of the offender disciplinary system would also be a violation of a federal, state, or local law, an offender may be subject to the provisions of the offender discipline system, as well as to the applicable law. Where an offender allegedly commits an act covered by criminal law, the case is referred to the appropriate court or law enforcement officials for consideration for prosecution [ACA 5-ACI-3C-06]. The case will first be referred to the inspector general (IG). The IG will pursue case filings and follow-up as necessary.

Behavioral health staff will be notified immediately when an offender with an identified behavioral health assessment code of P-3 or higher is charged with a major offense in custody. If, at any stage of the disciplinary process, staff believe an offender may require a mental health evaluation to determine the offender's level of functioning, staff shall refer the offender to behavioral health staff.

If it is determined at any time during the disciplinary process that an offender is impaired to the extent that they are unable to make important decisions relevant to the disciplinary hearing process and/or their defense, the process will be terminated.

Inmate Living Guide

DISCIPLINARY Rule violations or offenses in custody are divided into three categories. Level H (high) is the most severe. Inmates who commit rule violations are subject to disciplinary action. If you are found guilty of committing a rule violation, you are subject to the disciplinary process. If found guilty or you enter a plea of guilty, you may be issued a sanction. Sanctions include fines, forfeiture of personal property, placement in disciplinary housing, loss of privileges and extra work duties. See DOC policy 1.3.C.2 Inmate Discipline System for more information. Other consequences for committing rule violations may be assignment to a higher classification level, loss of employment or placement in restrictive housing. Committing certain rule violations or frequent rule violations may cause you to be noncompliant with your Individual Program Directive and may negatively impact your opportunity for participation in certain programs. Your disciplinary history also effects your eligibility for release to parole supervision or suspended sentence status.

Inmate sexual abuse- if the victim does not consent, is coerced into such an act by overt or implied threats of violence or is unable to consent or refuse.

Unsolicited contact with or in reference to, any non-inmate (notes, letters, messages, suggestive remarks or gestures, inappropriate touching, or seeking out personal information).

Inmate consensual sexual contact. Engaging in consensual sexual contact and/or unnatural acts with another inmate or non-staff member

Sexual harassment- repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by an inmate directed toward any person.

Evidence reviewed/analyzed by provision:

(a) (b) Policy specifies the sanctioning schedule used. Additionally, The Inmate Living Guide informs the inmates of the sanctions for offenses and the level of severity. The interview with the disciplinary coordinator confirmed to the auditor that sanctions would be commensurate with the nature and circumstances of the offense. Review of the investigations supported that disciplinary action was taken against inmates in which the allegation was substantiated for sexual abuse and sexual harassment.

(c) Policy, the interview with the disciplinary coordinator and the Mental Health Director confirmed that an inmate's mental status would be reviewed prior to determining disciplinary sanctions.

(d) Inmates found guilty of sexual abuse can be referred to the Sexual Offender Management Program (SOMP) staff for consideration for treatment- see policy noted above.

(e) The interview with the disciplinary coordinator confirmed that an inmate would not be sanctioned for sexual contact with a staff member unless the staff member did not consent to the contact. One investigation supported this as did the interview with the inmate.

(f) Policy supports that 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.

(g) The Inmate Living Guide confirms that engaging in sexual acts with others is prohibited.

Summary of evidence to support findings: Policy supports the requirements of the provisions. Interviews with the Mental Health Director, disciplinary officer and review of one investigation provide the auditor with sufficient evidence. The auditor finds the facility compliant with the standard provisions.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · PREA Institutional Risk Screens 1.4.B.16 · Demonstration of the intake process/PREA Referral Sheets (eleven examples) · Interviews offenders who disclose sexual victimization at risk screening · Interview staff responsible for risk screening · Analysis of limited information to custody staff · Interview with mental health staff · PAQ <p>The PAQ indicates that 100% of offenders who disclosed prior victimization during screening were offered a follow up meeting with medical/mental health practitioner, 100% of inmates who have previously perpetrated sexual abuse were offered a follow up meeting.</p> <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>PREA Institutional Risk Screens 1.4.B.16</p> <p><i>Medical / Mental Health referral. 1. If the screening indicates an inmate has previously perpetrated sexual abuse, whether this occurred in an institutional setting or in the community, staff will ensure the inmate is offered a follow-up meeting with Sex Offender Management Program (SOMP) staff within 14 days of the intake screening (See DOC policy 1.4.A.3 Sex Offender Management Program). 2. If the intake screening indicates an inmate has experienced prior sexual victimization, whether this occurred in an institutional setting or in the community, staff will ensure the inmate is offered a follow-up meeting with medical or behavioral health staff within 14 days of the intake screening.</i></p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,</p> <p><i>A release or request of confidential information about the about the offender which may be requested from outside sources. Clinical services will inform offenders of the practitioner's duty to report, and the limitations of confidentiality and management</i></p>

decisions.

Any information related to sexual victimization or aggressiveness occurring within an institutional setting will be confidential and strictly limited to medical, behavioral health clinicians, and approved unit 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 law.

If an offender has experienced prior sexual victimization, whether it occurred in an institution or in the community, facility staff will ensure the information is reported and a referral to behavioral health is made for a follow-up meeting within fourteen (14) days of intake screening. The information will be used to assist with facility housing, bed, program, and work assignments. The referral will be logged in the COMS PREA Risk assessment questionnaire. The assessor will email the referral to behavioral health staff.

If an offender has previously perpetrated sexual abuse, whether it occurred in an institution or in the community, facility staff will ensure the information is reported to the Sex Offender Management Program (SOMP) and behavioral health. SOMP will offer a follow-up meeting within fourteen (14) days of intake screening. The information will be used to assist with facility housing, bed, program, and work assignments. The referral will be logged in the COMS PREA Risk assessment questionnaire. The assessor will email the referral to SOMP staff.

Evidence reviewed/analyzed by provision:

(a)(b) (d) As indicated, policy supports the requirements of the provisions. Interviews with the staff who conduct risk assessment and mental health staff confirmed this process. Interviews with inmates who reported prior victimization confirmed they were offered mental health services. Additionally, all inmates were questioned about access to mental health; all confirmed that they can access these services easily. The facility has a process for these referrals. Eleven examples were provided for review. The referral form contains a check box for referral to mental health or referral to the SOMP based on the reported history of the inmate. It is noted where it occurred (institution/community) and whether the inmate has accepted or waived the offer. It demonstrates that any information related to sexual victimization or abusiveness is limited for this referral process.

(c) This is not applicable to this facility as it is a prison.

(e) Medical and mental interviews confirmed they have not had a scenario in which informed consent was required before reporting information about prior sexual victimization that did not occur in an institutional setting (no inmates housed at this facility are under the age of 18 yrs. old).

Summary of evidence to support findings: Policy, the intake process, interviews with inmates who disclosed sexual victimization, review of the referral forms demonstrated that the facility has a process in place to ensure this. Ultimately, all inmates assured the auditor that they have access to and receive mental health treatment when

	needed. The auditor finds there is sufficient evidence to support a finding of compliance with the standard provisions.
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Sexual Incident Protocol and Reference Book updated · Interview with the Warden · Observations made during the tour · OIC Response checklist - notification to medical and mental health · Interview with medical staff · Review of investigations <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,</p> <p><i>The OIC will notify medical and behavioral health supervisors. If no qualified clinical services staff are on duty at the time a report of sexual assault is made, security staff/first responders will take preliminary steps to protect the victim and will immediately notify the appropriate medical administrator or designee and the on-call behavioral health clinician for immediate response.</i></p> <p><i>Treatment:</i></p> <p><i>Acute trauma care will be provided to victims of sexual assault while incarcerated including but not limited to prophylactic measures, testing for sexually transmitted infections including Human Immunodeficiency Virus (HIV) / Acquired Immune Deficiency Syndrome (AIDS), and treatment of injuries. When appropriate, prophylactic therapy will immediately be administered for infectious disease exposures. Medical services will conduct a cursory assessment of any victim of a</i></p>

sexual assault. Non-emergent medical care will be provided at the facility, as needed. Any emergent additional medical care will be provided during or after the forensic exam. Victims of sexual assault will receive timely, unimpeded access to emergency medical treatment and immediate crisis intervention services, the nature and scope of which will be determined by clinical services according to their professional judgment. Victims of sexual assault while incarcerated will be offered timely information from clinical services about access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care.

Treatment services will 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. Offender victims of vaginal penetration while incarcerated will be offered pregnancy tests. If pregnancy results, such victims will receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. Forensic medical examinations conducted by a SANE nurse will not be completed without the victim's consent.

Sexual Incident Protocol and Reference Book updated reinforces the role of medical staff. It states, Correctional Medical Services: . ■ Victims of sexual assault will receive timely, unimpeded access to emergency medical treatment and immediate crisis intervention services, the nature and scope of which will be determined by clinical services according to their professional judgment. Medical services will conduct a cursory assessment of any victim of sexual assault. • Non-emergent medical care will be provided at the facility as needed. • Emergent medical care will be provided during or after the forensic exam at the local hospital. Additionally, it confirms that the offender must be assessed by behavioral health.

Evidence reviewed/analyzed by provision:

(a) (c) (d) Policy (previous and updated) addresses the requirements of these provisions. Interviews with medical staff confirmed that prophylactic treatment would occur at the hospital or could occur at the facility. Mental health staff confirmed they are available on call if needed.

(b) Health care staff are not available 24/7. The Response Plan has been updated to reflect actions to be taken by the OIC when medical staff are not available. The updated Coordinated Response training also addresses this.

Summary of evidence to support findings: The auditor finds the facility is compliant with the standard provisions. Policy (previous and updated) addresses the requirements of the standard. Review of investigations support that contact with medical and mental health staff is an automatic part of the response plan. The updated Response Plan supports this. Finally, staff interviews support that both medical and mental health contact will occur for all allegations of sexual abuse received.

115.83	<p data-bbox="252 107 1449 197">Ongoing medical and mental health care for sexual abuse victims and abusers</p> <p data-bbox="252 232 960 268">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 309 544 344">Auditor Discussion</p> <p data-bbox="252 385 1406 461">The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul data-bbox="252 497 1345 748" style="list-style-type: none"> · PREA Response and Investigation of Sexual Abuse/Harassment 1.3.E.6 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Sexual Incident Protocol and Reference Book · Interview with medical and mental health staff <p data-bbox="252 784 1393 860">The following policy excerpts supports compliance with the requirements of this standard:</p> <p data-bbox="252 896 1161 931">Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states,</p> <p data-bbox="252 967 1393 1043"><i>Victims of sexual assault are referred under appropriate security provisions to a community medical facility for treatment and gathering of forensic evidence.</i></p> <p data-bbox="252 1079 1428 1240"><i>In cases where outside medical treatment including forensic evidence collection is required, sign language or language interpreters must be obtained for offenders requiring these services per DOC policy 1.1.E.7 - Americans with Disabilities Act (ADA).</i></p> <p data-bbox="252 1276 1434 1482"><i>At no time will the staff leave the victim alone until the victim is evaluated by behavioral health staff. A referral to behavioral health may be made by any DOC employee, contract worker, or volunteer during any step of this process. DOC Staff will contact behavioral health with the on- call system if behavioral staff are not available onsite.</i></p> <p data-bbox="252 1518 1465 1639"><i>The SIU investigator will ensure that offenders will be offered a referral to behavioral health and/or medical for immediate crisis intervention, treatment/counseling, and long-term follow- up care.</i></p> <p data-bbox="252 1675 1481 1796"><i>Offenders identified as being a victim of DOC employee, contract worker, or volunteer sexual assault/rape, or sexual harassment will be referred to behavioral health for treatment/counseling by the SIU investigator or OIC.</i></p> <p data-bbox="252 1832 1485 1953"><i>Treatment services will 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.</i></p> <p data-bbox="252 1989 1458 2065"><i>Offender victims of vaginal penetration while incarcerated will be offered pregnancy tests. If pregnancy results, such victims will receive timely and comprehensive</i></p>
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information about and timely access to all lawful pregnancy-related medical services.

Forensic medical examinations conducted by a SANE nurse will not be completed without the victim's consent.

Sexual Incident Protocol and Reference Book further reinforces the following:

Following the collection of evidence, the SANE can/will offer prophylactic medications to the victim in an effort to prevent the occurrence of a sexually transmitted infection. Acute trauma care will be provided to victims, including but not limited to treatment of injuries, HIV/AIDS prophylactic measures, and testing for sexually transmitted diseases. Clinical and Behavioral health services will provide as appropriate follow up services, treatment plans, and referral for continued care following the victims transfer to another facility or release from custody. Offer victims of sexual assault/rape vaginal penetration while incarcerated pregnancy tests. This is all provide at no cost to the victim.

Evidence reviewed/analyzed by provision:

(a) (b) (c)(d)(e) (f) (g) (h) Policy, Sexual Incident Protocol and Reference Book and interviews with medical and mental health staff confirm compliance with these provisions. There was not an incident in the previous twelve months to review for compliance. The auditor found this credible.

Summary of evidence to support findings: Policy, Sexual Incident Protocol and Reference Book and interviews support compliance with the provisions of the standard. No incident occurred that would require this action. One person who had a substantiated allegation was paroled prior to the conclusion of the investigation. Review of the evidence presented provided the auditor with sufficient evidence to support a finding of compliance.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none">· PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5· Prison Rape Elimination Act 1.3.D.06 9-21-2023· Interview with members of the Sexual Abuse Incident Review Team· Interview with the Warden

- Sexual Abuse Response Checklist
- Completed Sexual Abuse Incident Reviews (24 total)
- Interview with the PCM
- PAQ

The PAQ indicates that there were seventeen criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents. In the past 12 months, there were twenty-six (26) criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents.

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states PREA Sexual Incident Reviews

Upon completion of the investigation for sexual abuse (excluding sexual harassment and sexual misconduct), the PREA facility compliance manager will send the completed investigation packet and accompanying documents to the PREA coordinator.

Facilities will conduct a sexual incident review at the conclusion of every sexual assault/rape investigation (excluding sexual harassment and sexual misconduct). The sexual incident review will be conducted for all substantiated and unsubstantiated sexual abuse incident. If an allegation has been determined to be unfounded, no sexual incident review needs to be completed.

The PREA facility compliance manager will receive the completed investigation packet within three (3) working days of the conclusion of the investigation from the SIU Investigator.

The sexual incident review will ordinarily occur within thirty (30) days of the conclusion of the investigation.

The PREA facility compliance manager (review team leader) will arrange and oversee the sexual incident review.

The sexual incident review team will include PREA facility compliance manager (team leader), PREA coordinator, warden or designee, unit manager of participants of report, SIU investigator, associate director of offender services or designee, medical supervisor, behavioral health supervisor, and SOMP supervisor.

The sexual incident review team will meet and complete the PREA Sexual Abuse Incident Review Form (see attachment #4).

Consider whether the allegation or investigation indicates a need to change policy or

practice.

Consider whether the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status, gang affiliation, or was motivated or otherwise caused by other group dynamics at the facility.

Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable sexual abuse or sexual assault.

Assess the adequacy of staffing levels in that area during different shifts.

Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

Prepare a report of its findings, including but not necessarily limited to determinations made above, and any recommendations for improvement and submit such report to the facility warden, director of prisons, and PREA coordinator.

The facility will implement the recommendations for improvement or will document its reasons for not doing so.

Policy mirrors the requirements of the standard provisions.

Evidence reviewed/analyzed by provision:

(a)(b) A sexual abuse incident review was provided with every investigation packet reviewed. They were mostly conducted timely, within 30 days.

(c) The reviews typically included a team leader, program manager, investigator, medical representative mental health representative and the PCM or PREA Coordinator. The interview with the mental health director and investigators confirmed they have been involved in the Sexual Abuse Incident Reviews.

(d) Review of the incident review form confirms it does address (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. The report addresses all of the provisions.

(e) Review of one sexual abuse incident review confirmed that the implementation of the recommendation was completed. The auditor observed the implementation of the recommendation (additional camera coverage) during the on-site audit.

Summary of evidence to support findings: The auditor finds the facility compliant with

	<p>the standard provisions. Policy (previous and updated), the Sexual Abuse Response plan and interview with the Warden, PCM and completed reviews support the provisions of the standard.</p>
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115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Interview PREA Coordinator · Annual Report - agency · Observations <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, PREA aggregated data and annual report:</p> <p><i>The PREA coordinator will:</i></p> <p><i>Review data collected and aggregate the information in order to assess and improve the effectiveness of DOC's prevention, detection, and response policies, practices, and training using a standardized instrument and set of definitions.</i></p> <p><i>The PREA coordinator and PREA facility compliance manager will maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and facility PREA incident reviews. This data collected will be maintained in a secure area and will only be shared on a need-to-know basis by the PREA coordinator.</i></p> <p><i>The PREA coordinator will be responsible to aggregate and report on incident-based sexual assault/rape, sexual misconduct, and sexual harassment at least annually. The DOC also will obtain incident-based and aggregated data from every contracted entity with which it contracts for the confinement of its offenders.</i></p> <p><i>The PREA coordinator will be responsible for compiling records and reporting statistical data to the Federal Bureau of Justice Statistics, as required by PREA of 2003 using a standardized instrument and set of definitions. Upon request, the DOC</i></p>

will provide all such data from the previous calendar year at the date requested by the Department of Justice no later than June 30.

III Definitions:

This policy provides a list of definitions to support consistency when gathering and aggregating data. They are consistent with definitions noted in the PREA law. Polices for the agency provide definitions related to the content of the policy. Both practices provided for consistent application.

Evidence reviewed/analyzed by provision:

(a) (b)(c)(d) The agency has a detailed data base for all allegations that affords the ability to collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions; A report is prepared annually which aggregates the incident-based sexual abuse data which does allow for the completion of the Survey on Sexual Victimization. Standardized definitions are used as indicated in the policy. Sexual abuse incident reviews are located with this information and is readily available for analysis of information. The auditor observed information from this database and incident reviews with every investigation reviewed.

(e) There are contracts for four agencies that house community confinement offenders, not inmates. They used the same database, so the report does include information from these operations.

(f) The PREA Coordinator reports that the Survey on Sexual Victimization is submitted annually.

Summary of evidence to support findings: Policy (previous and updated) supports the requirements of the provisions. The interview with the PREA Coordinator, review of investigations/sexual abuse incident reviews and review of the annual reports provided evidence. The auditor finds the facility compliant with the standard provisions.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard: · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5

- Prison Rape Elimination Act 1.3.D.06 9-21-2023
- Interview with the Secretary of Corrections
- Interview PREA Coordinator
- Interview with the PCM
- Link to website 2022 Report - PREAAnnualReport2022.pdf (sd.gov)
- Annual Report on the Prison Rape Elimination Act 2022 – signed by Secretary of Corrections

The following policy excerpts supports compliance with the requirements of this standard:

Prison Rape Elimination Act 1.3.D.06 9-21-2023 updated states, PREA aggregated data and annual report:

The PREA coordinator will:

Review data collected and aggregate the information in order to assess and improve the effectiveness of DOC's prevention, detection, and response policies, practices, and training using a standardized instrument and set of definitions.

Identify problem areas.

Recommend corrective action on an ongoing basis, and

Prepare an annual report of findings and corrective actions for each facility, as well as DOC as a whole. Such report will include a comparison of the current year's data and corrective actions with those from prior years and will provide an assessment of DOC's progress in addressing sexual assault/rape, sexual misconduct, and sexual harassment. DOC's report will be approved by the DOC SOC or designee and made readily available to the public through its website. DOC may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted.

Policy mirrors the requirements of the standard provisions.

Evidence reviewed/analyzed by provision:

(a) (b) Review of the Agency Annual Report, eleven pages, demonstrated to the auditor the following:

- Overview
- Staffing
- PREA Coordinator/PREA Compliance Manager
- PREA Investigator

	<ul style="list-style-type: none"> · Staffing Plan · Training (pre-service Annual, Specialized) · PREA Policies · Support Services · Audits · Definitions · Summary of current year statistics, compared to the previous years (2018, 2019, 2020, 2023, 2022) · Analysis of the statistics · Review by facility · Corrective action summary <p>(c) Annual reports are available on the webpage for the following years: 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2023, and 2022. They are approved by the Secretary of Corrections as indicated by her signature and interview. Interviews with the PREA Coordinator and PCM involved discussion of the process for collecting, analyzing and development of the report.</p> <p>(d) No redactions were required on the Annual Report.</p> <p>Summary of evidence to support findings: Policy, review of the Annual reports, and interviews provided sufficient evidence; the auditor finds the facility compliant with the standard provisions.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:</p> <ul style="list-style-type: none"> · PREA Compliance with Prison Rape Elimination Act Standards 1.3.E.5 · Prison Rape Elimination Act 1.3.D.06 9-21-2023 · Interviews PREA Coordinator

	<ul style="list-style-type: none"> · Documentation that it is on the website · Retention Schedule <p>The following policy excerpts supports compliance with the requirements of this standard:</p> <p>Prison Rape Elimination Act 1.3.D.06 9-21-2023 PREA aggregated data and annual report:</p> <p><i>Case Records: In accordance with the SDCL § 1-27 public records and files, and any subsequent updates or supersessions thereof, all case records associated with claims of sexual assault/rape, sexual misconduct, and sexual harassment, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling, are retained by the IG or DOC at least ten (10) years after the date of the initial collection. Information required as part of the offender’s medical care will be maintained in their medical record.</i></p> <p><i>The PREA coordinator will make all aggregated sexual assault, and sexual harassment data, from facilities under its direct control and contracted facilities, the Secretary of Corrections will approve the report and the report will be readily available to the public at least annually through its website after removal of all personal identifiers.</i></p> <p>Evidence reviewed/analyzed by provision:</p> <p>(a) (b)(c) (d) All information used is securely contained in the computerized management system, with access granted only to those with a need to know, monitored and managed by the IT Department. This was confirmed by observation of use and interview the PREA Coordinator. The auditor was able to access annual reports on the Department webpage from 2013 to present. Policy supports it will be maintained for ten years. No information required redaction.</p> <p>Summary of evidence to support findings: Policy, interview, review of annual reports and observation of the secure nature of the information provided evidence. The auditor finds the facility compliant with the standard provisions.</p>
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor was able to observe all areas of the facility. Audit notices were visible. Inmates confirmed they saw the audit notices. However, no correspondence was received. the auditor found no reason to conclude that a letter was sent and not received. The auditor was able to conduct private interviews with staff and inmates, and interview anyone requested. See comments supporting compliance throughout

	the report.
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	On the agency website, there are PREA audit reports available for review, thirteen total reflecting that one third of the agency has been audited since 2014.

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

	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.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	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 if the	yes

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	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	yes

	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?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

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

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	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.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

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

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

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

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
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	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
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 any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
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	yes

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

	this standard.)	
	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,	yes

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

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

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

	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?	
	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	yes

	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).)	
	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).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b) Reporting to inmates		
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c) Reporting to inmates		
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d) Reporting to inmates		
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	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?	
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?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	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. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	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.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

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

(f)		
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes