

# PREA Facility Audit Report: Final

Name of Facility: Lerdo Minimum

Facility Type: Prison / Jail

Date Interim Report Submitted: 05/27/2019

Date Final Report Submitted: 11/29/2019

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: Eric Woodford	Date of Signature: 11/29/2019

AUDITOR INFORMATION	
Auditor name:	Woodford, Eric
Address:	
Email:	eiw@comcast.net
Telephone number:	
Start Date of On-Site Audit:	05/04/2019
End Date of On-Site Audit:	05/06/2019

<b>FACILITY INFORMATION</b>	
<b>Facility name:</b>	Lerdo Minimum
<b>Facility physical address:</b>	17635 Industrial Farm Road, Bakersfield, California - 93308
<b>Facility Phone</b>	
<b>Facility mailing address:</b>	

<b>Primary Contact</b>	
<b>Name:</b>	Lesley Jo
<b>Email Address:</b>	embreyw@kernsheriff.org
<b>Telephone Number:</b>	661-391-7850

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Kevin Wright
<b>Email Address:</b>	Wright@kernsheriff.org
<b>Telephone Number:</b>	661-391-7967

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	
<b>Name:</b>	Brenda McMasters
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<b>Telephone Number:</b>	M: 661-391-7324

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	<b>Margaret Johnson</b>
<b>Email Address:</b>	<b>margaret.johnson@kernmedical.com</b>
<b>Telephone Number:</b>	<b>661-391-3167</b>

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	<b>724</b>
<b>Current population of facility:</b>	<b>0</b>
<b>Average daily population for the past 12 months:</b>	
<b>Has the facility been over capacity at any point in the past 12 months?</b>	<b>No</b>
<b>Which population(s) does the facility hold?</b>	
<b>Age range of population:</b>	
<b>Facility security levels/inmate custody levels:</b>	<b>1-10</b>
<b>Does the facility hold youthful inmates?</b>	<b>No</b>
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	<b>10</b>
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	<b>Kern County Sheriff's Office</b>
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	<b>1350 Norris Road, Bakersfield, California - 93308</b>
<b>Mailing Address:</b>	
<b>Telephone number:</b>	<b>661-391-7850</b>

<b>Agency Chief Executive Officer Information:</b>	
<b>Name:</b>	
<b>Email Address:</b>	<b>Davistyson@kernsheriff.org</b>
<b>Telephone Number:</b>	<b>661-39</b>

<b>Agency-Wide PREA Coordinator Information</b>			
<b>Name:</b>	<b>Leslie Embrey</b>	<b>Email Address:</b>	<b>embreyw@kernsheriff.com</b>

## AUDIT FINDINGS

### **Narrative:**

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

### **Introduction:**

A Prison Rape Elimination Act (PREA) Audit was conducted at the Kern County Sheriff's Lerdo Justice Correctional Facility (LJF) during the week of 4/8/19 by Eric Woodford a US Department of Justice (USDOJ) certified PREA Auditor. On 2/5/19 the Kern County Sheriff's Office and auditor signed a PREA audit agreement to conduct PREA audits for both the Lerdo Justice and Minimum Security correctional facilities. Term of the contract is from 2/5/19 to 3/22/2020.

### **Pre-Audit Phase:**

On 2/11/19 auditor provided the agency PREA Coordinator with pre-audit documentation such as the pre-audit questionnaire, audit process map, audit documentation checklist and audit tour instructions. The auditor submitted an additional document request on 3/17/19 for staff, contractor, volunteer and inmate listing in order to conduct a random selection for document review.

On 2/15/19, auditor provided agency with Notice of Auditor poster language in both English and Spanish with instructions on posting, date of posting deadline, and proof of posting verification to be provided to the auditor. Posting deadline was set for 2/25/19. Agency provided verification of posting through dated photos by the deadline on 2/21/19 which was six weeks prior to the onsite audit. The Notices of Auditor were posted in all inmate living areas, hallways where inmates and staff travel throughout the facility, doorways that lead to each part of the facility for both staff and inmates, facility lobby area, visiting, kitchen, break rooms, medical and program rooms.

Agency provided requested lists for document review on 3/26/19. The listing was for inmates and staff housed at the Justice facility. With the understanding auditor would be able to interview the skeleton staff crew assigned to the Minimum facility, selections were made based upon the lists provided which included hire date, gender, job positions and shifts. Auditor was informed that the Minimum facility had no inmates and was closed down for renovation. The auditor was informed that there was a skeleton crew of staff to maintain the security and grounds of the facility. Last known occupation of inmates at the Minimum facility was November 2018. Auditor asked if the unit was closed and was informed that the unit was pending renovation but can house inmates at any time if required. Auditor presented agency with random selections for document review on 4/3/19 based on housing and earliest possible release date. Auditor also requested investigation records, grievances, training records and personnel records pulled from the selections made by auditor. The agency provided the documents by 4/7/19 for auditor to complete the document review worksheets for verification of compliance.

The PAQ noted that no internal or external audits except for the American Correctional Association accreditations for the Kern County Jail Justice facility. During the course of the audit the auditor exchanged numerous emails and phone conversations with the PREA Manager relative to document requests. The agency complied with all requests. Auditor received no correspondence letters from a Kern

CJ inmate. One week prior to the onsite audit, auditor requested agency complete the Specialized listing of staff and provide a listing of staff, contractors and volunteers which provides for their duty shifts and titles or designations for onsite interviews. Listing for inmates to identify their housing units, gender, and earliest possible release date for formal interviews. Agency provided the requested lists three days later and auditor made random selections of staff based upon shifts and titles. There are 4 shifts per day. The selections equaled 7 staff members per shift. The contractors and volunteers were selected at random based upon their job titles. Inmates were selected based upon gender and housing unit. Auditor selected one inmate per page of the facility housing unit list to a total of 30 random inmates. Auditor provided agency with a completed interview listing on first day of the onsite audit.

**Onsite Audit Phase:**

The onsite review began on 4/8/19 with an entry briefing. Attendees included: the PREA Coordinator, PREA Administrative Manager, PREA Compliance Manager and the Facility Commander. During the briefing, conduct of the audit was discussed including the audit timeline during the week. Auditor opened the floor for questions and provided responses for any questions asked. Following the in briefing, the physical plant review was conducted by the PREA Manager. The Justice facility is one building with one single cell housing unit, 23 multiple occupancy housing units, no open bay/dorm housing units and 10 segregation cells. The facility includes Laundry, Intake and Discharge, Visitation, Mechanical services, Food preparation area, Administration, Maintenance, Health Services and Medical Infirmary, Mental Health offices, Main Central Control and Basement area with staff only access. The following summary identifies area accessed during the physical plant review:"

**Living Unit: Barracks 1-14 and 19-22 = 42 beds each barracks – Male Only**

**PREA Information Posted? All PREA signage removed due to renovation through the facility**

**Auditor Notice Posted? Facility under renovation, no notice of auditor posted**

**Opposite Sex Viewing? Yes – cross-gender viewing via toileting in all Barracks**

**Camera Placement?** [REDACTED]

**Announcement made? No, no inmates in facility**

**Other Notes:**

**Phones: 4 phones in each barracks**

**Grievance Process: No information or written notification due to barracks notification.**

**Supervision (staff to inmate ratio):** [REDACTED]

**Showers and Bathrooms (privacy, opposite gender viewing?) Due to renovation, all showers and bathrooms are open areas. No privacy screens as there are no**

**Recreation Areas/TV/Multi-Purpose: The facility has open areas in each barracks as general area for inmates, and inmates have large exercise yards.**

**Living Unit: Units 15 & 16 – Mega Barracks – 60 Beds each – dormitory style**

**PREA Information Posted? All PREA signage removed due to renovation through the facility**

**Auditor Notice Posted? Facility under renovation, no notice of auditor posted**

**Opposite Sex Viewing? No**

**Camera Placement?** [REDACTED]

**Announcement made? No, no inmates in facility**

**Other Notes:**

**Phones: 6 phones in each barracks**

**Grievance Process: No information or written notification due to barracks notification.**

**Supervision: (staff to inmate ratio)** [REDACTED]

**Showers and Bathrooms (privacy, opposite gender viewing?) Compliant urinals & showers. Barriers**

placed to dissuade cross-gender viewing.

**Recreation Areas/TV/Multi-Purpose:** The facility has open areas in each barracks as general area for inmates, and inmates have large recreation yards.

**Living Unit: Barracks 1 – 3 - Female barracks – 32 Beds**

**PREA Information Posted?** All PREA signage removed due to renovation through the facility

**Auditor Notice Posted?** Facility under renovation, no notice of auditor posted

**Opposite Sex Viewing?** Yes – cross-gender viewing via toileting in all Barracks

**Camera Placement?** [REDACTED]

**Announcement made?** No, no inmates in facility

**Informal Discussion with Staff (Not Interviews):** Medical exam room in control and interview room. Utility Dress-out room (privacy curtains for dress-outs) with 1 restroom.

Only female staff supervise the female dorm area. If male staff enters, gender specific announcement is conducted prior to entering.

**General Discussion with Inmates (Not Interviews):** Female officers work in the female unit, office and control room. English & Spanish

**Phones Outside general area** 4-phones

**Grievance Process:** No information or written notification due to barracks notification.

**Supervision (staff to inmate ratio)** [REDACTED]

**Showers and Bathrooms (privacy, opposite gender viewing?)** No curtains in toilet area or showers. Unit under renovation.

**Recreation Areas/TV/Multi-Purpose:** Covered area open – recreation area with tables

**Warehouse**

**Hidden areas?** Two - Temporary holding cells

**Camera Placement:** [REDACTED]

**Supervision:** [REDACTED]

**New arrival room**

**Strip Areas (Private?):** 2 Privacy screens

**Interview Areas (Confidential):** Video visiting room or attorney rooms

**PREA Information Posted:** Yes, in English & Spanish

**Cameras:** [REDACTED]

**Receiving and Discharge (Cont.)**

**Phones?:** No inmate phones

**Ask for Information Provided to Offenders:** Intake conducted at CRF (Central Receiving Facility) located downtown

**Recreation & Chapel Room**

**Video?** [REDACTED]

**Outside Mechanical Service Shops**

**Purpose:** Conducts religious services and recreation

**Administration**

**Offender Access? :** Clerical administration offices – No inmates allowed.

**PREA Information:** None

Third Party Info : \_None



**Note : Classification duty office, officers area, Supervision clerical, electronic monitoring area located in this area. Summary of housing units:**

**Minimum Housing Units = 20 Barracks:**

**1 – 14 – 42 Beds**

**19 – 22 = 41 Beds**

**1 – 14 = 42 Beds**

**15 & 16 are Mega Barracks have 60 Beds each.**

**On the first day of arrival, auditor was informed that the Minimum unit skeleton crew was comprised of two staff and one management position. One who maintained the facility by checking each housing unit to ensure both security and water flow. The management position was the Facility Commander. There was no assigned PREA Compliance Manager available at the time of the onsite review. Auditor interviewed the two staff members and the onsite Facility Commander following the onsite physical plant review. There were no inmates housed at the facility. Female inmates were moved from the facility by 6/20/18 and male inmate were moved by 11/10/18. There were no inmate interviews, so auditor used the interviews conducted during the Justice facility audit to supplement the Minimum unit interviews. The number of inmates housed at the Kern County Jail Minimum facility on the first day of the on-site audit was 0.**

**A total of inmate interviews were conducted: 0**

- Random inmates – 0**
- Youthful Inmates - 0**
- Physically disabled, blind, deaf, and/or hard of hearing inmates – 0**
- Cognitively disabled inmates – 0**
- Gay and/or bisexual inmates – 0**
- Transgender or intersex inmates – 0**
- Inmates in segregation for risk of victimization - 0**
- Inmates who reported sexual abuse – 0**
- Inmates who disclosed victimization during a risk assessment - 0**

**A total of staff interviews were conducted: 3**

- Random staff – 2**
- Director / designees-Captain**
- Facility Commander -Lieutenant**
- Contract administrator**
- PREA Coordinator -1**
- PREA Compliance Manager - 1 (previously assigned PREA Compliance Manager)**
- Intermediate or higher-level supervisors - 1**
- Line staff who supervise youthful inmates - 0**
- Education and program staff who supervise youthful inmates - 0**
- Medical and mental health staff - 2 - (from Justice facility PREA audit)**
- Human resources staff - 2 (from Justice facility PREA audit)**
- SAFE/SANE hospital staff - 1 (from Justice facility PREA audit)**
- Volunteers-2 (from Justice facility PREA audit)**
- Contractors - 2 (from Justice facility PREA audit)**
- Investigators -5 (from Justice facility PREA audit)**
- Staff who perform risk assessments - 1 (from Justice facility PREA audit)**
- Staff who supervise inmates in segregation - 1 (from Justice facility PREA audit)**

- Incident review team members - 1 (from Justice facility PREA audit)
- Staff charged with retaliation monitoring - 1 (from Justice facility PREA audit)
- Intake staff - 1 (from Justice facility PREA audit)
- First Responders –Security - 1 (from Justice facility PREA audit)
- First Responders-non-security - 1 (from Justice facility PREA audit)
- Victim Advocacy – 2 (from Justice facility PREA audit)
- Kitchen staff – 0

Kern County Jail provides 3rd party reporting of allegations of sexual abuse via the Sheriff's website. The information includes citation of the Prison Rape Elimination act, their zero- tolerance policy and contact information for reporting allegations of sexual abuse.

The onsite audit was completed on 4/8/19 with a closeout briefing with administrative staff. Attendees were the PREA Coordinator, both Justice and Minimum Facility Commander, Justice PREA Compliance Manager and the PREA Manager. Auditor discussed the strengths and weaknesses discovered during the onsite audit phase. Auditor provided administrative staff with the post-audit schedule which included providing agency with the Interim Summary Audit Report within 45 days after the completion of the onsite audit. The auditor and agency will collaborate on the corrective action plans for any identified non-compliance issues. Agency will have 180-days to correct the non-compliant issues after which, the auditor has 30-days to submit the Final PREA Audit Report. Agency has 90-days to upload the Final Report to the agency website for public access.

The agency was informed that if necessary, auditor may need to return to the Justice facility during the 180-day Corrective Action period to verify compliance with the PREA standards that were found non-compliant during the Interim Audit Phase.

## AUDIT FINDINGS

### Facility Characteristics:

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

Minimum Facility which currently houses no inmates is located on the Kern CJ campus and houses general population inmates. The facility has housing units for both female and male inmates. The female inmate population was transferred to other Kern CJ facilities by 6/20/18 and the male population was transferred by 11/10/18 to facilitate renovation of their housing units. The facility houses both male and female General Population inmates. Facility has female barracks 1-3 with 32 beds each, 1 - 14 and 19-22 male barracks with 42 beds each, and 15 - 16 as the new male Mega barracks with 60 beds each.

The female barracks 1-3 and male barracks 19-22 are in need of repair and are considered non-compliant with the PREA standards, pending renovation. The Mega Barracks, 15 -16, which was newly build due to the previous barracks being unlivable due to fire, is the new type of housing facility which is considered state of the art for correctional housing facilities. The electronic monitoring system both outside and inside the facility is impressive. The internal video system has cameras in the bathroom/shower area. Cameras pixilate areas where inmates can toilet and shower independently without being viewed by staff or other inmates. The showers and toilets have doors which provide privacy and allows for staff to view the inmate from shoulders up and knees down for the inmate's safety. Each barracks have internal day rooms and large yard areas outside of the barracks, to include a community recreation shared yard accessible to all housing units.

There is no kitchen or dining hall on the property, but the kitchen is within walking distance from the facility. When inmates were housed at the Minimum facility, they worked in the kitchen.

In response to the implementation of Public Safety Realignment Act (AB109) in 2011, the Kern County Sheriff's Office redirected its focus from delivering standard programming to utilizing data-driven evidence-based curriculum. These programs focus on criminogenic behaviors and promote best practices that aid in the reduction of recidivism. The Population Management, Programs Unit offers an array of services to its incarcerated population. The Programs Unit offers educational, as well as vocational classes in partnership with a multitude of community-based organizations to ensure that quality services are being rendered. Some of the organizations that assist with these services are Kern County Behavioral Health and Recovery Services (BHRS), Garden Pathways, and Bakersfield Adult School. These organizations, along with others, assist the Programs Unit in assisting participants with breaking down their barriers to success.

Evidence-based programs (EBP) offered by the Kern County Sheriff's department are programs that are proven to be effective in reducing recidivism when delivered with complete fidelity. EBP's have had success in creating a positive impact by creating prosocial behaviors.

Currently, Kern County offers the following Evidence Based classes:

#### Seeking Safety

In conjunction with Kern BHRS, the Sheriff's Office offers this evidence-based, cognitive behavioral therapy group. Seeking Safety is a ten-week processing group, for individuals to facilitate their insight/learning into the relationship between trauma and substance abuse. Seeking Safety is run by a

therapist and co-facilitator. It begins and ends every session with a “check-in” to assess current state of feelings and assess for use of positive coping skills (from list of 80 plus skills reviewed each session), unsafe choices over the last week, as well as identifying a self-commitment to improve.

#### **Veterans Program**

The Incarcerated Veterans’ Program began in May 2014. The program is offered to select inmates who are identified at booking as United States Military Veterans. Staff works with local agencies to verify inmate service in the military. Once service has been verified, military documents are ordered for the veteran's condition of discharge, military occupational specialty, and military education. The veterans are provided with additional information of benefits available to them throughout the community. Social workers with the Veterans Outreach Justice Program visit the facility weekly to assist in counseling and other means of assistance. They meet with the veterans to assist with the courts in placing veterans into available veterans residential housing on a case-by-case basis.

#### **Residential Substance Abuse Treatment (RSAT)**

The RSAT program is a grant funded program using Matrix curriculum. RSAT is facilitated by a 100-day treatment program. It includes substance abuse treatment disorder education, case management, employment preparation with the objective of changing criminal thinking and reducing recidivism. RSAT incorporates an in-custody treatment component with multiple evidence based curriculums, a reintegration plan, and aftercare services which include housing and community based treatment. The goals and objectives of the RSAT program directly align with the Sheriff’s goals in reducing recidivism and connecting released inmates with the available social services in the community.

#### **Matrix Program**

The Matrix Model is an evidence-based intensive drug treatment program which teaches inmates about their addiction and helps them identify and examine ways to cope with high-risk situations that lead to relapse. The goal is to create a setting for learning new skills to manage recovery. Inmates attend alternating individual and group sessions as the inmate moves through the stages of recovery.

#### **Moral Reconciliation Therapy (MRT)**

MRT is an evidence-based, cognitive behavioral treatment strategy designed specifically for offender populations. The purpose of MRT is to instill and develop higher levels of moral reasoning in inmates, which leads to moral thinking and behavior. Essentially, MRT teaches the offender to view his actions in relation to society, rather than his own immediate impulses and desires. Offenders learn to abandon their hedonistic, self-centric worldview to become pro-social thinkers and doers – in other words, to become productive, contributing members of society. Over a 20 year span, multiple studies have found that MRT graduates experience a recidivism reduction rate of 25% - 75%, depending on the age and type of offender.

#### **Thinking for a change (T4C)**

In 1998, the National Institute of Corrections produced the first version of Thinking for a Change (T4C). This program combined cognitive restructuring theory with cognitive skills theory to create an innovative and integrated curriculum designed to help individuals in the juvenile and adult justice systems take control of their lives by taking control of their thinking. Since its inception, Thinking for a Change has gone through a number of revisions. T4C has been the subject of many studies and has routinely proven to be effective in reducing recidivism when implemented with integrity.

#### **- Aggression Replacement Therapy (ART)**

- Aggression Replacement Training (ART) is a multi-component cognitive-behavioral treatment to promote pro-social behavior by addressing factors that contribute to aggression, including limited interpersonal social and coping skills, impulsiveness, over-reliance on aggression to meet daily needs, and egocentric and concrete values. - - Aggression Replacement Training has consistently shown positive outcomes across a number of quasi-experimental studies including; reducing criminal behavior, decreased problem behaviors, increasing pro-social behaviors and improved anger control.

In addition these Vocational and Educational Classes are also offered:

- Parents on a Mission (POM)
- Anger Management
- Domestic Violence Intervention Program
- Substance Abuse Program
- Computer
- GED
- Auto Body
- Health
- Food Service/ServSafe Certification
- Life Skills
- Inmate Community Work Crew (Partnership with CalTrans and Kern Council of Governments)

## AUDIT FINDINGS

### Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance. Auditor Note: No standard should be found to be “Not Applicable” or “NA”. A compliance determination must be made for each standard.

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

### INTERIM REPORT FINDINGS: FINAL REPORT FINDINGS:

Number of standards exceeded: 0 Number of standards exceeded: 0

Number of standards met: 26 Number of standards met: 45

Number of standards not met: 19 Number of standards not met: 0

Corrective Action Plans provided below and at the end of each non-compliant standard.

## **Standards**

### **Auditor Overall Determination Definitions**

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

### **Auditor Discussion Instructions**

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

115.11	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.11(a) - Policy P-0100 Zero Tolerance of Sexual Abuse and Sexual Harassment states that the Kern County Sheriff's Office (KCSO) is committed to zero-tolerance of any form of sexual abuse and sexual harassment. A Detentions Bureau PREA Coordinator and Agency PREA Compliance Manager with sufficient authority to develop, implement, and oversee efforts to comply with the PREA standards have been designated. The Administrative Sergeant of each jail facility has been designated as the Facility PREA Compliance Manager. Reports of sexual abuse, or harassment of one inmate by another inmate, or retaliation towards an inmate by another inmate for reporting or cooperating in an investigation of sexual abuse or harassment will be investigated and referred for prosecution when appropriate in accordance with PREA reporting policy P-450.. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. Policy outlines prohibited behaviors and will be thoroughly investigated. Substantiated allegations may result in discipline up to and including termination of employment, cancellation of contract and/or criminal prosecution of staff or inmates. Policy includes description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates.</p> <p>Agency did not provide policy language which outlines how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment as it relates to staff sexual misconduct against inmates.</p> <p>115.11(b) - The agency PREA Coordinator is in the 4th position from the Agency Head and 3rd position from the Undersheriff. a Detentions Bureau PREA Coordinator and Agency PREA Compliance Manager with sufficient authority to develop, implement, and oversee efforts to comply with the PREA standards have been designated. Interview with the PREA Coordinator indicates she has enough time to to conduct PREA Coordinator duties. There is a dedicated Sgt. for each facility who serves as the PREA Compliance manager for each facility. The PREA Coordinator has 5 Compliance Managers who she routinely interacts with. Should a an issue be identified in complying with a PREA standard, she works on changes in policy or reviews . She oversees policy changes, determines how changes may affect other areas of compliance and reference the need of change.</p> <p>Policy P-0100 Zero Tolerance of Sexual Abuse and Sexual Harassment identifies the Administrative Sergeants of each jail facility to be designated as the facility PREA Compliance Manager. The Organizational Chart does not identify PREA Coordinators.</p> <p>There is no indication that the PREA Coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.</p> <p>115.11(c) - PAQ indicates that the agency has not identified a PREA Compliance Manager for any of its facilities. The Organizational Chart does not identify any PREA Compliance Managers, however, Policy P-0100 Zero Tolerance of Sexual Abuse and Sexual Harassment indicates that a Detentions Bureau PREA Coordinator and Agency PREA Compliance Manager with sufficient authority to develop, implement, and oversee efforts to comply with the PREA standards have been designated. The Administrative Sergeant of each jail facility</p>

has been designated as the Facility PREA Compliance Manager. Policy P-0100 Zero Tolerance of Sexual Abuse and Sexual Harassment identifies the Administrative Sergeants of each jail facility to be designated as the facility PREA Compliance Manager. The Organizational Chart does not identify PREA Coordinators. The Minimum facility PREA Compliance Manager was active up to 2 months ago. There is no PREA Compliance Manager currently assigned to Minimum facility since March 2019. She agreed to speak with me to answer the questions of her former facility. Interview with the former PREA Compliance Manager indicates that she has the appropriate amount of time to manage his PREA related responsibilities. She reports to the PREA Coordinator regarding PREA issues.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.11(a), 115.11(b) and 115.11(c). Corrective action is required.

**Corrective Action Recommended:**

1. Agency to amend Policy P-0100 Zero Tolerance of Sexual Abuse and Sexual Harassment to include language which outlines how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment as it relates to staff sexual misconduct against inmates.

2. Policy P-0100 Zero Tolerance of Sexual Abuse and Sexual Harassment identifies the Administrative Sergeants of each jail facility to be designated as the facility PREA Compliance Managers. The facility has not designated a PREA Compliance Manager for the facility as it does not have any inmates and the PREA Compliance Manager left the position two months ago and there has not been any formal replacement. The Organizational Chart does not identify PREA Compliance Managers for any of the facilities. Agency to provide auditor with the duty statement of the PREA Compliance Manager for the Lerdo Minimum facility which designates the facility Administrative Sergeant as the PREA Compliance Manager and outlines his/her duties.

Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.

**Corrective Action Completion 10/26/19 :**

1. On 8/14/19, Agency provided auditor with Policy P-100 Zero Tolerance of Sexual Abuse and Sexual Harassment updated on 3/30/19. Policy provides for PREA definitions and states that:

The Kern County Sheriff's Office (KCSO) is committed to zero-tolerance of any form of sexual abuse and sexual harassment. The purpose of this policy is to set forth KCSO's zero tolerance policy toward all forms of sexual abuse, sexual harassment and retaliation for reporting or cooperating with investigations. It will also outline KCSO's commitment to preventing, detecting and responding to sexual abuse and harassment.

The Detentions Bureau is committed to enforcing the standards set forth by the Prison Rape Elimination Act (PREA). In support of KCSO's zero-tolerance of sexual abuse of inmates, a Detentions Bureau PREA Coordinator and Agency PREA Compliance Manager with sufficient authority to develop, implement, and oversee efforts to comply with the PREA standards have



been designated. The Administrative Sergeant of each jail facility has been designated as a

Facility PREA Compliance Manager to coordinate the PREA compliance efforts for their respective facilities.

All Detentions Bureau staff, detentions staff assigned to a sub-station jail, medical and mental health staff, contractors, and volunteers are expected to know and adhere to this policy and its directives.

Reports of sexual abuse, or harassment of one inmate by another inmate, or retaliation towards an inmate by another inmate for reporting or cooperating in an investigation of sexual abuse or harassment will be investigated and referred for prosecution when appropriate in accordance with the PREA reporting policy, Section P-450 of the DBPPM.

2. Interview with PREA Compliance Manager indicates she has sufficient time to implement PREA mandates within the facility. She coordinates policies and procedures needed to get the facility within compliance with the PREA standards. Ongoing review of the physical plant is essential to identifying issues and working towards compliance. Good connection with staff is required.

3. 10/18/19, the PREA Manager provided auditor with copy of the duty statement/Post Order of the Minimum Facility Support Sergeant. The Support Sergeant serves as the facility PREA Compliance Manager who has the influence necessary to lead, coordinate, guide, and monitor successful ongoing implementation of policies and procedures that comply with the PREA standards across all departments/divisions within the facility, with support from other levels of facility supervision, and in accordance with the PREA standards and interpretive guidance issued by DOJ.

The agency/facility has met the requirements of Standard provision(s) 115.11(a), 115.11(b) and 115.11(c) completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.11.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.12(a) &amp; 115.12(b): The agency has not entered into or renewed a contract for the confinement of inmates on or after August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.12."</p>

115.13	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p><b>115.13(a): P-0200 Prevention And Detection Of Sexual Abuse mandates that the staffing plans shall adhere to all state and local laws, regulations, standards and generally accepted detention and correctional practices, with an emphases on preventing and detecting sexual abuse, assault, or harassment of inmates in accordance with federal Prison Rape Elimination Act standards.</b></p> <ul style="list-style-type: none"> <li>- Each facility staffing plan shall consider all components of PREA standard §115.11, including but not limited to facility structure, required daily operations, and the availability of any video monitoring equipment.</li> <li>- Individual facility staffing plans shall identify the staff positions necessary for full operational needs, limited operational needs, and the operational needs during critical incidents or emergency operations.</li> <li>- Facility shift staffing schedules shall be prepared in accordance with the facility staffing plan, and any circumstances where the staffing plan is not complied with shall be documented in the facility shift supervisor log book.</li> <li>- Each facility staffing plan shall be reviewed annually by the section manager and the PREA coordinator to assess any necessary adjustments to the staffing plan and the monitoring systems.</li> </ul> <p><b>DBPPM P-200 Attachment C provides only the basic security staffing numbers for all 4 squads on each shift for Sergeant Senior - Normal, Limited and Restricted operations. There does not seem to be a staffing plan that provides discussion required in standard 115.13(a) criteria 1 thru11.</b></p> <p><b>Interview with Facility Commander indicates that the facility documents all instances of non-compliance with the staffing plan. The documentation is maintained in a log book. If the staffing falls below minimum requirements, the number of negative staffing and justification for falling below minimum staffing level is noted.</b></p> <p><b>Minimum facility currently has no inmates and has skeleton crew of staff to maintain operational readiness.</b></p> <p><b>Interview with the former Facility Compliance Manager indicates that she was not involved in discussion of staffing levels but assisted if asked. She was not a direct participant in staffing plan preparations or reports.</b></p> <p><b>115.13(b): Agency indicates that e-mail correspondence is provided in daily briefing e-mails. If documented, the most common reason for deviating from the staffing plan in the past 12 months is medical transports and sick leaves. Minimum facility currently has no inmates and has skeleton crew of staff to maintain operational readiness.</b></p> <p><b>115.13(c): P-0200 Prevention And Detection Of Sexual Abuse mandates that the staffing plans shall adhere to all state and local laws, regulations, standards and generally accepted detention and correctional practices, with an emphases on preventing and detecting sexual abuse, assault, or harassment of inmates in accordance with federal Prison Rape Elimination Act standards.</b></p> <ul style="list-style-type: none"> <li>- Each facility staffing plan shall consider all components of PREA standard §115.11, including but not limited to facility structure, required daily operations, and the availability of any video</li> </ul>

monitoring equipment.

- Individual facility staffing plans shall identify the staff positions necessary for full operational needs, limited operational needs, and the operational needs during critical incidents or emergency operations."
- Facility shift staffing schedules shall be prepared in accordance with the facility staffing plan, and any circumstances where the staffing plan is not complied with shall be documented in the facility shift supervisor log book.
- Each facility staffing plan shall be reviewed annually by the section manager and the PREA coordinator to assess any necessary adjustments to the staffing plan and the monitoring systems.

**115.13(d):** The facility requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Policy P-0200 Prevention And Detection Of Sexual Abuse mandates that Kern County Sheriff's Office (KCSO) normal operation procedures require facility supervisors to make unannounced supervisory checks of each post during each shift. The supervisory checks will be documented in the post log book. Staff members are prohibited from alerting other staff that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility. Minimum Section supervisors will inspect the gate one and gate five posts, the Lerdo complex kitchen, and laundry area as part of their regular supervisory checks. Except for work areas that are not operational during holidays or weekends, these inspections are required to be performed each day unannounced and at random times by each shift supervisor. Agency has not had any inmates since 11/10/18 and skeleton staffing after that to maintain operational readiness. Agency provided post log book for which identifies facility management staff conducting unannounced rounds from 1/5/18 to 1/16/18.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.13(a). Corrective action is required.

**Corrective Action Recommendation:**

1. Agency to provide auditor with the copy of the latest staffing plan for compliance verification. Staffing plan to discuss the 11 criteria outlined in Standard provision 115.13(a).

Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.

**Corrective Action Completion 11/20/19:**

1. On 11/20/19, the PREA Manager provided auditor with copy of the Minimum Facility 2018 staffing plan which complies with standard provision 115.13(a) and provides responses to the considerations mandated by that standard provision. Agency to conduct a written Staffing Plan review for 2019.

On 11/21/19, the Agency PREA Coordinator provided auditor with the 2019 Staffing Plan review memorandum dated 11/21/19 for the Lerdo Minimum Facility. The memorandum serves to document the 2019 review of the Kern Minimum Facility Staffing Plan 2018, pursuant to Section P-200 of the Detentions Bureau Policy and Procedure Manual. The review

of the facility staffing plan was conducted by the Facility Manager and the Agency PREA

**Coordinator.**

**The 2019 Staffing Plan Review did not indicate the need for adjustment to the facility's staffing level as compared to the staffing levels established in 2018. Staffing levels for the facility will remain as described in Section P-200 of DBPPM and the above-mentioned 2018 staffing plan until further notice.**

**The agency/facility has met the requirements of Standard provision(s) 115.13(a), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.13.**

<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p><b>115.14(a) - Policy P-0400 Vulnerable PREA Populations mandates that KCSO will not knowingly book or detain persons under the legal age of eighteen. Inmates determined after booking and/or housing to be juveniles shall be transferred to an appropriate juvenile facility.</b></p> <ul style="list-style-type: none"> <li><b>• Inmates claiming to be juveniles shall be given the opportunity to verify their age through legal documentation either from their property or so presented by a family member.</b></li> <li><b>• Inmates determined to be juveniles shall immediately be moved to a location away from sight and sound of adult inmates.</b></li> <li><b>• Security staff shall continuously monitor the juvenile by direct supervision, until transfer to an appropriate juvenile facility or release by court order can be performed.</b></li> </ul> <p><b>115.15(b) - N/A - No youthful inmates housed in the adult facilities. In the past 12 months, there are no housing units to which youthful inmates are assigned that provide sight and sound no youthful inmates placed in SAME HOUSING UNIT as adults at this facility.</b></p> <p><b>115.15(c) - N/A - No youthful inmates housed in the adult facilities. In the past 12 months, no youthful inmates were placed in SAME HOUSING UNIT as adults at this facility.</b></p> <p><b>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.14.</b></p>

115.15	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p><b>115.15(a): Policy P-0200 Prevention And Detection Of Sexual Abuse mandates that "KCSO shall conduct all searches of inmates in a professional, equal and impartial manner so as not to harass or cause humiliation to the inmate. Pat-down searches shall be performed as follows:</b></p> <p><b>Lerdo / CRF:</b></p> <p><b>Cross gender pat-down searches are not performed except in exigent circumstances. Lock-ups (Mojave Substation / Ridgecrest Jail):</b></p> <ul style="list-style-type: none"> <li>• <b>Cross gender pat-down searches of female inmates by male staff are permitted under exigent circumstances.</b></li> <li>• <b>Cross gender pat-down searches of females by male staff shall be conducted utilizing the least intrusive methods such as "back of the hand" search techniques as taught by the Defensive Tactics team.</b></li> <li>• <b>Cross gender pat-down searches of male inmates by female staff are permitted in lock-ups and shall be done in the least intrusive and professional manner."</b></li> </ul> <p><b>In the past 12 months, there has been no cross-gender strip or cross-gender visual body cavity searches of inmates. In the past 12 months, there have been no cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff.</b></p> <p><b>115.15(b): Policy P-0200 Prevention And Detection Of Sexual Abuse mandates that "Cross gender pat-down searches are not performed except in exigent circumstances." The facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. No record of pat-down searches of female inmates conducted by male staff. No record of pat-down searches of female inmate conducted by male staff that did not involve exigent circumstances.</b></p> <p><b>115.15(c): Policy P-0200 Prevention And Detection Of Sexual Abuse mandates that strip searches and/or visual body cavity searches will be conducted by a staff member of the same gender as the inmate being searched.</b></p> <p><b>115.15(d): P-0200 Prevention And Detection Of Sexual Abuse mandates that, ""Inmates will be able to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. When entering an opposite sex housing unit (Male deputy entering female housing, female deputy entering male housing) deputies are required to announce their presence, have their presence announced, or otherwise ensure inmates are informed they will be or are entering the housing unit. Notification methods may include;</b></p> <ul style="list-style-type: none"> <li>- <b>Public Address (PA) system announcements</b></li> <li>- <b>Personal announcement at unit door prior to viewing any toilet area</b></li> <li>- <b>Notifications shall be documented in the housing log book, control room log book, or</b></li> <li>- <b>Minimum barracks security check log sheet as "entrance notice given.</b></li> </ul>



- Minimum Section deputies will notify the Female Minimum Duty deputy via radio that they have given an entry notice when calling in their barracks safety / security checks.

- Female staff members are required to announce themselves prior to walking into a men's shower or bathroom area regardless of any inmate warning at housing unit entrance. Monitors viewed by staff showing inmates of the opposite gender while they are showering, performing bodily functions, or changing clothing, shall have the toilet area obscured for privacy.

Interview with 1 random sample of staff indicates when inmates were housed at the Minimum facility, he is required to announce his presence "Male on Deck" when entering housing barracks in the female section of Minimum facility. The female minimum barracks is completely sectioned off and secure from the male housing units in Minimum. Interview with female staff member who is assigned to the Maximum Medium facility indicates that she announced when entering a Minimum housing unit "officer on the floor", inmates are able to dress, shower and toilet without being viewed by staff of the opposite gender.

Minimum facility currently has no inmates and has skeleton crew of staff to maintain operational readiness. No inmates available to interview as verified through the onsite physical plant review..

During the onsite physical plant review, auditor discovered that the minimum facility is currently undergoing renovation. No inmates housed at the facility. The only operational housing units are housing units 15 & 16. These units are newer units as prior units burned down previously. These units are state of the art detention housing units. Inmates are able to shower, change clothing and use the toilet without non-medical staff members of the same gender viewing inmates in an undressed state. Housing units Female 1 - 3 was found to have no curtains on the showers or privacy barriers for toileting. Primarily female staff were assigned to supervise the female housing units. If male staff were assigned, they are mandated to conduct the gender specific announcement prior to entering the housing unit. Male units 1 - 14, 19 - 22 were found to have no curtains on the showers or privacy barriers for toileting. If cross-gender staff entered the housing unit, they could view the 1st toilet from the entry doors.

115.15(e): PREA Intake and Screening mandates that receiving staff shall "Ensure inmates are provided bilingual staff, appropriate language interpreter, or language line services for intake questions, if necessary.

- Provide same gender staff for "pat-down" or "body scanner" searches;

- Inmates identifying as transgender or intersex, should be referred to the supervisor if objections are made to the gender of the searching staff.

- If the inmate's genital status is unknown, it may be determined through conversations with the inmate, or by having medical staff review the inmate's records. Staff will not physically examine or conduct a strip search solely to determine the inmate's genital status." No records of any such searches occurred in the past 12 months. Minimum facility currently has no inmates and has skeleton crew of staff to maintain operational readiness. No inmates available to interview as verified through the onsite physical plant review..

115.15(f): Agency reports that 100% of staff assigned to the Minimum facility has received training on cross-gender, pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs. Agency provided auditor with electronic training records from 4/4/18 to 11/13/18 which verifies that 85 staff, assigned to Minimum facility has completed the cross-gender, pat-down searches and

searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs as part of their PREA training.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.15(d) and corrective action is required.

**Corrective Action Recommended:**

Minimum facility is pending renovation but is still available to house inmates . Housing units Female 1 - 3 was found to have no curtains on the showers or privacy barriers for toileting. Male housing units 1 - 14, 19 - 22 were found to have no curtains on the showers or privacy barriers for toileting. If cross-gender staff entered the male inmate housing unit, they could view the 1st toilet from the entry doors.

1. Agency to implement procedures and/or provide barriers that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks

Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19

**Corrective Action Completion 11/20/19:**

On 11/20/19, the PREA Manager provided the auditor photos of men's barracks 1 thru 22 and female barracks 1 thru 3, which identifies installed shower curtains, toilet barriers and sexual abuse reporting information posters between the phones of each barrack.

The agency/facility has met the requirements of Standard provision(s) 115.15(d), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.15.

115.16	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p><b>"115.16(a): P-0300 Employee Training and Inmate Education mandates that "KCSO will provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills.</b></p> <p><b>Upon intake, inmate orientation information will be provided through;</b></p> <ul style="list-style-type: none"> <li><b>• An informational video with audio in both English and Spanish;</b></li> <li><b>• Staff led informational classes with printed materials</b></li> </ul> <p><b>Medical or mental health staff will help an inmate with a disability understand intake or comprehensive information if the inmates' disability or impairment prevents them from understanding such material.</b></p> <p><b>115.16(b): P-0300 Employee Training and Inmate Education mandates that "KCSO will provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. P-0400 Vulnerable PREA Populations mandates that KCSO shall provide hearing impaired inmates with TTY devices and/or language interpreters who can interpret effectively, accurately, and impartially, its efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Interview with Agency Head designee indicates that the agency established procedures to accommodate inmates with disabilities through providing information in different languages, PREA video and brochures in both English, Spanish and braille. They also provide non-English speaking inmates communication through the Language Line services contracted by the agency.</b></p> <p><b>Interview with inmate who is LEP indicates through staff interpreter that female staff announce their presence when entering the housing unit. He is never naked in full view of staff. The facility provides information in Spanish and he has used Language Line interpreters before as provided by the agency.</b></p> <p><b>115.16(c): P-0400 Vulnerable PREA Populations mandates that KCSO shall provide hearing impaired inmates with TTY devices and/or language interpreters who can interpret effectively, accurately, and impartially, its efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</b></p> <ul style="list-style-type: none"> <li><b>- KCSO will provide written materials using formats and methods that ensure effective communication with inmates with disabilities.</b></li> <li><b>- KCSO shall not utilize inmate interpreters unless necessary for the safety of the inmate or an officer.</b></li> </ul> <p><b>P-0300 Employee Training and Inmate Education mandates that "KCSO will provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. P-0400 Vulnerable PREA Populations mandates that KCSO shall provide hearing impaired inmates with TTY devices and/or language interpreters who can interpret effectively, accurately, and impartially, its efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</b></p> <p><b>Minimum facility currently has no inmates and has skeleton crew of staff who are assigned to</b></p>

**Minimum and Medium facility to maintain operational readiness. No inmate interviews conducted.**

**Interview with Agency Head designee indicates that the agency established procedures to accommodate inmates with disabilities through providing information in different languages, PREA video and brochures in both English, Spanish and braille. They also provide non-English speaking inmates communication through the Language-Line services contracted by the agency.**

**Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.16(c).**

115.17	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.17(a) - Policy P-0900 PREA Hiring Promotions and Discipline states that "KCSO shall not hire, promote, or contract with anyone who has engaged, or attempted to engage in sexual abuse in a penal institution or who has been convicted of engaging in non-consensual sexual activity accomplished by force, threats, or other forms of coercion. KCSO shall not hire, promote or contract with anyone who has a civil judgment or administrative adjudication against them for engaging, or attempting to engage in non-consensual sexual activity accomplished by force, threats or other forms of coercion."</p> <p>There were no assigned staff, contractors or volunteers for the Minimum facility since November 2018 per interview with the Facility Commander. The staff was transferred to other facilities such as Maximum/Medium and Justice as the Minimum facility was pending renovation. Auditor reviewed personnel records of random sample of 20 custody staff and 10 contractors assigned to the Justice facility. Out of the 20 personnel staff records, 4 that were hired prior to the implementation of PREA were promoted within the past 7 years. None of these staff members possessed the 3 required questions as part of their promotional applications or provided during the promotional interview. Of the 10 contractor files that were reviewed, 1 was not cleared to enter the facility and does not work for the agency. out of the remaining 9 contractors, 2 did not possess the required questions as mandated in standard provision 115.17(a). Their hire dates were 2017 &amp; 2018. The remaining 7 randomly selected contractors possessed the required questions.</p> <p>115.17(b) - 115.17(b): P-0900 PREA Hiring Promotions and Discipline mandates that "KCSO requires all applicants to disclose on their Personal History Statement Application any accusation of discrimination against them, (including, but not ""limited to, sexual harassment, racial bias, sexual orientation harassment) by a co-worker, superior, subordinate, or customer."" Consideration for promotion or special assignment which will require inmate contact shall include a review of the employee's D-500 file, EPR, agency personnel file and/or county personnel file to ensure no allegations of sexual abuse or harassment have been made and substantiated.</p> <p>Interview with HR staff indicates that the facility considers prior incidents of sexual harassment when determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.</p> <p>115.17(c) - P-0900 PREA Hiring Promotions and Discipline mandates that "KCSO performs a criminal history records check on all applicants, which may include the submission of finger prints to DOJ and FBI."KCSO requires all applicants to disclose on their Personal History Statement Application any accusation of discrimination against them, (including, but not limited to, sexual harassment, racial bias, sexual orientation harassment) by a co-worker, superior, subordinate, or customer. KCSO contacts prior employers to learn of any past performance, behavior, or legal issues that could be deemed disqualifying for employment, including substantiated allegations or resignations while an investigation is pending.</p> <ul style="list-style-type: none"> <li>- For contractor and volunteer applicants, KCSO may contact prior employers dating back five years.</li> <li>- For civilian applicants, KCSO will contact prior employers dating back ten years.</li> </ul>

- For peace officer applicants, KCSO will contact all prior employers. KCSO provides the following admonition to all applicants in writing;
- Deliberate misstatements or omissions can and often will result in your application being rejected, regardless of the nature or reason for the misstatements/omissions. KCSO sends inquiry letters to all law enforcement agencies adjacent to each of applicants' prior residences

to learn of any activities or actions that could disqualify applicants for employment."

KCSO is a subscriber to both DOJ and FBI's fingerprint alert system. For the duration of their employment, KCSO will receive notification of any arrest and the charges against any employee or contractor. In the past 12 months, agency indicates that 100 people hired who may have contact with inmates have had criminal background record checks.

Interview with HR staff indicates that the agency performs criminal record background checks utilizing the CLETS system, LiveScan, NCIC, CJIS and FBI clearances for employees, contractors and volunteers. Review of 20 staff and 10 contractor personnel records verifies the HR staff statement.

115.17(d) - 115.17(d): P-0900 PREA Hiring Promotions and Discipline mandates that "KCSO performs a criminal history records check on all applicants, which may include the submission of finger prints to DOJ and FBI. KCSO requires all applicants to disclose on their Personal History Statement Application any accusation of discrimination against them, (including, but not limited to, sexual harassment, racial bias, sexual orientation harassment) by a co-worker, superior, subordinate, or customer. KCSO contacts prior employers to learn of any past performance, behavior, or legal issues that could be deemed disqualifying for employment, including substantiated allegations or resignations while an investigation is pending.

- For contractor and volunteer applicants, KCSO may contact prior employers dating back five years.
- For civilian applicants, KCSO will contact prior employers dating back ten years.
- For peace officer applicants, KCSO will contact all prior employers."

In the past 12 months, 100% of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates. Interview with HR staff indicates that the agency performs criminal record background checks utilizing the CLETS system, LiveScan, NCIC, CJIS and FBI clearances for employees, contractors and volunteers. Review of 20 staff and 10 contractor personnel records verifies the HR staff statement.

115.17(e) - 115.17(e): P-0900 PREA Hiring Promotions and Discipline mandates that "KCSO is a subscriber to both DOJ and FBI's fingerprint alert system. For the duration of their employment, KCSO will receive notification of any arrest and the charges against any employee or contractor."

Interview with HR staff indicates that the agency has a system in place that notifies the agency of any criminal activity for employees and contractors. Due to initial LiveScan, anytime a hit comes on the FBI system, the agency is notified.

115.17(f) - 115.17(f): P-0900 PREA Hiring Promotions and Discipline mandates that "KCSO will impose on its employees a continuing affirmative duty to disclose any misconduct that may disqualify an applicant from employment or that may merit discipline of an employee. This

includes written applications, personal history statements, interviews for hiring and/or

promotions, and written self-evaluations."

Interview with HR staff indicates that all applicants and employees who may have contact with inmates about previous misconduct described in standard provision 115.17(a) in written applications for hiring and promotions. The facility imposes upon employees a continuing affirmative duty to disclose any such previous misconduct. This statement is provided in department policy and the employee conduct hire packet which was provided to auditor during the onsite visit.

**115.17(g): Policy P-0900 PREA Hiring Promotions and Discipline mandates that material omissions regarding such misconduct or the provision of materially false information shall be grounds for termination. Unless prohibited by law, KCSO will provide to prospective employers information regarding substantiated allegations of sexual abuse or sexual harassment involving a present or former employee."**

**115.17(h): Policy P-0900 PREA Hiring Promotions and Discipline mandates that "unless prohibited by law, KCSO will provide to prospective employers information regarding substantiated allegations of sexual abuse or sexual harassment involving a present or former employee."**

Interview with HR staff indicates that when a former employee applies for work at another institution, upon request from that institution via an employee signed release, agency shall provide information on substantiated allegations of sexual abuse or sexual harassment.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.17(a) and corrective action is required.

**Corrective Action Recommendation:**

1. Agency to provide auditor with personnel files of all staff and contractors who were hired between 6/1/19 and 9/1/19 to verify that the 3 questions as mandated in standard provision 115.17(a) has been provided and verified prior to the hiring and promotion of staff and the hiring of contractors.

Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.

**Corrective Action Completion 11/4/19:**

1. 11/4/19, PREA Manager provided auditor with PREA 3 require questions for the Promotional Questionnaire with the only employees promoted between 6/1/19 and 9/1/19 (2). Auditor was also provided with the 3 required questions with the only employee hired between 6/1/19 and 9/1/19. The documents verify that the Agency is compliant with Standard provision 115.17(a) and maintains documentation which verifies that compliance.

The agency/facility has met the requirements of Standard provision(s) 115.17(a), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.17.



115.18	<p><b>Upgrades to facilities and technologies</b></p> <p><b>Auditor Overall Determination: Meets Standard</b></p> <p><b>Auditor Discussion</b></p> <p>"115.18(a): P-0200 Prevention And Detection Of Sexual Abuse mandates that, "When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, KCSO will consider the effect of the design, acquisition, expansion, or modification upon its ability to protect inmates from sexual abuse."  Interview of Agency Head designee and facility commander indicates that agency modified the Kern County Minimum facility a few years by building two new housing units to replace 2 housing units that were deemed below living standards. Minimum facility is currently closed fir renovation. The Justice facility is approximately 2 years old. Recently installed a pre-trial camera system upgrade. Review of the Justice facility verifies the upgrades and observations indicates the facility is very new. Review of the Minimum facility verifies that the majority of the living units are barely usable in need of replacement. The two new housing units were reviewed. Auditor found both units to have upgraded video surveillance systems and designs which are PREA compliant."</p> <p>115.18(b): P-0200 Prevention And Detection Of Sexual Abuse mandates that, "When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, KCSO will consider how such technology may enhance its ability to protect inmates from sexual abuse."  Interview with Agency Head designee and facility commander indicates that the Justice facility is approximately 2 years old. Agency recently installed a pre-trial camera system upgrade at the Lerdo Justice facility</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.18.</p>
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115.21	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.21(a) - Policy P-0600 PREA - Criminal and Administrative Investigations mandates that the Kern County Sheriff's Office (KCSO), as a law enforcement agency shall promptly, thoroughly, and objectively investigate all reports of inmate sexual assault, abuse, harassment, or retaliation occurring in its custodial facilities, including third-party and anonymous reports. Investigations shall be conducted utilizing standard investigation methods in accordance with all laws. No standard higher than a preponderance of the evidence shall be used in determining whether allegations of sexual abuse or sexual harassment are substantiated in administrative investigations. Agency conducts both administrative and criminal investigations. Interview with 2 random sample of staff indicates that the agency is responsible to investigate both criminal and administrative sexual abuse investigations. The on- duty supervisor Senior staff member initiates the investigation. Line staff do not investigate sexual abuse allegations.</p> <p>115.21(b) - This is an adult institution and protocol is not developmentally appropriate for youth as this is an adult facility. No youth are housed in this facility. Policy P-0600 PREA - Criminal and Administrative Investigations indicates that investigations shall be conducted utilizing standard investigation methods in accordance with all laws. Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, and witnesses; and shall review prior complaints and reports of sexual abuse involving the victim and suspected perpetrator(s). Investigations shall shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. Felony sexual assault or abuse incidents will be investigated by the Sexual Assault and Abuse Investigations Unit (SAAIU). Misdemeanor sexual assault or abuse incidents will be investigated by a Detentions Senior Deputy who has completed sexual assault investigations training. Reports of staff sexual misconduct shall be investigated by Internal Affairs and SAAIU." Agency has not provided information as to what the investigative protocol was adapted from or based upon as required per the standard provision.</p> <p>115.21(c) - P-0550 Victim Services Response Plan mandates that the agency shall provide all victims of sexual abuse access to forensic medical examinations at an approved contracted hospital providing evidentiary or medically appropriate care. The examinations will be performed by a Sexual Assault Nurse Examiner (SANE). SAFE/SANE's are available-on-call 24/7 at San Joaquin Hospital - SANE/SART. Forensic medical examinations are offered without financial cost to the victim. The facility documents efforts to provide SANEs or SAFEs. No forensic exams were performed by a qualified medical practitioner during he past 12 months.</p> <p>115.21(d) - P-0550 Victim Services Response Plan states that KCSO contracts with a provider of professional rape crisis advocate counseling services for inmates sexually abused or assaulted during incarceration. Agency provided auditor with a signed copy of the Womens Center High Desert (WCHD) 2016-2018, WCHD MOU Extension - signed &amp; expires 6/30/18,</p>

and WCHD Grant Memorandum of Agreement which provides sexual assault counselors for SART team hospital accompaniment which includes the following:

- Ensure sexual assault counselor(s) are appropriately trained.
- Work with Responsible County Department background section for necessary security clearance(s)
- Provide Emergency Sexual Assault response Team (SART) hospital accompaniment.
- Arrange accompaniment with qualified organization on Consultant's behalf if delayed due to distance, weather, or response time.
- Provide (50) on-site, one-on-one counseling of inmates; Monday-Friday (8 hours per visit) excluding weekends and holidays each contract year.
- Provide "hotline" phone services for inmates Monday-Friday 8:00 a.m. to 5:00 p.m.
- Provide bi-lingual counseling for inmates, as necessary.
- Provide in person victim support during investigation interviews, as requested by inmate.
- Consult with Correctional Mental Health as necessary, within confines of confidentiality requirements.
- Administer inmate case files and reports.
- Attend in person or phone consultations / meetings with Responsible County Department staff as necessary.
- Participate in any Prison Rape Elimination Act (PREA) audit process.

The examinations will be performed by a Sexual Assault Nurse Examiner (SANE).

SAFE/SANE's are available-on-call 24/7 at San Joaquin Hospital - SANE/SART. Forensic medical examinations are offered without financial cost to the victim. The facility documents efforts to provide SANEs or SAFE's. No forensic exams were performed by a qualified medical practitioner during the past 12 months. Interview with the former PREA Compliance Manager indicates that when requested by the victim, a victim advocate is provided to provide emotional support, crisis intervention, information and referrals during the forensic medical examination process and investigatory interviews.

Inmates have not been housed in the Minimum facility since 11/10/18 due to renovation. No inmate interviews conducted.

115.21(e) - P-0550 Victim Services Response Plan mandates that per KCSO's victim advocate agreement, the victim advocate shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals, as requested by the victim. Agency provided auditor with copies of Women's Center High Desert (WCHD 2016-2018 PPSA Amendment) signed & expires 6/30/18, WCHD MOU Extension and WCHD Grant Memorandum of Agreement.

115.21(f) - Standard provision 115.21(f) is not applicable as agency/facility is responsible for conducting administrative and criminal sexual abuse investigations.

115.21(g) - Standard provision 115.21(g) is not applicable as the agency/facility is responsible for conducting criminal and administrative sexual abuse investigations.

115.21(h) - P-0550 Victim Services Response Plan mandates that KCSO contracts with a provider of professional rape crisis advocate counseling services for inmates sexually abused or assaulted during incarceration." Per KCSO's victim advocate

agreement, the victim advocate shall accompany and

support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals, as requested by the victim. KCSO shall provide inmates with access to outside victim advocates for ongoing emotional support services related to sexual abuse by giving inmates access to a rape crisis counseling line. In addition, inmates shall be provided addresses of victim advocate providers and, for persons detained solely for civil immigration purposes, designated immigrant services agencies in Kern County. KCSO shall enable reasonable communication between inmates and community based services, in as confidential a manner as possible. KCSO will 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."

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.21(b) and corrective action is required.

**Corrective Action Recommendation:**

1 - Agency needs to provide information as to what the investigative protocol was adapted from or based upon as required per the standard provision.

Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.

**Corrective Action Completion 10/26/19:**

1. PREA Manager indicated that the Uniform Evidence Protocol used to maximize the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions is the US Dept. of Justice Office on Violence Against Women Publication. A National Protocol for Sexual Assault Medical Forensic Examinations, Adult/Adolescents.

The agency/facility has met the requirements of Standard provision(s) 115.21(b), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.21.

115.22	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.22(a) - Policy P-0600 PREA - Criminal and Administrative Investigations mandates that the Kern County Sheriff's Office (KCSO), as a law enforcement agency shall promptly, thoroughly, and objectively investigate all reports of inmate sexual assault, abuse, harassment, or retaliation occurring in its custodial facilities, including third-party and anonymous reports. In the past 12 months, 9 allegations of sexual abuse and sexual harassment were received. Two allegations resulting in an administrative investigation. None of these allegations were referred for criminal investigations. In reference to allegations received during the past 12 months, all administrative and/or criminal investigations were completed. Agency provided auditor with all 9 investigations of sexual abuse and sexual harassment</p> <p>Interview with Agency Head designee indicates that the agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Description of conducting these investigations is as follows:</p> <ul style="list-style-type: none"> <li>a) Initial statement is taken by Senior Deputies who have completed sexual abuse investigator training</li> <li>b) Sexual Assault Unit is tapped to come out and start the investigation for serious cases</li> <li>c) Internal Affairs conducts investigations in conjunction with the Sexual Assault Unit</li> </ul> <p>115.22(c) - Policy P-0600 PREA - Criminal and Administrative Investigations indicates that the agency conducts both criminal and administrative investigations. The agency's policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the agency website or made publicly available via other means. The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation. Interview with investigative staff indicates that they conduct their own sexual abuse and sexual harassment administrative and criminal investigations.</p> <p>115.22(d) - Standard provision 115.22(c) does not apply as the agency/facility is responsible for criminal investigations.</p> <p>115.22(e) - N/A - The agency/facility is responsible for conducting both administrative and criminal investigations.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.22(e).</p>

115.31	<b>Employee training</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.31(a) - Policy P-0300 Employee Training and Inmate Education mandates KCSO shall provide staff training on sexual abuse and sexual harassment through classroom training upon hiring and through refresher courses. All trainings shall be provided in a format based upon the level of contact with inmates and the training. Male and female staff work in both male and female facilities and trainings will be tailored to both genders. Requirements stipulated by the PREA Standards indicate that KCSO will train all employees who may have contact with inmates on:</p> <ul style="list-style-type: none"> <li>• KCSO's zero-tolerance policy for sexual abuse, sexual harassment and retaliation;</li> <li>• How to fulfill their responsibilities regarding prevention, detection, reporting, and response to sexual abuse and sexual harassment;</li> <li>• Inmates' right to be free from sexual abuse and sexual harassment;</li> <li>• The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;</li> <li>• The dynamics of sexual abuse and sexual harassment in confinement;</li> <li>• The common reactions of sexual abuse and sexual harassment victims;</li> <li>• How to detect and respond to signs of threatened and actual sexual abuse;</li> <li>• How to avoid inappropriate relationships with inmates;</li> <li>• How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and</li> <li>• How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</li> </ul> <p>PREA Training 2014-2015 - revised, is a six hour lesson plan which trains all employees who may have contact with inmates on the agency's zero-tolerance policy for sexual abuse and sexual harassment. PREA Refresher 2 hrs - Lesson Plan-Outline is a PREA refresher training outline. Interview with 2 random sample of staff indicates that they both participated in the PREA refresher training between 2018 and 2019 as they are required to take this training bi-annually.</p> <p>Review of random sample of the two skeleton staff training records indicates that both completed the initial PREA education after their initial hire date. One staff member was hired 25 years ago and had initial PREA bi-annual training in December 2017. The other randomly selected staff member was hired in April 2017 and had the last bi-annual refresher training in 2018.</p> <p>115.31(b) - PREA Training 2014-2015 - revised is a six hour lesson plan which trains all employees who may have contact with inmates on the agency's zero-tolerance policy for sexual abuse and sexual harassment, tailored for all inmates assigned to the facilities. Policy P-0300 Employee Training and Inmate Education mandates that male and female staff who work in both male and female facilities, trainings will be tailored to both genders. PREA Refresher 2 hrs - Lesson Plan-Outline is a 2 hour lesson plan tailored for all inmates assigned to the facilities, which provides instruction on the following topics:</p> <ul style="list-style-type: none"> <li>- Federal Legislation "</li> <li>- Inmate Rights</li> <li>- LGBTI Issues</li> </ul>

- Prevention of abuse
- Detection of abuse
- Investigating abuse
- Reporting abuse
- Miscellaneous
- Policies Plus

115.31(c) - Agency provided auditor with copy of the PREA Refresher 2 hrs - Lesson Plan-Outline, which is a 2 hour lesson plan tailored for all inmates assigned to the facilities, which provides instruction on the following topics:

- Federal Legislation
- Inmate Rights
- LGBTI Issues
- Prevention of abuse
- Detection of abuse
- Investigating abuse
- Reporting abuse
- Miscellaneous
- Policies Plus

Frequency in which employees who have contact with inmates receive refresher training on PREA requirements is 1-2 years. Agency has not provided auditor with a sample of training records for staff assigned to the Minimum Facility

115.31(d) -Policy P-0300 Employee Training and Inmate Education mandates that KCSO will maintain documentation of training and that staff understand the training they received. Documentation shall be maintained in the employee training files and readily available to the PREA Coordinator.

- PREA - April 4, 2018.pdf
- PREA - Aug. 8, 2018.pdf
- PREA - Feb. 13, 2019.pdf
- PREA - Jan. 12 - Oct. 23 , 2018.pdf
- PREA - June 27, 2018.pdf
- PREA - Nov. 13, 2018.pdf
- PREA - Oct. 9 2017 - May 25, 2018.pdf

Agency provided auditor with electronic PREA training invoice for 7 contractors"

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.31(c) and 115.31(d). Corrective action is required.

**Corrective Action Recommended:**

**1 - Agency to provide auditor with copies of signed PREA training acknowledgements for all custody staff hired to work in the Minimum facility between 11/10/17 and 11/10/18.**

**2 - Agency to include the hire dates for the custody staff who received initial PREA training between the dates identified above.**

**Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have**



**been implemented and are institutionalized. Corrective action recommendations must be**

implemented by the end of the 180-day Corrective Action Period: 11/22/19.

**Corrective Action Completion 11/5/19:**

**1. On 11/5/19, the PREA Manager provided auditor with signed PREA Staff Training Acknowledgement documentation for 54 custody staff assigned to the Minimum facility, to include sign-in sheets. Both the sign-in sheets and the training acknowledgement documentation was for PREA training which occurred between 9/4/13 and 2/27/15.**

**2. Agency also provided auditor with the staffing roster in the Minimum facility for 2018. An additional 9 staff no longer work for the department and their training files were purged. The sign-in sheet from when they attended training prior to 11/10/18 was provided.**

**The agency/facility has met the requirements of Standard provision(s) 115.31(c) and 115.31(d), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.31.**

115.32	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.32(a) - Policy P-0300 Employee Training and Inmate Education mandates that "All KCSO volunteers and contractors who have contact with inmates will be notified of KCSO's zero tolerance policy regarding sexual abuse and sexual harassment and will be informed how to report such incidents. KCSO will ensure that all volunteers and contractors will be trained on their responsibilities under KCSO sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The level and type of training provided to volunteers and contractors will be based on the services they provide and level of contact they have with inmates. KCSO will maintain documentation confirming that volunteers and contractors understand the training they have received. Agency reports that 100 volunteers and contractors, who may have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. Please note, population reports indicate that inmates were transferred from Minimum facility to other facility throughout the agency due to Minimum facility Barracks renovation. Female inmates were moved by 6/20/18 and male inmates were moved by 11/20/18.</p> <p>The Minimum unit is closed due to renovation. There are no inmates housed since 11/10/18 and no staff contractors or volunteers assigned to the facility. Interview with 2 volunteers and 2 contractors from Justice facility indicate that they have received PREA training in April 2018. Training consisted of sexual assaults, awareness of incidents, reporting sexual abuse and sexual harassment immediately to their supervisor or custody staff. Training was conducted via video presentation with an exam. They all were trained on the agency zero- tolerance policy and the fact that they are mandatory reporters. Auditor review of a random sample of 10 contractors and 10 volunteer training records indicate that they have all received PREA training within 1 year of their hire date.</p> <p>115.32(b) - PREA Contractor - Volunteer Training Outline - revised mandates that the level and type of training provided to volunteers and contractors will be based on the services they provide and level of contact they have with inmates. KCSO will maintain documentation confirming that volunteers and contractors understand the training they have received. Contractor - Volunteer PREA Training summary is provided:</p> <ul style="list-style-type: none"> <li>- Responsibilities under PREA</li> <li>- Zero Tolerance Policy and the Right to be Free From Sexual Violence</li> <li>- Sexual abuse and Misconduct</li> <li>- Liability and Sanctions</li> <li>- Prevalance, Dynamics, and Impact of Sexual Abuse on Survivors</li> <li>- Evidence Preservation</li> <li>- Victim Advocacy and Healthcare</li> </ul> <p>Interview with 2 volunteers and 2 contractors indicate that they have received PREA training in April 2018. Training consisted of sexual assaults, awareness of incidents, reporting sexual abuse and sexual harassment immediately to their supervisor or custody staff. Training was conducted via video presentation with an exam. They all were trained on the agency zero-tolerance policy and the fact that they are mandatory reporters.</p>

**115.32(c) - The agency maintains documentation confirming that volunteers and contractors understand the 2 hour refresher PREA training they have received. Documentation provided to the auditor was sign-in sheet and PREA training acknowledgment for 84 contractors and volunteers with accompanying acknowledgements which verified they understood the training they recieved. The PREA training classes were conducted from December 2017 to April 2018.**

**Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.32.**

115.33	<b>Inmate education</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.33(a) - Policy P-0300 Employee Training and Inmate Education mandates "All inmates will receive oral and written information about sexual abuse and harassment in English and Spanish, upon intake and within the first 30 days of their detainment in KCSO custody, during orientation. In addition to providing such education, KCSO will ensure that key information is continuously and readily available and visible to inmates through posters, inmate handbooks, or other written formats. During the intake process, inmates will receive information explaining the KCSO zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. The information will be provided in the form of a handout printed in both English and Spanish. Within 30 days of intake, KCSO will provide comprehensive education to inmates in person or through video, regarding:</p> <ul style="list-style-type: none"> <li>• The right to be free from sexual abuse and sexual harassment;</li> <li>• KCSO reporting policies and procedures for responding to incidents;</li> <li>• Ways to avoid sexual abuse;</li> <li>• Inmate rights if sexually abused;"</li> <li>• The right to be free from retaliation for reporting sexual abuse or staff misconduct.</li> </ul> <p>KCSO will maintain documentation of inmate participation in PREA education sessions and require inmates sign a form stating that they have attended and understood these sessions. Inmates will receive comprehensive 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. Agency reports that over the past 12 months, 100% of inmates have received this training. Interview with intake staff indicates inmates are provided information about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment for both initial intake and transfer. Intake staff prints out the PREA transfer form in English and Spanish, that contains transfer questions as it relates to PREA and inmates are placed on the list to watch the PREA video in the housing units. In the PAQ, agency indicates that 100% of inmate receive this documentation. No inmate screening records were conducted as the agency did not provide screening records from the Minimum facility for inmates housed there between 11/10/17 and 11/10/18.</p> <p>115.33(b) - Agency indicates that all inmates receive initial and comprehensive PREA education within 30 days of intake. P-0300 Employee Training and Inmate Education mandates that Inmates will receive comprehensive 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. Interview with intake staff indicates inmates are provided information about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment for both initial intake and transfer. Intake staff prints out the PREA transfer form in English and Spanish, that contains transfer questions as it relates to PREA and inmates are placed on the list to watch the PREA video in the housing units.</p> <p>115.33(c) - Agency indicates that all inmates receive initial and comprehensive PREA education within 30 days of intake. P-0300 Employee Training and Inmate Education mandates that Inmates will receive comprehensive education upon transfer to a different</p>

facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility. Interview with intake staff indicates inmates are provided information about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment for both initial intake and transfer. Intake staff prints out the PREA transfer form in English and Spanish, that contains transfer questions as it relates to PREA and inmates are placed on the list to watch the PREA video in the housing units.

115.33(d) - Policy P-0300 Employee Training and Inmate Education mandates that "KCSO will provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. Upon intake, inmate orientation information will be provided through;

- An informational video with audio in both English and Spanish;
- Staff led informational classes with printed materials

Medical or mental health staff will help an inmate with a disability understand intake or comprehensive information if the inmates' disability or impairment prevents them from understanding such material." Inmate education documents and formats were provided and reviewed by auditor. During the onsite, auditor reviewed the different resources available to the agency in order to provide PREA education to inmates who are limited English proficient and disabled.

115.33(e) - Policy P-0300 Employee Training and Inmate Education mandates that the agency maintains documentation of inmate participation in PREA education sessions. Agency did not provide auditor with copies of signed acknowledgement from inmates assigned to the Minimum unit in English and Spanish to verify each inmate viewed and understood the PREA video.

115.33(f) - The PAQ indicates that the agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats. Agency provided auditor with photo verification of posters in English & Spanish located in all Dayrooms and Lobby of the facility. The Minimum facility is pending renovation and no inmates have been housed there since 11/10/18, however, the facility remains open and available for housing inmates. During the physical plant review, all English & Spanish PREA posters to include Notice of Auditor was not available throughout the facility in the event inmates are housed there.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.33(a), 115.33(b), 115.33(c), 115.33(e) and 115.33(f). Corrective action is required.

**Corrective Action Recommended:**

1. Agency to provide auditor with copies of inmate screening records from the Minimum facility for inmates housed there between 11/10/17 and 11/10/18.
2. Agency to provide auditor with copies of signed and dated acknowledgement from inmates assigned at the Minimum facility to verify each inmate reviewed and understood the PREA video from July 2018 to November 2018.

**3. Agency to make available English & Spanish PREA posters to be located within each housing unit and general areas throughout the facility in the event inmates are housed there.**

**4. Agency to ensure posters provide contact/hotline numbers to internal reporting sources, advocacy agencies and external reporting sources. Agency to also include information to inform inmates if the contact numbers are confidential, toll free and monitored or not.**

**Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.**

**Corrective Action Completion 11/1/19:**

**115.33(a) thru 115.33(f): On 11/1/19, the PREA Manager provided auditor with the following information:**

**442 inmates were booked into Kern County Jail Central Receiving Intake from 11/10/17 and 11/10/18. Each of the 442 inmates were transferred from Central Receiving to the Lerdo Minimum Facility within 72 hours as an inter-facility transfer after intake. Upon transfer, each inmate annotated and signed the PREA Facility Transfer Risk Assessment. The signed acknowledgement verified that each inmate was asked the following:**

- 1. If they have any concerns about being sexually assaulted, sexually abused, or sexually harassed by other inmates or staff because of their sexual orientation, gender identity, mental health or disability?**
- 2. Have they experienced any type of sexual assault, sexual abuse, or sexual harassment at the facility from which they came from?**

**Inmates are responsible to read a PREA advisement which states:**

**“You have the right to be free from sexual abuse while in the Sheriff’s custody. The Sheriff has zero-tolerance for sexual abuse against inmates and all reports will be investigated. To report an incident, you can dial #7777, talk to a Deputy, or medical person.”**

**This form is utilized for all inmates who are transferred from one facility to another. PREA posters in English and Spanish are posted in intake and viewed by inmates in booking.**

**Agency provided auditor with photo verification of PREA Posters (English & Spanish) posted in intake area and each housing unit dayroom and Female housing unit courtyard. In addition, a call monitoring poster (HOTLINES) is placed throughout the facility at each housing unit which explains that hotline calls are not monitored by the Sheriff’s office, only monitored by the receiving agencies (Women’s Center High Desert counseling service & Bakersfield Police Department) for sexual abuse reporting purposes.**

**Agency provided photos of men’s barracks 1 thru 22 and female barracks 1 thru 3, which identifies shower curtains, toilet barriers and sexual abuse reporting information posters between the phones of each barrack.**

**Agency provided a copy of the PREA video which is played in each housing unit each morning.**

**It has been determined that Agency has met standard provisions 115.33(a), 115.33(b), 115.33(c), 115.33(e) and 115.33(f) during the corrective action period. Auditor has determined that Agency has met standard 115.33.**

115.34	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.34(a) - Policy P-0300 Employee Training and Inmate Education mandates that in addition to the general training provided to all employees, KCSO will ensure that staff who conduct investigations will receive training in conducting such investigations in confinement settings. Specialized training for investigators will include techniques for:</p> <ul style="list-style-type: none"> <li>• Interviewing sexual abuse victims;</li> <li>• Proper use of Miranda and Garrity warnings;</li> <li>• Sexual abuse evidence collection in confinement settings; and</li> <li>• The criteria and evidence required to substantiate a case for administrative action or prosecution referral.</li> </ul> <p>The agency must maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. Documentation shall be maintained in the employee's training file."</p> <p>Interview with 2 criminal and 2 administrative investigators indicate they receive specific training in conducting sexual abuse investigations in confinement settings. Their descriptions of the 40 hours sexual abuse investigative training includes:</p> <ul style="list-style-type: none"> <li>- Interview and interrogation</li> <li>- Crime scene investigations</li> <li>- Sexual assault</li> <li>- Evidence collection</li> <li>- Beheler</li> <li>- Lybarger</li> </ul> <p>Investigative staff indicate that there is no training on Garrity warnings as staff are not compelled to give statements. Seniors Investigator Exam provided by agency does not meet the PREA standards for Special Investigators in a confinement setting as it is missing , as a minimum, questions regarding Miranda and Garrity warnings.</p> <p>PREA Training Bulletin - Investigations does not include Garrity warnings among other training requirements per the standards and generally accepted investigator training requirements. Prison Rape Elimination Act online training curriculum slides was provided by agency. The online powerpoint presentation includes Miranda and Beheler definitions, explanations and admonishments, however, Garrity warnings are not included in the training.</p> <p>115.34(b) - Training provided includes Miranda and Beheler warnings. No such warnings or education as to the proper use of Garrity warnings, sexual abuse education collections in a confinement settings or the criteria and evidence required to substantiate a case for administrative action or prosecution referral.</p> <p>115.34(c) - Specialized Investigators score sheet was provided by agency. The electronic Sex Abuse Investigator in a Confinement Setting score sheet indicates 30 staff completed the PREA investigator training. PAQ reports that 45 agency investigators are currently employed who have completed the required special investigators training in a confinement setting.</p> <p>115.34(d) - N/A - Auditor is not required to audit standard provision 115.34(d).</p>



**Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.34(a) and 115.34(b). Corrective action is required.**

**Corrective Action Recommended:**

- 1. Agency to include Garrity warning training as required by standard provision 115.34(a).**
- 2. Agency to include this training in the Special Investigator training curriculum for verification of compliance with the standard.**

**Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.**

**Corrective Action Completion 11/19/19:**

**1. & 2: On 11/19/19, the PREA Manager provided auditor with signed and dated copies of the signed Garrity staff training acknowledgements for the 14 Special Investigators who completed the training on 11/18/19 and 11/19/19. Auditor was also provided the training certificates for all 14 investigators to include the curriculum and STC Lesson Plan for Sexual Assault Investigation in a Confinement Setting training.**

**This training is now incorporated into the specialized investigator curriculum.**

**The agency/facility has met the requirements of Standard provision(s) 115.34(a) and 115.34(b), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.34.**

115.35	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.35(a) - Policy P-0300 Employee Training and Inmate Education mandates that KCSO will ensure that all medical and mental health care practitioners who work regularly in its facility have been trained in:</p> <ul style="list-style-type: none"> <li>• How to detect and assess signs of sexual abuse and sexual harassment;</li> <li>• How to preserve physical evidence of sexual abuse;</li> <li>• How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and</li> <li>• How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</li> </ul> <p>KCSO contracted medical staff do not perform forensic examinations, therefore they shall consult with sexual assault investigators and hospital SANE's regarding the need for forensic examinations.</p> <p>Interview with Medical and Mental Health Staff indicates that they have received additional specialized training from the facility regarding sexual abuse and sexual harassment. Topics covered how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how and to who to report allegations or suspicions of sexual abuse and sexual harassment. Additional training also included sexual harassment training for supervisors in California and who initiates victimization screening when inmate is booked into the jail and alleges sexual abuse.</p> <p>Agency has not provided auditor with PREA training curriculum or acknowledgements as it relates to Medical and Mental Health staff. Only the sign-in sheets for contractors.</p> <p>115.35(b) - Agency medical staff at this facility does not conduct forensic medical exams. All forensic exams conducted at a SART/SANE center. Interview with medical and mental health staff verifies agency claim.</p> <p>115.35(c) - The agency provided sign-in sheets to indicate that 28 medical and mental health practitioners have completed the required 2-hr PREA training between 4/17/17 and 6/27/18. Agency provided PREA training sign-in sheets for verification of medical/mental health PREA Training but no curriculum or lesson plan provided.</p> <p>115.35(d) - Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.35(a) and 115.35(c). Corrective action is required.</p> <p><b>Corrective Action Recommended:</b></p> <p>1. Agency provided auditor with sign-in sheets for the 2-hour PREA training for medical and mental health staff. No PREA training curriculum or signed acknowledgements were provided along with the sign-in sheets. Please provide this documentation for verification of compliance with the standards.</p> <p>Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have</p>

**been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.**

**Corrective Action Completion:**

**1. 10/23/19, the PREA Manager provided auditor with copy of the training sign-in sheets and copies of the signed PREA volunteer and contractor training acknowledgements for 16 medical and mental health staff assigned to the Justice and Minimum facilities. Trainings were conducted on 8/8/18 and 4/4/18.**

**The agency/facility has met the requirements of Standard provision(s) 115.35(a) & 115.35(c), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.35.**

115.41	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.41(a) - Policy P-0200 Prevention And Detection Of Sexual Abuse mandates that upon intake and upon transfer to another facility, classification staff shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization:</p> <ul style="list-style-type: none"> <li>• Whether the inmate has a mental, physical, or developmental disability</li> <li>• The age of the inmate</li> <li>• The physical build of the inmate</li> <li>• Whether the inmate has previously been incarcerated</li> <li>• Whether the inmate’s criminal history is exclusively nonviolent</li> <li>• Whether the inmate has prior convictions for sex offenses against an adult or child</li> <li>• Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming</li> <li>• Whether the inmate has previously experienced sexual victimization</li> <li>• The inmate’s own perception of vulnerability</li> <li>• Whether the inmate is detained solely for civil immigration purposes."</li> </ul> <p>KCSO will also consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to KCSO in assessing inmates for risk of abusiveness.</p> <p>Interview with Risk Screening staff indicates that they screen inmates upon intake and transfer to or from another facility for risk of sexual abuse victimization or sexual abusiveness toward other inmates. There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.</p> <p>115.41(b) - Policy P-0350 PREA Intake and Screening does not require that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake. Agency reports that 100% of all inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility.</p> <p>Interview with Risk Screening staff indicates that they screen inmates of risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of intake. There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed. Agency did not provide auditor with roster of inmates housed at the Minimum facility prior to 11/10/18 to review. Review of the Justice facility 22 random sample of inmate electronic screening documents indicate that all inmates recieved their initial PREA screening within 72 hours of intake. Agency to provide auditor with roster of inmates housed at the Minimum facility between copy of intake screening records for inmates housed at the Minimum facility between 3/1/18 and 6/20/18.</p> <p>115.41(c) - Policy P-0200 Prevention And Detection Of Sexual Abuse mandates that KCSO follows a PREA risk screening and classification protocol, using an objective screening instrument. KCSO uses information from the risk screening to determine housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.</p>

**P-0350 PREA Intake and Screening Holding Cell Risk Questions - Attachment A was provided by Agency. Questions are in English & Spanish.**

**P-0200 PREA Facility Transfer Risk Reassessment - Attachment E was provided by Agency. Questions are in English & Spanish**

**P-0200 Prevention And Detection Of Sexual Abuse mandates that KCSO will reassess an inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility or from the inmate since the initial intake screening. An inmate's risk level will be reassessed when warranted due to a medical or mental health referral, a request made by the inmate, an incident of sexual abuse, or receipt of additional information that may affect the inmate's risk of sexual victimization or abusiveness. When receiving an inmate transferred from another facility, the receiving deputy will:**

- Obtain a PREA Transfer Risk Reassessment form (Attachment "E") and print the inmate's name and booking number.**
- During the dress out process, provide each inmate with a PREA Transfer Risk Reassessment form. One at a time, direct the inmate to complete and sign the top half of the form, providing confidentiality from other inmates.**

**The PREA Intake and Screening assessment instrument fails to utilize the minimum questions mandated by standard provision 115.41(c). Instrument does not use objective assessments. The electronic PREA risk assessment instrument does not include questions #1, #2, #3 or #5 as mandated by standard provision 115.41(d).**

**115.41(d) - Policy P-0350 PREA Intake and Screening Holding Cell Risk Questions - Attachment A was provided by Agency. Questions are in English & Spanish.**

**P-0200 PREA Facility Transfer Risk Reassessment - Attachment E was provided by Agency. Questions are in English & Spanish. Neither of these instruments provide the 10 criteria mandated by standard provision 115.41(d). Interview with risk screening staff indicates that the risk screening instrument considers:**

**Fear from sexual victimization  
Age  
Criminal history  
Prior classification**

**Auditor's review of the risk screening instrument indicates that The PREA Intake and Screening assessment instrument fails to utilize all of the minimum questions mandated by standard provision 115.41(c). The electronic PREA risk assessment instrument does not include questions #1, #2, #3 or #5 as mandated by standard provision 115.41(d).**

**115.41(e) - Agency provided auditor with a copy of the electronic screening instrument. The instrument fails to include the following questions as outlined in 115.41(d):**

- Whether the inmate has a mental, physical or developmental disability:**
- The age of the inmate**
- The physical build of the inmate**
- Whether the inmate's criminal history is exclusively nonviolent**

**Interview with risk screening staff indicates that the risk screening considers sexual victimization, fear from victimization, criminal history, prior classification, electronic flags. The process for conducting the initial screening includes follow-up questions which flags classification for interviews, use of CJIS electronic PREA checklist PREA hazard screen.**

**115.41(f) - Policy P-0350 PREA Intake, Screening, K0400 Administrative Segregation nor K0300 Classification Criteria policy does not require that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the**

inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. Agency indicates that 100% of inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more and 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:

**K-0400 Administrative Segregation mandates that "inmates administratively segregated at intake due to risk of sexual abuse shall;**

- Have a complete assessment performed by classification within 24 hours to ensure administrative segregation is necessary and the inmate is housed in the least restrictive housing available
- Not exceed 30 days of administrative segregation without documentation of the concern for the inmate's safety, including articulation of why no alternative means of separation from abusers can be arranged
- Have access to programs, privileges, education, and work opportunities to the extent possible. If access is limited, the following shall be documented;
  - o The opportunity limited
  - o Duration of the limitation
  - o Reasons for such limitations
- Classification staff shall conduct a review every 30 days or sooner to determine the need for continued separation from general population."

**K-0300 Classification Criteria, provided by agency, does not discuss the requirements of this standard provision. Interview with risk screening staff indicates that inmates have their risk levels reassessed every 30 days. There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.**

**115.41(g) - Policy K-0400 Administrative Segregation""Inmates administratively segregated at intake due to risk of sexual abuse shall;**

- Have a complete assessment performed by classification within 24 hours to ensure administrative segregation is necessary and the inmate is housed in the least restrictive housing available
- Not exceed 30 days of administrative segregation without documentation of the concern for the inmate's safety, including articulation of why no alternative means of separation from abusers can be arranged
- Have access to programs, privileges, education, and work opportunities to the extent possible. If access is limited, the following shall be documented;
  - The opportunity limited"
  - Duration of the limitation
  - Reasons for such limitations
- Classification staff shall conduct a review every 30 days or sooner to determine the need for continued separation from general population."

**K-0300 Classification Criteria provided by agency does not contain information required to meet this standard provision. Interview with risk screening staff indicates that if they receive any new documented information within 30 days after intake, the inmate's risk level is reassessed. There have been no inmates housed at Minimum facility since 11/10/18,**

therefore, no inmates were interviewed.

**115.41(h) - Policy P-0350 PREA Intake and Screening mandates that when completing the PREA Risk Screening Questions**

- Inmates have the right to refuse to answer some or all of these questions. For refusals:
- Enter "N" for any refused answer
- Indicate on #6 after the why? in the comment area which were refused Ex: Inmate refused #5, 7, 8
- Inmates will not be disciplined for refusing to answer or for not disclosing complete information in response to the PREA risk screening questions."

Interview with risk screening staff indicates that inmates are not disciplined in any way for refusing to respond to or for not disclosing complete information related to the screening PREA questions.

Interview with the former PREA Compliance Manager indicates that Intake and Classification has access to the inmate files where intake and assessment forms are maintained.

Management may have access on a need to know basis

Interview with the PREA Coordinator indicates that policy outlines who should have access to an inmates' risk assessment within the facility in order to protect sensitive information from exploitation.

Policy P-0350 mandates that "All staff shall exercise appropriate control on the dissemination of inmate responses to

PREA Risk Screening questions, to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates per PREA standard §115.41(i)."

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.41(a), 115.41(b), 115.41(c), 115.41(d), 115.41(e), 115.41(f) and 115.41(g). Corrective action is required.

**Corrective Action Recommendation:**

- 1. Agency to provide auditor with roster of inmates housed at the Minimum facility between 3/1/18 and 6/20/18 so auditor may conduct a random selection of intake screening records to review for compliance with this standard provision.**
- 2. Agency to include questions #1, #2, #3 or #5 in the objective screening instrument as mandated by standard provision 115.41(d).**
- 3. Agency to amend Policy P-0350 PREA Intake and Screening Holding Cell Risk Questions and Policy P0200 PREA Facility Transfer Risk Reassessment questions to meet the mandated screening question criteria outlined in standard 115.41.**
- 4. Agency to amend policy to require that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening.**

**5. Auditor to review inmate PREA reassessments which occurred within 90 days of 6/20/18 to verify compliance with standard provision 115.41(g).**



**Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.**

**Corrective Action Completion 11/6/19 :**

**1. On 9/10/19, the PREA Manager provided auditor with a copy of the Intake Screening, Holding Cell Risk Questions and Facility Transfer risk Assessment questions belonging to an inmate displayed in the CJIS electronic database which includes all 10 PREA screening questions. The questions and data are provided in the PREA Risk Screening Questions, Display of Federal Inmate Record, Change Booking Medical Answers and Display of Inmate Records electronic data sheets.**

**2. On 8/14/19, Agency provided auditor with copy of Policy K-500 Procedure B: Classification 30-day Review Process, Directive B-1: Classification Review which mandates that:**

**The Classification Deputy will:**

- Run the CJIS function IMDSPCLR on a daily basis.**
- Review each inmate's electronic file to determine if a re-classification, change in housing assignment, or transfer is required.**
- Ensure that the inmate is assigned to a housing location consistent with their classification status.**
- Review each booking in the record, checking for issues such as open cases with no disposition or future court date, releases marked No Local Jail Sentence, jail sentences with no outdates, and unreleased-never filed open cases.**
- Ensure the release dates for all court commitments are calculated.**
- Ensure that all inmates who need to be tracked are on the proper notification list (CYANO, REMNO, OSHNO, CDCWL, etc.)**
- Check appointments to confirm if inmates who are in-custody based solely on outof-county warrants have had pick-up teletypes sent to the responsible agency.**

**On 9/23/19, PREA Manager provided auditor with CJIS booking intake and classification reassessment screenshots of 23 randomly selected inmates housed at the Justice Facility, booked after 9/1/19, who were reassessed. Each of these inmates were reassessed within 30 days of intake.**

**On 11/7/19, the PREA Manager provided auditor with 21 inmate intake CJIS records which records intake and reassessment dates from 3/1/18 to 6/20/18 for inmates assigned to the Minimum facility. No inmates have been housed at the Minimum facility since 11/10/18, Review of records indicate that only 1 inmate received reassessment review within 30 days of intake. Inmates are booked into the Central Detention Facility in downtown Bakersfield for initial assessment by Classification within 24 hours of intake. Inmates are then transferred to the Minimum housing facility at Lerdo, where the reclassification occurs 30 days after the inmates arrive at the Minimum facility.**

**Note: All inmates were removed from the Minimum facility before 11/10/18 as the facility was scheduled for renovation and remains so to this date.**

**3. On 8/14/19, Agency provided auditor with screenshots of the CJIS printout which meets**

**standard provision #1, #2, and #3. Questions 1 & 2 are identified in the Medical Records**

portion, questions 3 & 5 are in the Inmate Records display.

On 9/10/19, the PREA Manager provided auditor with a copy of the Intake Screening, Holding Cell Risk Questions and Facility Transfer risk Assessment questions belonging to an inmate displayed in the CJIS electronic database which includes all 10 PREA screening questions. The questions and data are provided in the PREA Risk Screening Questions, Display of Federal Inmate Record, Change Booking Medical Answers and Display of Inmate Records electronic data sheets.

4. On 8/14/19, Agency provided auditor with screenshots of the CJIS printout which meets standard provision #1, #2, and #3. Questions 1 & 2 are identified in the Medical Records portion, questions 3 & 5 are in the Inmate Records display. On 9/10/19, the PREA Manager provided auditor with a copy of the Intake Screening, Holding Cell Risk Questions and Facility Transfer risk Assessment questions belonging to an inmate displayed in the CJIS electronic database which includes all 10 PREA screening questions. The questions and data are provided in the PREA Risk Screening Questions, Display of Federal Inmate Record, Change Booking Medical Answers and Display of Inmate Records electronic data sheets.

5. On 9/10/19, the PREA Manager provided auditor with a copy of the Intake Screening, Holding Cell Risk Questions and Facility Transfer risk Assessment questions belonging to an inmate displayed in the CJIS electronic database which includes all 10 PREA screening questions. The questions and data are provided in the PREA Risk Screening Questions, Display of Federal Inmate Record, Change Booking Medical Answers and Display of Inmate Records electronic data sheets.

6. On 8/14/19, Agency provided auditor with copy of Policy K-500 Procedure B: Classification 30-day Review Process, Directive B-1: Classification Review which mandates that:  
The Classification Deputy will:

- Run the CJIS function IMDSPCLR on a daily basis.
- Review each inmate's electronic file to determine if a re-classification, change in housing assignment, or transfer is required.
- Ensure that the inmate is assigned to a housing location consistent with their classification status.
- Review each booking in the record, checking for issues such as open cases with no disposition or future court date, releases marked No Local Jail Sentence, jail sentences with no out dates, and unreleased-never filed open cases.
- Ensure the release dates for all court commitments are calculated.
- Ensure that all inmates who need to be tracked are on the proper notification list (CYANO, REMNO, OSHNO, CDCWL, etc.)
- Check appointments to confirm if inmates who are in-custody based solely on outof-county warrants have had pick-up teletypes sent to the responsible agency.

7. On 9/23/19, PREA Manager provided auditor with CJIS booking intake and classification reassessment screenshots of 23 randomly selected inmates, booked after 9/1/19, who were reassessed between. Each of these inmates were reassessed within 30 days of intake.

The agency/facility has met the requirements of Standard provision(s) 115.41(a), 115.41(b),

115.41(c), 115.41(d), 115.41(e), 115.41(f) and 115.41(g), completed during the corrective

**action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.41.**

115.42	<b>Use of screening information</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.42(a) - Policy P-0200 Sexual Abuse Prevention and Detection mandates that "KCSO follows a PREA risk screening and classification protocol, using an objective screening instrument. KCSO uses information from the risk screening to determine housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive."</p> <p>Interview with the former PREA Compliance Manager indicates that no facility at KCSO is subject to a consent decree, legal settlement, or legal judgement requiring that it establish a dedicated facility, unit or wing for LGBTI inmates. Onsite physical plant review verifies that agency does not have any dedicated facilities or segregation based upon LGBTI status. Interview with risk screening staff indicates that in order to keep inmates safe from being victimized includes careful housing and programming bases on a case by case basis through classification interviews and risk screening instrument. If the inmate requests to be segregated during interviews, placement will be based upon their safety.</p> <p>115.42(b) - Policy P-0200 Sexual Abuse Prevention and Detection mandates that KCSO makes individualized determinations about how to ensure the safety of each inmate. Inmates believed to be at risk of victimization shall not be placed in segregated housing unless an assessment of all available alternatives has been made.</p> <p>K-0100 Classification General Policy mandates that the classification of inmates will be equitable and objective, without discrimination against any individual based on sex, gender identity or expression, race, color, creed, cultural background, physical disability, sexual orientation, or national origin. These factors can be considered when necessary to protect the safety of the inmate, maintain racial balance in housing units, or for other purposes necessary for the security of the facility.</p> <p>Interview with risk screening staff indicates that in order to keep inmates safe from being victimized includes careful housing and programming bases on a case by case basis through classification interviews and risk screening instrument. If the inmate requests to be segregated during interviews, placement will be based upon their safety.</p> <p>115.42(c) - Policy P-0350 PREA Intake and Screening mandates that "the Kern County Sheriff's Office (KCSO) shall conduct a thorough PREA intake and screening process of each inmate received at its jail facilities to determine any medical or mental health needs, and to inform classification staff of pertinent information for use in making appropriate housing assignments.</p> <p>In addition to the CJIS medical and hazard booking screens, PREA holding cell risk questions (Attachment 'A') will be asked by receiving staff in order to identify potential risks of harm, sexual victimization, or potential sexual abusers prior to placement in a general population holding cell. A CJIS PREA risk screening process for all inmates will be conducted to provide classification staff with information about an inmate's sexual orientation, gender identity, past sexual victimization, past sexual abuse acts perpetrated, and the inmate's own perception of sexual abuse vulnerability, enabling them to make informed housing decisions in the best interest of the inmate and facility operations." Interview with PREA Compliance Manager and Transgender/Intersex inmates indicates that the Programs Unit determines housing and</p>

programs assignments for transgender or intersex inmates on a case by case basis.

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

**Interview with the PREA Compliance Manager indicates that Classification section reviews each booking every 30 days and inmates housed in administrative segregation is reviewed every 7 days.**

**Interview with risk screening staff indicates that in order to keep inmates safe from being victimized includes careful housing and programming bases on a case by case basis through classification interviews and risk screening instrument. If the inmate requests to be segregated during interviews, placement will be based upon their safety. Interview with the PREA Compliance Manager indicates that classification reviews for programming assignments for Transgender and Intersex inmates are handled through classification reviews during booking assignments, every 30 days post booking and every 7 days for inmates housed in administrative segregation.**

**115.42(e) - Policy P-0350 PREA Intake and Screening mandates that in addition to the PREA holding cell risk questions (CRF only), deputies booking inmates shall also access the CJIS PREA Risk Screen and ask each inmate the questions in a confidential location away from other inmates. Deputies asking the screening questions shall answer the gender non-conforming question based on their own visual perceptions, taking social norms and cultural differences into account to the best of their ability. The response shall not be based on any one observation but rather a totality of the inmate's appearance and behavior. Conduct in-person interviews of any inmate whose booking or screening information requires additional information and/or clarification. Ensure inmates reporting gender identity issues during intake or screening are referred and reviewed by the gender identity committee per DBPPM P-410.**

**Interview with the former PREA Compliance Manager and risk screening staff indicates that transgender or intersex inmates' views with respect to his or her own safety is given serious consideration in placement and programming assignments. All inmates' concerns are taken seriously and addressed through the Program Division.**

**Interview with Transgender/Intersex inmate indicates that they have not been separated or housed in a housing unit specifically for LGBTI or Transgender/Intersex inmates. There are separate showers in the housing units with curtains for privacy. The Mega Barracks (15 & 16) have doors on showers and toilets for privacy.**

**115.42(f) - Agency indicates that transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. Interview with PREA Compliance Manager and risk screening staff indicate the showers provide privacy as they are separate single showers with privacy screens.**

**115.42(g) - Agency does not possess dedicated facilities, units or wings solely on the basis of LGBTI identification or status. Onsite physical plant review verifies this statement.**

**Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.42.**





115.43	<b>Protective Custody</b>
<b>Auditor Overall Determination: Meets Standard</b>	
<b>Auditor Discussion</b>	
<p>115.43(a) - Policy K-0400 Administrative Segregation mandates that "inmates have a complete assessment performed by classification within 24 hours to ensure administrative segregation is necessary and the inmate is housed in the least restrictive housing available. Not exceed 30 days of administrative segregation without documentation of the concern for the inmate's safety, including articulation of why no alternative means of separation from abusers can be arranged." Agency indicates that no inmates at risk of sexual victimization were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment.</p> <p>Interview with the Facility Commander indicates that the agency always looks for the best housing for the inmates. They do not punish and inmate at high risk of sexual victimization.</p> <p>115.43(b) - Policy K-0400 Administrative Segregation mandates that inmates will have access to programs, privileges, education, and work opportunities to the extent possible. If access is limited, the following shall be documented:</p> <ul style="list-style-type: none"> <li>o The opportunity limited</li> <li>o Duration of the limitation</li> <li>o Reasons for such limitations</li> </ul> <p>No Minimum facility inmates have been segregated for allegations of sexual abuse over the past 12 months. There is no segregated housing at the Minimum facility. If segregated housing is required, inmates are transferred to either Justice facility or another facility within Kern CJ for safety purposes. Interview with Justice facility Segregated Housing Staff indicates that if inmates are placed in segregated housing for protection from sexual abuse they are placed there for safety purposes and for observation. They are treated the same as administrative segregated inmates for observation, not for punishment. If placed in segregated housing, they are housed there no longer than a week.</p> <p>115.43 (c) - The facility shall transfer such inmates to involuntary segregated housing in an appropriate facility only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. In the past 12 months, no Minimum facility inmates were placed in segregated housing.</p> <p>Interview with the Facility Commander indicates that if placed in involuntary segregated housing, they are placed until alternative means of separation from likely abusers can be arranged, usually no longer than 24 hours.</p> <p>Interview with staff who supervise inmates in segregated housing at Justice facility indicates that inmates placed in involuntary segregated housing are there until an alternative means of separation from likely abusers can be arranged.</p> <p>115.43(d) - Agency reports there have been no inmates held in segregated housing or at risk of sexual victimization in the past 12 months.</p> <p>115.43(e) - K-0400 Administrative Segregation mandates that classification staff shall conduct a review every 30 days or sooner to determine the need for continued separation from general population. Interview with staff who supervise inmates in segregated housing at the</p>	

Justice facility indicates that should an inmate be housed in involuntary segregated housing for risk of sexual abuse and separation from the general population, they receive a review every 30 days, however, that period of time is highly unlikely since an inmate would not be housed involuntarily for no more than 1 week.

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.43.

115.51	<b>Inmate reporting</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.51(a) - P-0450 Reporting Sexual Abuse mandates that "KCSO provides multiple avenues for inmates to privately report sexual assault/abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse or sexual harassment, and staff neglect that may have contributed to such incidents. KCSO also provides a method for inmates to report assault/abuse, harassment, retaliation and staff neglect to an outside public entity that is not part of KCSO.</p> <p>There is no staff assigned to the Minimum facility. There are only 2 staff, assigned to the Maximum/Medium facility that assist with maintaining the Minimum facility. Interview with the 2 staff indicates that inmates can privately report sexual abuse, sexual harassment and retaliation by contacting medical staff and the floor officer. There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.</p> <p>115.51(b) - The agency provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency through Womens Center High Desert (WDCH). Agency provided auditor with a copy of the WSCH MOU 2018 effective 7/2/18 and expires on 6/30/2020. WDCH provides the following services:</p> <ul style="list-style-type: none"> <li>- Ensure sexual assault counselors are properly trained</li> <li>- Provide emergency SART hospital accompaniment</li> <li>- Provide one-on-one counseling of inmates Mon-Fri, weekends &amp; Holidays Provide Hotline phone services for inmates Monday's through Friday's 8am - 5pm Provide bi-lingual counseling for inmates</li> </ul> <p>Provide in-person victim support during investigation interviews as requested by inmate Administer inmate case files and reports</p> <p>Bakersfield PD (BPD) Hotline MOU - signed 1/21/16 provides for the reporting of sexual abuse by inmates housed at Kern County Sheriff's Office. BPD will accept reports of sexual assault and/or sexual abuse committed against inmates in KCSO detention facilities on the KCSO Sexual Abuse Hotline which reaches the BPD Communications Center.</p> <p>Policy A-1900 Foreign Consular Notification, provided by the agency indicates the following: Penal Code 834(c) requires California law enforcement agencies to conform to the 1963 Vienna Convention on Consular Relations Treaty (VCCR). The Treaty obligates law enforcement officers to advise "without delay" any foreign national who is arrested or detained that they have the right to speak to an official from their country's consulate. If an individual chooses to exercise that right, the law enforcement official is required to notify the appropriate consulate. In the case of certain countries, such notification is required regardless of the foreign national's wishes.</p> <p>Compliance with the treaty, through prompt and courteous notifications to foreign nationals and consulate officers, will make it easier for the United States to insist on similar treatment towards Americans overseas. Thus, it is the policy of the Detentions Bureau to attempt to identify foreign nationals and advise them of their right to consular notification as part of the inmate receiving process. When such notification is requested or required, staff will ensure that notification is completed as soon as reasonably possible. Typical services of a consular officer include arranging visits and phone calls regarding the foreign national's needs and situation. A consular may assist in arranging legal representation,</p>

monitor the case, monitor issues of confinement, and assist family members in communicating with the foreign national."

Interview with PREA Compliance Manager indicates that inmates can contact the Women's Center High Desert (WCHD) Hotline and Medical staff. WCHD hotline enables receipt and immediate transmission of inmate reports of sexual abuse and sexual harassment to agency officials and will provide inmate's name unless the inmate wishes to remain anonymous.

Inmate contact with Bakersfield PD hotline enables receipt and immediate transmission of inmate reports of sexual abuse and sexual harassment to agency officials.

Telephone interview with Women's Center High Desert advocate verifies the PREA Compliance Manager statement.

There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.

115.51(c) - P-0450 Reporting Sexual Abuse mandates that "The Kern County Sheriff's Office (KCSO) takes all reports of sexual assault/abuse, sexual harassment, or retaliation against inmates or staff for reporting seriously. KCSO has developed defined reporting mechanisms to ensure a timely response to allegations. In accordance with the Prison Rape Elimination Act (PREA) standards, inmates shall be provided multiple avenues, internally and externally, for reporting sexual assault/abuse. Anonymous and third party verbal or written reports of sexual assault/abuse shall be accepted by staff from any person on an inmate's behalf. Reports of assault/abuse occurring outside of KCSO facilities shall be referred to the appropriate custodial facility or law enforcement agency.

The KCSO Sexual Assault and Abuse Investigations Unit (SAAIU) shall report all incidents of sexual abuse occurring in its custodial facilities in required annual reports to the State of California. The PREA coordinator shall report all incidents of sexual abuse occurring in its custodial facilities in required annual reports to the Department of Justice."

P-0550 Victim Services Response Plan mandates that "The Kern County Sheriff's Office (KCSO) Detentions Bureau has developed a policy on victim services and a victim services response plan to provide inmate victims of sexual harassment, abuse or assault with immediate intervention and/or prompt emergency and crisis intervention services from medical, mental health, and victim advocates. KCSO shall provide free community level medical and mental health services to all sexual abuse victims with or without cooperation in any subsequent investigation. The victim services response plan herein establishes the roles and responsibilities of medical and mental health staff and contracted victim advocates."

Agency indicates in the PAQ that staff are required to immediately document verbal reports. PAQ indicates that Medical staff shall directly notify the facility supervisor of any third party report of sexual assault or abuse. Medical staff shall immediately notify the facility supervisor of any inmate report of sexual assault, abuse, or harassment occurring in the facility. Mental Health shall notify the facility supervisor of any third party report of sexual assault or abuse. Mental Health staff shall obtain consent to share information from any inmate reporting sexual abuse prior to notifying the facility supervisor, except when significant danger to the inmate or other person exists. PAQ speaks only to reports to Medical and Mental Health Staff notifying supervisor of 3rd party reporting. The policy does not include custody staff and supervisors. Interview with the two staff assigned to Medium/Maximum unit acknowledges that an inmate may report an allegation of sexual abuse or harassment verbally, in writing, anonymously and from 3rd parties. Staff indicate they immediately document verbal reports.

There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.

**115.51(d) - P-0450 Reporting Sexual Abuse Staff mandates that staff shall report staff misconduct through a confidential email to their immediate supervisor or section manager if the abuse involves their supervisor. Staff may also privately report directly to the PREA Coordinator or Internal Affairs Unit. Staff are informed of these procedures through regular PREA Training per the PAQ.**

**Interview with 2 random sample of staff assigned to Maximum/Medium Unit indicates that staff can privately report sexual abuse and sexual harassment to the PREA Coordinator, medical staff, human resources and Bakersfield PD.**

**Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.51(c) and corrective action is required.**

**Corrective Action Recommended:**

**1. Agency to amend policy P-0450 to mandate that staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.**

**Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.**

**Corrective Action Completion:**

**1. Review of P-0450 mandates that all staff receiving any direct or 3rd Party report of a sexual assault, sexual abuse, sexual harassment, or retaliation for reporting sexual abuse or cooperating in a sexual abuse investigation shall follow the response protocol outlined in Policy P-500.**

**Policy P-500 mandates that Detention Deputy first responders shall write ILEADS and CJIS supplemental incident reports to the primary investigator's report as appropriate. The narrative section of PREA related CJIS incidents will be limited to a reference to the Crime and Incident Case number only. (e.g. "For details, refer to Crime and Incident report # SR...") and include CJIS code 4050 – PREA.**

**The agency/facility has met the requirements of Standard provision(s) 115.51(c), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.51.**

115.52	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.52(a) - Policy I-0200 Inmate Grievances states that grievances involving sexual abuse, sexual harassment or staff sexual misconduct will be referred for investigation and/or criminal complaint as appropriate. The shift supervisor will notify the PREA Coordinator and the appropriate Section Manager of any grievances received.</p> <p>115.52(b) - Policy I-0200 Inmate Grievances states that ""All written grievances, responses and appeals will be tracked by the Lerdo Compliance Section. Each facility will have a designated grievance box. The Compliance Section will check the grievance box at each Lerdo facility daily, with the exception of weekends and holidays. Grievances involving sexual abuse, sexual harassment or staff sexual misconduct will be referred for investigation and/or criminal complaint as appropriate. The shift supervisor will notify the PREA Coordinator and the appropriate Section Manager of any grievances received. The 10-day grievance submission rule does not apply to grievances alleging staff misconduct - all such grievances must be processed. Agency policy does not provide language which allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred. Agency policy does not require an inmate to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse. If the grievance involves a safety or security concern (i.e.; an issue in which delay may cause substantial risk of personal injury or damage), deputy receiving the grievance shall:</p> <ul style="list-style-type: none"> <li>• Act to resolve the grievance.</li> <li>• Place the original grievance form and a copy of their response signed by the inmate in the facility grievance box.</li> <li>• Additionally, if the grievance involves allegations of sexual abuse, or harassment follow the protocol outlined in DBPPM P-500. Notify the PREA Coordinator and the appropriate Section Manager of any such grievances received."</li> </ul> <p>115.52(b) - Policy I-0200 Inmate Grievances indicate that "all written grievances, responses and appeals will be tracked by the Lerdo Compliance Section. Each facility will have a designated grievance box. The Compliance Section will check the grievance box at each Lerdo facility daily, with the exception of weekends and holidays. Policy continues with stating that deputies will make every reasonable effort to resolve inmate grievances informally so that a written grievance is not necessary. However, if the deputy cannot resolve the grievance and the inmate still requests a grievance form, the deputy will give the inmate an inmate grievance form. Grievances involving sexual abuse, sexual harassment or staff sexual misconduct will be referred for investigation and/or criminal complaint as appropriate. The shift supervisor will notify the PREA Coordinator and the appropriate Section Manager of any grievances received."</p> <p>Policy I-0200 Inmate Grievances indicate that all written grievances, responses and appeals will be tracked by the Lerdo Compliance Section. Each facility will have a designated grievance box. The Compliance Section will check the grievance box at each Lerdo facility daily, with the exception of weekends and holidays. There is no indication as to why weekends and holidays are an exception. It appears inmates must submit a grievance to a deputy.</p>

Agency did not provide auditor with a copy of the inmate handbook which is available to inmates with the PREA video.

115.52(d) - The agency's policy and procedure does not require that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. Agency PAQ states that there have been no grievances alleging sexual abuse in the past 12 months. Agency PAQ indicates that the agency always notifies an inmate in writing when the agency files for an extension, including notice of the date by which a decision will be made. The PAQ response indicates that the agency handles inmate grievances immediately if the grievance involves PREA.

There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.

The agency's policy and procedure does not require that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance.

115.52(e) - I-0200 Inmate Grievances - Agency policy and procedure Policy mandates that "Inmates who are illiterate, disabled, or non-English speaking, may seek assistance from other inmates or facility staff when preparing a grievance. Requests for such assistance that cannot be reasonably accommodated by facility staff will be referred to the Facility Administrative Sergeant. If the inmate is a Federal contract inmate, the Administrative Sergeant will notify the Federal Liaison Sergeant. All non-English speaking inmates may utilize Language Line Services in accordance with Section G-1210 of the Detentions Bureau Policy and Procedures Manual." Agency indicates that there have been no grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline.

Policy does not discuss or permit third parties, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates.

Agency policy and procedure does not require that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.

I-0200 Inmate Grievances - Agency policy and procedure does not discuss or permit third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates. Agency policy and procedure does not require that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.

115.52(f) - I-0200 Inmate Grievances mandates that "if the grievance involves a safety or security concern (i.e.; an issue in which delay may cause substantial risk of personal injury or damage),

- Act to resolve the grievance.
- Place the original grievance form and a copy of their response signed by the inmate in the facility grievance box.
- Additionally, if the grievance involves allegations of sexual abuse, or harassment follow the protocol outlined in DBPPM P-500. Notify the PREA Coordinator and the appropriate Section Manager of any such grievances received."

No time frame for resolution identified in policy. Agency indicates via PAQ that emergency grievances would be handled immediately. Agency reported in PAQ that no emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months.

Agency to provide auditor with copy of DBPPM P-500, which discusses filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse.

115.52(g) - I-0200 Inmate Grievances mandates that when a supervisor who is responding to a grievance believes that the inmate is abusing the grievance system, the supervisor will notify the section manager of the specifics of the abuse. If the section manager determines that the inmate is abusing the grievance system, he/she may suspend the inmate's ability to submit non-health/safety related grievances for up to 30 days. The section manager will prepare a letter of suspension (Attachment 'C') and ensure that it is delivered to the inmate. In the past 12 months, no inmate grievances alleging sexual abuse resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.52(b), 115.52(c), 115.52(d), 115.52(e) and 115.52(f). Corrective action is required.

**Corrective Action Recommended:**

1. Agency to amend policy I-200 Inmate Grievances agency policy to provide language which allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred.
2. Agency is to explain why an exception exists for the grievance box on weekends and holidays.
3. Is there a process or protocol where an inmate may submit a PREA related grievance without submitting it directly to a housing unit deputy?
4. Agency to provide auditor with a copy of the Inmate Handbook section that discusses the inmate grievance protocol.
5. Please provide auditor with a copy of DBPPM P-500 regarding the grievance protocol for handling allegations of sexual abuse or sexual harassment.
6. If an inmate has the ability to place a grievance of sexual abuse in the grievance box anonymously, then why is there a mandate that deputies will make every reasonable effort to resolve inmate grievances informally so that a written grievance is not necessary?
7. Please amend Policy 1-200 Inmate Grievances and provide specific documentation (such as the inmate handbook which is available to the inmates) that outlines the inmate grievance response timeframes as mandated by standard 115.52(d).
8. Agency to provide written procedure or amend Policy I-200 Inmate Grievances to include



language which permits third parties, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual

abuse and to file such requests on behalf of inmates.

**9. Agency to provide written procedure or amend Policy I-200 Inmate Grievances to require that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.**

**10. Agency to provide auditor with copy of DBPPM P-500, which discusses filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse.**

**11. Agency to amend policy I-0200 Inmate Grievances to mandate that Emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours.**

**Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.**

**Corrective Action Completion 10/30/19 :**

**1. 10/18/19, PREA Manager provided auditor with a copy of the PREA Guide of Inmate Rights and Reporting Sexual abuse or Staff Sexual Misconduct which is provided to inmates upon intake. The Guide section identified as "What to do if you have been assaulted or abused" mandates that inmates should:**

- Report the assault immediately**
- Report the assault no matter when it occurred or even if they think there is no evidence**
- Do not shower, brush teeth, or change clothes**
- Request immediate attention**
- Request to speak to a sexual assault/abuse victim advocate**

**2. Inmates can turn grievance in at any time, including weekends and holidays. They will only be retrieved from the facilities by compliance Mon-Fri because compliance works Mon-Fri. There are other avenues to submit a grievance such giving to housing officer who acts on the grievance immediately and forwards it to Shift Supervisor for action. Alternatives are PREA Hotline Women's Center High Desert – not monitored by Agency. There are other avenues to submit a grievance such giving to housing officer who acts on the grievance immediately and forwards it to Shift Supervisor for action. Alternatives are PREA Hotline Women's Center High Desert – not monitored by Agency.**

**Agency provided auditor with copy of the Inmate pamphlet which indicates that "Inmates may file a written grievance about any issue related to their incarceration that they do not agree with or feel is a violation of the Sheriff's Office policies. Group grievances or grievances regarding issues not related to confinement will not be accepted. Grievances will be forwarded to the proper personnel for investigation and a timely written response to the inmate.**

**Policy I-200 Inmate Grievances, Directive #4 mandates Grievances involving sexual abuse, sexual harassment or staff sexual misconduct will be referred for investigation and/or criminal complaint as appropriate. The shift supervisor will notify the PREA Coordinator and the appropriate Section Manager of any such grievances received.**

**When asked when an inmate has the ability to place a grievance of sexual abuse in the grievance box anonymously, then why is there a mandate that deputies will make every**

reasonable effort to resolve inmate grievances informally so that a written grievance is not

necessary? Agency's response is that this would be considered an incident that is not "whenever possible". the policy wording was meant to resolve issues that are non-grievance related issues, as in using the grievance system for inmate requests of extra bedding or asking when their out date is, etc.

**Policy I-200 Inmate Grievances Procedure A: Accepting Inmate Grievances** mandates that Deputies will make every reasonable effort to resolve inmate grievances informally so that a written grievance is not necessary. However, if the deputy cannot resolve the grievance and the inmate still requests a grievance form, the deputy will give the inmate an inmate grievance form.

**3. On 10/30/19 the PREA Coordinator provided auditor with a copy of the 10/30/19 PREA Grievance Tracking directive addressed to the Compliance SST and PREA Sergeant. This Directive mandates implementation of the new inmate grievance response due date (10-days) and follow-up procedures as outlined in Standard provision 115.52(d).**

**4. Policy I-200 mandates that If the grievance involves a safety or security concern (i.e.; an issue in which delay**

**may cause substantial risk of personal injury or damage),**

- Act to resolve the grievance.
- Place the original grievance form and a copy of their response signed by the inmate in the facility grievance box.
- Additionally, if the grievance involves allegations of sexual abuse, or harassment follow the protocol outlined in DBPPM P-500. Notify the PREA Coordinator and the appropriate Section Manager of any such grievances received.

**Policy P-500 Security Response Plan** mandates that the Grievance Policy initiates the response protocol

**5. Policy I-200 mandates that If the grievance involves a safety or security concern (i.e.; an issue in which delay**

**may cause substantial risk of personal injury or damage),**

- Act to resolve the grievance.
- Place the original grievance form and a copy of their response signed by the inmate in the facility grievance box.
- Additionally, if the grievance involves allegations of sexual abuse, or harassment follow the protocol outlined in DBPPM P-500. Notify the PREA Coordinator and the appropriate Section Manager of any such grievances received. Policy P-500 Security Response Plan mandates that the Grievance Policy initiates the response protocol.

**6. On 9/23/19, PREA Manager provided auditor with copy of amended Policy P-450 which mandates that Any third-party person may assist an inmate with writing, or directly filing on an inmate's behalf a request for administrative remedy related to allegations of sexual assault/abuse provided that;**

- The inmate approves of any third-party administrative remedy request filed on their behalf;
- The inmate agrees to participate in the administrative remedy process.
- An inmate's refusal to participate in administrative remedy shall be documented in CJIS using code 4050.

**The agency/facility has met the requirements of Standard provision(s) 115.52(b), 115.52(c), 115.52(d), 115.52(e) and 115.52(f), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.52.**

115.53	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.53(a) - P-0550 Victim Services Response Plan mandates that KCSO contracts with a provider of professional rape crisis advocate counseling services for inmates sexually abused or assaulted during incarceration. Per KCSO's victim advocate agreement, the victim advocate shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals, as requested by the victim.</p> <p>KCSO shall provide inmates with access to outside victim advocates for ongoing emotional support services related to sexual abuse by giving inmates access to a rape crisis counseling line. In addition, inmates shall be provided addresses of victim advocate providers and, for persons detained solely for civil immigration purposes, designated immigrant services agencies in Kern County.</p> <p>KCSO shall enable reasonable communication between inmates and community based services, in as confidential a manner as possible. KCSO will 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.</p> <p>Under KCSO's victim services MOU, inmates who report sexual abuse or assault prior to incarceration shall be entitled to confidential counseling services.</p> <p>There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.</p> <p>115.53(b) - P-0550 Victim Services Response Plan mandates that KCSO shall enable reasonable communication between inmates and community based services, in as confidential a manner as possible. KCSO will 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. Under KCSO's victim services MOU, inmates who report sexual abuse or assault prior to incarceration shall be entitled to confidential counseling services.</p> <p>There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.</p> <p>Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.53(b), and corrective action is required.</p> <p><b>Corrective Action Recommendation:</b></p> <ol style="list-style-type: none"> <li>1. Agency to provide verification as to how it informs 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.</li> </ol> <p>Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19</p>

**Corrective Action Completion 11/1/19 :**

- 1. On 11/1/19, the PREA Manager provided auditor with the following information: 442 inmates were booked into Kern County Jail Central Receiving Intake from 11/10/17 and 11/10/18. Each of the 442 inmates were transferred from Central Receiving to the Lerdo Minimum Facility within 72 hours as an inter-facility transfer after intake. Upon transfer, each inmate annotated and signed the PREA Facility Transfer Risk Assessment. The signed acknowledgement verified that each inmate was asked the following:**
- 1. If they have any concerns about being sexually assaulted, sexually abused, or sexually harassed by other inmates or staff because of their sexual orientation, gender identity, mental health or disability?**
  - 2. Have they experienced any type of sexual assault, sexual abuse, or sexual harassment at the facility from which they came from?**

**Inmates are responsible to read a PREA advisement which states:**

**“You have the right to be free from sexual abuse while in the Sheriff’s custody. The Sheriff has zero-tolerance for sexual abuse against inmates and all reports will be investigated. To report an incident, you can dial #7777, talk to a Deputy, or medical person.”**

**This form is utilized for all inmates who are transferred from one facility to another. PREA posters in English and Spanish are posted in intake and viewed by inmates in booking. Agency provided auditor with photo verification of PREA Posters (English & Spanish) posted in intake area and each housing unit dayroom and Female housing unit courtyard. In addition, a call monitoring poster (HOTLINES) is placed throughout the facility at each housing unit which explains that hotline calls are not monitored by the Sheriff’s office, only monitored by the receiving agencies (Women’s Center High Desert counseling service & Bakersfield Police Department) for sexual abuse reporting purposes.**

**The agency/facility has met the requirements of Standard provision(s) 115.53(b), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.53.**

115.54	<b>Third-party reporting</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>The agency or facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment on the Kern County Sheriff's Office website:</p> <p>"The Kern County Sheriff's Office (KCSO) has a Zero-Tolerance policy against any form of sexual abuse or sexual harassment of inmates detained in its custody. and is committed to enforcing the standards set forth by the Prison Rape Elimination Act (PREA). In support of KCSO's zero-tolerance policy, KCSO has established a Detentions Bureau PREA Coordinator to oversee compliance with the PREA standards and respond to any reports of sexual abuse within the jail facilities. It is KCSO'S policy to promptly, thoroughly and objectively investigate and document all reports of; sexual abuse, or harassment of one inmate by another inmate sexual misconduct by an employee, contractor, or volunteer harassment of an inmate or retaliation of an inmate for reporting or cooperating in an investigation of sexual abuse or harassment. When appropriate, investigated reports of sexual abuse shall be referred to the District Attorney's office for prosecution. Any person wishing to contact the PREA Coordinator regarding a sexual abuse, sexual harassment, or retaliation incident occurring in one of the Sheriff's jail facilities may call 661-391-7967 or email <a href="mailto:PREAcoordinator@kernsheriff.org">PREAcoordinator@kernsheriff.org</a>."</p> <p>To file a report:  Click here to download report form  Complete the report form  Email form to <a href="mailto:PREAcoordinator@kernsheriff.org">PREAcoordinator@kernsheriff.org</a></p> <p>or Mail to:</p> <p>Sheriffs Office  Attn: PREA Coordinator 1350 Norris Rd  Bakersfield, CA 93308</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.54(a).</p>



115.61	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p><b>115.61(a) - P-0450 Reporting Sexual Abuse mandates that any staff member who has knowledge, suspicion, or information regarding an incident of sexual assault/abuse or sexual harassment; retaliation against inmates or staff who reported such an incident; and any staff neglect that may have contributed to such an incident or retaliation, shall immediately report such information to a supervisor.</b></p> <p><b>Interview with a 2 Minimum facility caretaker staff assigned to Maximum/Medium facility indicates that the agency requires all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse, sexual harassment and retaliation. The reporting protocol or procedure for reporting any information related to sexual abuse is to notify the immediate supervisor.</b></p> <p><b>115.61(b) - P-0450 Reporting Sexual Abuse mandates that staff shall not reveal any information related to a sexual assault/abuse report to anyone uninvolved in the response and investigation.</b></p> <p><b>Interview with a 2 Minimum facility caretaker staff assigned to Maximum/Medium facility indicates that the agency requires all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse, sexual harassment and retaliation. The reporting protocol or procedure for reporting any information related to sexual abuse is to notify the immediate supervisor.</b></p> <p><b>115.61 (c) - PAQ indicates that unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. P-0450 Reporting Sexual Abuse mandates that medical and mental health practitioners shall report knowledge, suspicion, or information regarding sexual assault/abuse, sexual harassment, retaliation, or staff neglect pursuant to this section. Unless precluded by federal, state or local law, Medical and Mental Health staff shall inform inmates of their duty to report sexual abuse and the limits of their confidentiality "at the initiation of services.</b></p> <p><b>Interview with mental health staff indicates that inmates are informed that they are mandated reporters when a case of sexual abuse is involved. This is conducted verbally and there is no form to be signed. This staff member indicates awareness of a sexual abuse incident after the fact, not directly involved. Medical staff indicates that they do the same but have consent forms signed by both the inmate and the staff member conducting the exams for verification. Medical staff interviewee indicates that she had become aware of a sexual abuse incident in the past and acted upon it per agency rules and requirements.</b></p> <p><b>115.61 (d) - P-0450 Reporting Sexual Abuse mandates that when reporting incidents of sexual abuse, If the alleged victim may be considered a vulnerable adult (based on age, or disability as defined in DBPPM H-1200) staff shall also notify the PREA coordinator in accordance with mandatory reporting laws.</b></p> <p><b>Interview with the Facility Commander indicates that no underage youth are housed at the agency adult facilities. A normal response is conducted when vulnerable adult is victim of</b></p>

sexual abuse to include notification to Adult Protective Services.

Interview with the PREA Coordinator indicates that there is no contact visiting and no minors in custody at any of the adult facilities. Vulnerable adults are monitored for risk and reviewed by mental health regularly. In the event of sexual abuse Department of Human Services is contacted and an investigation is initiated immediately.

**115.61 (e) - P-0450 Reporting Sexual Abuse mandates that in accordance with the Prison Rape Elimination Act (PREA) standards, inmates shall be provided multiple avenues, internally and externally, for reporting sexual assault/abuse. Anonymous and third party verbal or written reports of sexual assault/abuse shall be accepted by staff from any person on an inmate's behalf. Reports of assault/abuse occurring outside of KCSO facilities shall be referred to the appropriate custodial facility or law enforcement agency. The KCSO Sexual Assault and Abuse Investigations Unit (SAAIU) shall report all incidents of sexual abuse occurring in its custodial facilities in required annual reports to "the State of California."**

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.61.

<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p><b>115.62(a) - P-0500 Sexual Assault or Abuse - Security Response Plan mandates that security staff notified of a non-acute in custody sexual assault will:</b></p> <ul style="list-style-type: none"> <li>• <b>Notify the on duty shift supervisor</b></li> <li>• <b>Identify and separate victim(s) from any known or potential suspect(s)</b></li> <li>• <b>Identify any possible witnesses</b></li> <li>• <b>Notify classification for housing change and “keep aways”</b></li> <li>• <b>Write appropriate supplemental ILEADS Incident report(s)</b></li> </ul> <p><b>Shift Supervisor will:</b></p> <ul style="list-style-type: none"> <li>• <b>Obtain basic information</b></li> <li>• <b>Determine misdemeanor or felony, brief day shift SAAIU Sergeant if felony</b></li> <li>• <b>Assign preliminary investigating Detentions Senior Deputy</b></li> <li>• <b>Ensure medical care is provided as appropriate</b></li> <li>• <b>Ensure mental health referral is provided</b></li> <li>• <b>Pull crime case number for investigating Detentions Senior Deputy</b></li> <li>• <b>Ensure appropriate supplemental ILEADS Incident reports are written</b></li> <li>• <b>Ensure inmate is provided with follow up victim advocate information</b></li> </ul> <p><b>In the past 12 months, the agency or facility determined that no inmate was subject to a substantial risk of imminent sexual abuse.</b></p> <p><b>Interview with Agency Head designee indicates that if the claim is made at booking, classification makes the inmate safe and houses them appropriately using the classification transfer form if moving between facilities. When brought to our attention, classification is notified and immediately works with the inmate to ensure safety actions are taken immediately.</b></p> <p><b>Interview with the Facility Commander indicates that two investigators are assigned to each squad to conduct investigations of sexual abuse and sexual harassment in a timely manner - there are four squads.</b></p> <p><b>Interview with a 2 Minimum facility caretaker staff assigned to Maximum/Medium facility indicates that in the event that an inmate reports imminent sexual abuse to a staff member, they immediately remove the inmate from the situation and keep them separate from the perpetrator, notify the supervisor and classification. Recommend housing change pending investigation.</b></p> <p><b>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.62.</b></p>

115.63	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.63(a) - P-0450 Reporting Sexual Abuse mandates that if KCSO receives information that a sexual assault had occurred at another confinement facility, it has the duty to report the incident to that confinement facility.</p> <ul style="list-style-type: none"> <li>• Security staff shall notify the next supervisor in their chain of command</li> <li>• Section manager shall notify the head of the appropriate agency or jurisdiction where assault/abuse occurred</li> <li>• Notification shall be made within 72 hours of the allegation</li> <li>• Section manager shall notify the PREA Compliance manager</li> <li>• Section manager shall ensure a CJIS incident is written.</li> </ul> <p>Policy is non-compliant with standard provision which requires the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. In the past 12 months, the agency reports that there have been no allegations the facility received that an inmate was abused while confined at another facility.</p> <p>115.63(b) - P-0450 Reporting Sexual Abuse mandates that if KCSO receives information that a sexual assault had occurred at another confinement facility, it has the duty to report the incident to that confinement facility.</p> <ul style="list-style-type: none"> <li>• Security staff shall notify the next supervisor in their chain of command</li> <li>• Section manager shall notify the head of the appropriate agency or jurisdiction where assault/abuse occurred</li> <li>• Notification shall be made within 72 hours of the allegation</li> <li>• Section manager shall notify the PREA Compliance manager</li> <li>• Section manager shall ensure a CJIS incident is written.</li> </ul> <p>Policy is non-compliant with standard provision which requires the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred.</p> <p>115.63(c) - Agency provided auditor with the notification form letter, a blank P-450 - Attachment B - Agency Abuse Notification Form. Agency also provided two completed notification letters to outside agency notifying the agency that two inmates alleged sexual abuse at their facility which verifies compliance.</p> <p>115.63(d) - P-0450 Reporting Sexual Abuse mandates that if security staff notified of an in-custody sexual assault that involved another agency will:</p> <ul style="list-style-type: none"> <li>• Notify the on duty shift supervisor</li> <li>• Obtain basic information, i.e. date, current injuries, and previously reported to law enforcement</li> <li>• Assaults five (5) days or less, obtain medical care</li> <li>• Write an ILEADS Incident report and CJIS report using PREA code 4050 and information</li> </ul>

only code 4037

- Provide inmate with victim advocate contact information

Shift Supervisor will:

- Obtain basic information
- Notify SAAIU if less than five (5) days
- Notify other agency, document person reported to
- Ensure medical care is provided as appropriate
- Ensure mental health referral, or victim advocate is provided
- Write a supplemental ILEADS Incident report documenting agency and person notified

In the past 12 months, agency PAQ indicates that no allegations of sexual abuse the facility received from other facilities. Interview with Agency Head designee indicates that if another facility refers allegations of sexual abuse or sexual harassment that occurred in one of the Kern County Jail facilities, the designated point of contact is the PREA Coordinator, which results in an immediate followup. The Agency Head designee cannot recall receiving any such allegations.

Interview with Facility commander indicates that he cannot think of any examples of another facility or agency reporting sexual abuse allegations.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.63(a) & 115.63(b). Corrective action is required.

Corrective Action Recommendation:

1. Agency to amend policy P-0450 to mandate that if KCSO receives information that a sexual assault had occurred at another confinement facility the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred.

2. Agency to amend policy P-0450 to mandate that if KCSO receives information that a sexual assault had occurred at another confinement facility the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred within 72 hours.

Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.

Corrective Action Completed 10/30/19:

1. On 10/30/19, the PREA Manager provided auditor with copy of the Sheriff' Detention Lieutenant Class Specification Bulletin which identifies the facility Section Manager position meets the requirement as Section Managers are identified as the Facility Manager and Lerdo facilities division Watch Lieutenants.

2. On 10/30/19, the PREA Manager provided auditor with copy of the Sheriff' Detention Lieutenant Class Specification Bulletin which identifies the facility Section Manager position meets the requirement as Section Managers are identified as the Facility Manager and Lerdo facilities division Watch Lieutenants.

**The agency/facility has met the requirements of Standard provision(s) 115.63(a) & 115.63(b), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.63.**

115.64	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.64(a) - P-0500 Sexual Assault or Abuse - Security Response Plan mandates that "Security Staff discovering a new sexual assault will:</p> <ul style="list-style-type: none"> <li>• Radio "assault" only, indicate not in-progress if appropriate</li> <li>• Lock down unit or relocate inmates to holding cell or recreation yard</li> <li>• Assist inmate with necessary first aid until medical staff arrive</li> <li>• Identify and separate any victim(s) from any known or potential suspect(s)</li> <li>• Restrict access to and secure any potential crime scene(s)</li> <li>• Begin completing a KCSO Crime Scene Log</li> <li>• Identify any possible witnesses</li> <li>• Ensure all involved inmates are secured both from sight and sound</li> <li>• Advise victim not to eat, drink, brush teeth, change clothes, or use the toilet in order to preserve potential evidence;</li> <li>• Secure suspect(s) in area without water access for limited amount of time</li> <li>• Transport victim to infirmary via gurney, wheelchair, or walking, per medical staff</li> <li>• Leave unit locked down and secured for Investigator / TI</li> <li>• Write appropriate supplemental ILEADS Incident report(s)"</li> </ul> <p>The shift supervisor shall collect all relevant information from first responders, medical staff (if the victim has been seen), and the investigating Detentions Senior Deputy. The shift supervisor shall then contact the SAAIU Sergeant or on-call Detective Sergeant. The SAAIU Sergeant or on-call Detective Sergeant shall determine the need for an immediate "call out" and transportation of the victim to the hospital approved to conduct the exam, or a reasonable postponement.</p> <p>Policy P-0500 Sexual Assault or Abuse - Security Response Plan fails to require that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report to separate the alleged victim and abuser. Policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.</p> <p>First Responder Security Staff notified of allegations of sexual abuse will:</p> <ul style="list-style-type: none"> <li>• Obtain basic information from the victim for the shift supervisor</li> <li>• Separate the victim from any potential suspect(s)</li> <li>• Contact classification for housing change and 'keep aways'</li> <li>• Write appropriate supplemental ILEADS Incident report(s)</li> <li>• Inform only those staff who need to know to complete the investigation</li> </ul> <p>DIRECTIVE C-1: New Assault (Medical Priority) mandates that Medical staff will:</p> <ul style="list-style-type: none"> <li>• Respond to the location, provide necessary first aid</li> <li>• Advise method of transport to infirmary</li> <li>• Examine victim using evidence preservation methods</li> <li>• Advise inmate not to eat, drink, brush teeth, change clothes, or use toilet</li> </ul>

- Advise need for forensic exam, hospital transport
- Give any collected evidence to the investigating Deputy for appropriate packaging and labeling
- Prepare medical transport papers for SART Nurse

**DIRECTIVE C-2: Acute In-Custody Assault (less than five (5) days) Medical staff will:**

- Examine victim using evidence preservation methods
- Advise inmate not to eat, drink, brush teeth, change clothes, or use toilet
- Advise need for forensic exam, hospital transport
- Prepare medical transport papers, any evidence, or other relevant information for SART Nurse
- Provide prophylactic treatment as necessary

PAQ indicates that in the past 12 months there were no allegations where staff were notified within a time period that still allowed for the collection of physical evidence. Of these allegations of sexual abuse in the past 12 months, there were no instances where the first security staff member to respond to the report separated the alleged victim and abuser. Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there were no instances where the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence. In the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there were no instances where the first security staff member to respond to the report requested 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. Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there were no instances where the first security staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

There are no staff members assigned to Minimum facility. Interviews with Justice facility security and non-security staff 1st Responders indicates that the security staff member follows the prescribed protocol. The non-security staff member protects the victim and immediately reports the incident to the supervisor. There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.64.



115.65	<b>Coordinated response</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.65(a) - The PAQ indicates that the facility has not developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff 1st Responders, medical and mental health practitioners, investigators, and facility leadership. Interview with Facility Commander indicates that there is a coordinated response plan for incidents of sexual abuse which is to contact medical, mental health and advocacy. The Facility Commander indicates that the response is the same for all facilities. Please note, that the coordinated response is not identified as being facility specific. Auditor was not provided a copy of the facility specific Coordinated Response to accompany the PAQ.</p> <p>Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.65. Corrective action is required.</p> <p><b>Corrective Action Recommendation:</b></p> <p>1. Agency shall develop a facility specific written plan to coordinate actions taken in response to an incident of sexual abuse among staff 1st Responders, medical and mental health practitioners, investigators and facility leadership in accordance with standard 115.65(a).</p> <p><b>Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.</b></p> <p><b>Corrective Action Completion 10/26/19:</b></p> <p>1. 10/26/19, Agency PREA Coordinator indicated that the Coordinated Response Protocol is identified in Policies P-500 and P-550. Upon review of both policies, auditor verified that the Coordinated Response Plan for both facilities is identified within both policies. Policy 500 Sexual Assault / Abuse – Security Response Plan outlines specific response when responding to or investigative a sexual assault/sexual abuse incident, which includes actions/responsibilities by the 1st Responder, Section Manager (Facility Commander), Shift Supervisor, Investigations Unit, on-call Detective Sgt or SAAIU Sergeant, Medical &amp; Mental Health, Victim Advocate contact, hospital transport, PREA Compliance Manager. Policy 550 Victim Services Response Plan outlines the response by Medical and Mental Health staff and Victim Advocacy and ongoing support in response to a sexual abuse.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.65(a), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.65.</p>

115.66	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.66(a) - P-0200 Prevention And Detection Of Sexual Abuse mandates that KCSO is an agency of the County of Kern and bound by county civil service ordinances. The County of Kern conducts collective bargaining for all county agencies and their respective employee bargaining units. The County collectively bargains with Kern Law Enforcement Association (KLEA), Kern County Detention Officer Association (KCDOA) and Service Employees International Union (SEIU) for issues related to employee pay, leave time, health benefits, uniform allowances. No issues related to employee discipline are negotiated as part of the collective bargaining process.</p> <p>Interview with Agency Head designee indicates that everything is governed by current policy P-0100. Agency did not provide auditor with copy of Policy P-0100 with PAQ for review for compliance.</p> <p>115.66(b) - N/A - Auditor is not required to audit this standard per DOJ</p> <p>Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.66(a) and corrective action is required."</p> <p><b>Corrective Action Recommendation:</b></p> <p>1. Agency to provide auditor with a copy of policy P-100 which did not accompany PAQ.</p> <p>Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.</p> <p><b>Corrective Action Completion 11/12/19:</b></p> <p>1. On 10/30/19 the PREA Manager provided auditor with current KLEA Kern Law Enforcement MOU with term date from 9/17/19 to 6/30/20. The MOU mandates that the Sheriff-Coroner and the District Attorney have the right to reassign personnel in their respective departments based on their discretion.</p> <p>On 11/12/19, the PREA Manager provided auditor with current KCDOA Kern County Detention Officer's Association MOU extension with term date from 1/1/18 to 9/30/19. There is no language which limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. Communication with the Chief of Human Resources Officer states that Kern County and the Kern County Detention Officer's Association (KCDOA), are in negotiations over a successor MOU as the current MOU expired 9/30/19. Under state labor laws, the terms and conditions of a MOU continue in force until a successor MOU is adopted of terms and conditions of employment are imposed by the Board of Supervisors after completion of the bargaining process. For KCDOA, neither of those circumstances has occurred and the current contract is still in force despite the expiration date having past.</p> <p>The agency/facility has met the requirements of Standard provision(s) 115.66(a), completed during the corrective action period. The auditor has determined that the agency/facility has</p>

met all standard provisions and complies with Standard 115.66.

115.67	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p><b>115.67(a) - P-0600 PREA - Criminal and Administrative Investigations Procedure C Harassment / Retaliation Investigations Detentions mandates that "the Senior Deputy will:</b></p> <ul style="list-style-type: none"> <li>• Obtain basic information from reporting person;</li> <li>• Determine if new incident or prior incident exists;</li> <li>• If prior incident exist, review incident reports prior to interview(s);</li> <li>• Conduct necessary recorded interview(s);</li> <li>• Obtain any documented proof;</li> <li>• Brief shift supervisor ;</li> <li>• Write CJIS and ILEADS reports;</li> <li>• Forward completed incident file to PREA coordinator.</li> </ul> <p><b>Shift Supervisor will:</b></p> <ul style="list-style-type: none"> <li>• Review all information</li> <li>• Make appropriate notifications"</li> </ul> <p><b>115.67(a) - P-0600 PREA - Criminal and Administrative Investigations Procedure C: Harassment / Retaliation Investigations Detentions fails to provide language which 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.</b></p> <p><b>Agency has established the PREA Compliance Sergeant as charged with monitoring possible retaliation</b></p> <ul style="list-style-type: none"> <li>• Brief shift supervisor</li> <li>• Write CJIS and ILEADS reports;</li> <li>• Forward completed incident file to PREA coordinator.</li> </ul> <p><b>115.67 (b) The PAQ indicates that the agency employs multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.</b></p> <p><b>Interview with Agency Head designee indicates that inmates are protected from retaliation for sexual abuse or sexual harassment allegations through housing changes for inmates or duty changes pending investigation for instances involving staff. Interview with Facility Commander indicates that inmates and staff are protected from retaliation for sexual abuse or sexual harassment allegations through protection measures such as counseling through WCHD and Behavioral Health, housing unit changes for inmates. Staff protection measures include work position changes, counseling and monitoring for safety and review for ongoing retaliation. Minimum facility has had no inmates since 11/10/18 or assigned staff. Only 2 staff members who are assigned to Maximum/Medium facility maintains the Minimum facility in an operational status and neither are assigned to monitor retaliation as the facility is pending renovation.</b></p> <p><b>115.67(c) - P-0600 PREA - Criminal and Administrative Investigations Procedure C:</b></p>

**Harassment / Retaliation Investigations mandates that the Detentions Senior Deputy will:**

- Obtain basic information from reporting person;
- Determine if new incident or prior incident exists;
- If prior incident exist, review incident reports prior to interview(s);
- Conduct necessary recorded interview(s);
- Obtain any documented proof;
- Brief shift supervisor ;
- Write CJIS and ILEADS reports;
- Forward completed incident file to PREA coordinator.

**Shift Supervisor will:**

- Review all information;
- Make appropriate notifications

**Per Policy P-0600 PREA - Criminal and Administrative Investigations, the agency/facility acts promptly to remedy any such retaliation. PAQ indicates that the agency conducts monitoring for 90 Days at a minimum unless the victim and or suspect is released before the 90 days.**

**There is no language which mandates that the agency/facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need. PAQ indicates that at no time has there been an incident of retaliation occurred in the past 12 months.**

**Interview with Facility Commander indicates that inmates and staff are protected from retaliation for sexual abuse or sexual harassment allegations through protection measures such as counseling through WCHD and Behavioral Health, housing unit changes for inmates. Staff protection measures include work position changes, counseling and monitoring for safety and review for ongoing retaliation. Monitoring is for at least 90 days or released from custody. Monitoring can be extended for continued retaliation. The maximum length of time for monitoring can be for the entire length of stay in custody. There is no assigned Retaliation Monitor to the Minimum facility as there are no assigned staff and no inmates housed there since 11/10/18.**

**115.67(d) - P-0600 PREA - Criminal and Administrative Investigations does not mandate that in the case of inmates, such monitoring shall also include periodic checks.**

**There is no assigned Retaliation Monitor to the Minimum facility as there are no assigned staff and no inmates housed there since 11/10/18.**

**115.67(e) - P-0600 PREA - Criminal and Administrative Investigations mandates that Detentions Senior Deputy will:**

- Obtain basic information from reporting person;
- Determine if new incident or prior incident exists;
- If prior incident exist, review incident reports prior to interview(s);
- Conduct necessary recorded interview(s);
- Obtain any documented proof;
- Brief shift supervisor ;
- Write CJIS and ILEADS reports;
- Forward completed incident file to PREA coordinator.

**Shift Supervisor will:**

- Review all information;

- **Make appropriate notifications."**

**115.67(f) - Auditor is not required to audit this provision per DOJ**

**Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.67(a) and corrective action is required.**

**Corrective Action Recommendation:**

**1. Agency to amend Policy P-0600 to mandate protection for 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.**

**Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.**

**Corrective Action Completion 9/10/19:**

**9/10/19, the PREA Manager provided Auditor with copy of amended Policy P-450, Reporting Sexual Abuse – DIRECTIVE #7 – Protection from retaliation for reporting, which mandates that:**

**KCSO policy is to protect all inmates and staff who report sexual assault/abuse or sexual harassment or cooperate with sexual assault/abuse or sexual harassment investigations from retaliation by other inmates or staff by utilizing;**

- Classification changes**
- Housing or facility transfers**
- Staff re-assignment**
- Victim advocate services**

**Use of segregated housing to protect an inmate who is alleged to have suffered sexual assault/abuse shall be in accordance with DBPPM K-300 and DBPPM K-400.**

**Agency has amended Policy P-450 per Corrective Action request in order to meet standard provision 115.67(a). Auditor has determined that Agency is in compliance with Standard**

**115.67.**

115.68	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.68(a) - K-0300 Classification Criteria Classification mandates that staff shall consider a variety of factors in all administrative segregation decisions, including but not limited to:</p> <ul style="list-style-type: none"> <li>• The inmate is determined to be prone to escape attempts</li> <li>• Assaultive toward staff or other inmates</li> <li>• The inmate disrupts the operation of the jail, or incites inmates"</li> <li>• The inmate needs protection from other inmates</li> <li>• The inmate is likely to jeopardize the safety and security of the facility"</li> </ul> <p>Policy K-0400 Administrative Segregation mandates that "Inmates likely to need protection from other inmates, including those at risk for sexual abuse, or recently abused, may be housed in administrative segregation if no other alternative exists. Procedure B: Administrative Segregation of PREA at Risk Inmates indicates that</p> <p>Inmates administratively segregated at intake due to risk of sexual abuse shall;</p> <ul style="list-style-type: none"> <li>• Have a complete assessment performed by classification within 24 hours to ensure administrative segregation is necessary and the inmate is housed in the least restrictive housing available</li> <li>• Not exceed 30 days of administrative segregation without documentation of the concern for the inmate's safety, including articulation of why no alternative means of separation from abusers can be arranged</li> <li>• Have access to programs, privileges, education, and work opportunities to the extent possible. If access is limited, the following shall be documented; <ul style="list-style-type: none"> <li>o The opportunity limited</li> <li>o Duration of the limitation</li> <li>o Reasons for such limitations</li> </ul> </li> <li>• Classification staff shall conduct a review every 30 days or sooner to determine the need for continued separation from general population.</li> </ul> <p>Interview with Facility Commander indicates that he cannot recall the latest circumstance where segregated housing was used to protect an inmate who was alleged to have suffered sexual abuse. Minimum facility only houses inmates that are classified to be housed in general population. If an inmates needed to be housed in involuntary segregation for being at high risk for sexual victimization or who have alleged sexual abuse, they would be moved to involuntary segregation in alternate housing facilities.</p> <p>Minimum facility is pending renovation and has no assigned staff or inmates. Last inmate housed at Minimum facility was transferred to other Kern CJ facility on 11/10/18.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.68.</p>



115.71	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.71(a) - P-0300 Employee Training and Inmate Education - Procedure A: Administrative Segregation mandates that: "Classification staff shall consider a variety of factors in all administrative segregation decisions, including but not limited to:</p> <ul style="list-style-type: none"> <li>• The inmate is determined to be prone to escape attempts</li> <li>• Assaultive toward staff or other inmates</li> <li>• The inmate disrupts the operation of the jail, or incites inmates"</li> </ul> <p>P-0600 PREA - Criminal and Administrative Investigations mandates that:  "The Kern County Sheriff's Office (KCSO), as a law enforcement agency shall promptly, thoroughly, and objectively investigate all reports of inmate sexual assault, abuse, harassment, or retaliation occurring in its custodial facilities, including third-party and anonymous reports. Investigations shall be conducted utilizing standard investigation methods in accordance with all laws. No standard higher than a preponderance of the evidence shall be used in determining whether allegations of sexual abuse or sexual harassment are substantiated in administrative investigations."  Interview with investigative staff indicates that once investigations is informed of a complaint of sexual abuse or sexual harassment, an investigation is initiated. Once the case is recieved with the nature of the complaint, the Detective Bureau initiates the investigation of any sexual assault. The detective picks up the case from the Senior deputy.</p> <p>115.71 (b) - P-0600 PREA - Criminal and Administrative Investigations mandates that, "Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to Policy. All administrative, criminal, and sexual abuse investigators shall receive specialized training in their respective assignments prior to conducting sexual abuse investigations.  Agency reported that there 13 trained special investigative staff who are trained to conduct sexual abuse investigations in a confinement setting. Interview with investigative staff indicates that they receive training specific to conducting sexual abuse investigation in a confinement setting. The training includes Interview and interrogation, crime scene investigations, sexual assault, evidence collection, Lybarger and Beheler. Investigator indicated that Garrity warning training is not included as staff is not compelled to give a statement, which is non-compliant with the PREA standard 115.34. Topics also included techniques for interviewing sexual abuse victims, proper use of Miranda and Beheler warnings, Sexual abuse evidence collection in a confinement setting and the criteria and evidence required to substantiate a case for administrative or prosecution referral. Agency provided auditor with a Special Investigator excel program which identifies investigators who have completed the online investigator training program.</p> <p>115.71 (c) - P-0600 PREA - Criminal and Administrative Investigations mandates that, "Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator."</p>

Interview with investigative staff indicates that once a case is received, the first steps in initiating an investigation is to determine the nature of the complaint. The Detective Bureau initiates the investigation and the sexual assault investigative detective picks up the case from the Senior deputy. The investigative process is the same as all sexual abuse investigations as mandated by standard provision 115.34, on a case by case basis.

The training includes Interview and interrogation, crime scene investigations, sexual assault, evidence collection, Lybarger and Beheler. Investigator indicated that Garrity warning training is not included as staff is not compelled to give a statement, which is non-compliant with the PREA standard 115.34. Topics also included techniques for interviewing sexual abuse victims, proper use of Miranda and Beheler warnings, Sexual abuse evidence collection in a confinement setting and the criteria and evidence required to substantiate a case for administrative or prosecution referral. Agency provided auditor with a Special Investigator excel program which identifies investigators who have completed the online investigator training program.

115.71 (d) P-0600 PREA - Criminal and Administrative Investigations mandates that, "When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution."

Interview with investigator indicate they do not conduct compelled interviews.

115.71 (e) P-0600 PREA - Criminal and Administrative Investigations mandates that, "The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation." Interview with investigative staff indicates that they give all interviewees the benefit of the doubt until evidence proves otherwise. The investigator must conduct a fair and impartial investigation.

115.71 (f) - P-0600 PREA - Criminal and Administrative Investigations mandates that, "Administrative investigations:

- (1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse;
- (2) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings."

Interview with investigative staff indicates that determination of whether staff actions or failures to act contributed to the sexual abuse is a factor when conducting a sexual abuse investigation. Administrative and criminal investigations are documented in written reports. Information contained in the reports include video evidence, data collection such as log books etc, DNA SART exams, eyewitness testimony, crime scene evidence, physical injuries, prior reports, eyewitness testimony and crime scene evidence.

115.71 (g) - P-0600 PREA - Criminal and Administrative Investigations mandates that: "Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. Administrative and criminal investigations shall be

documented in a written report that contains a thorough description of physical, testimonial,

and documentary evidence and attaches copies of all documentary evidence where feasible.  
"" Interview with investigator indicates that all criminal investigations are documented.

115.71(h) - Policy P-0300 Employee Training and Inmate Education mandates that,  
""Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution assuming they fall within the statute of limitations PC 801.1.""

Policy P-0600 PREA - Criminal and Administrative Investigations mandates that,  
"Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution assuming they fall within the statute of limitations PC 801.1." Per the PAQ, the number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012, or since the last PREA audit, whichever is later. Interview with investigative staff indicates that cases are referred for prosecution upon the completion of the investigation as long as there is probable cause and if the District Attorney sees that the case can be proved beyond a reasonable doubt.

115.71 (l) - PAQ indicates that 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.

Interview with the Facility Commander indicates that when an outside agency investigates an incident of sexual abuse in this facility, the PREA Coordinator is the point of contact and made available for notification s to the progress of the investigation. Interview with the PREA Coordinator indicates that he is the to be informed of the progress of the sexual abuse investigation.

Minimum facility has no assigned staff or inmates as it is pending renovation. Interview with the Justice facility PREA Compliance Manager indicates that when an outside agency investigates an incident of sexual abuse in this facility, the Sexual Assault Investigations Unit is the access point. Classification would also be involved for investigation tracking purposes. Interview with investigative staff indicates that when an outside agency investigates an incident of sexual abuse in this facility, the investigator works as a secondary investigator to assist in the investigation if requested.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.71(b) and corrective action is required.

**Corrective Action Recommendation:**

1. Agency to include Garrity warning in the special investigator training as required by standard provision 115.34(a).

Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.

**Corrective Action Completion 11/19/19:**

1. On 11/19/19, the PREA Manager provided auditor with signed and dated copies of the signed Garrity staff training acknowledgements for the 14 Special Investigators who completed the training on 11/18/19 and 11/19/19. Auditor was also provided the training certificates for all 14 investigators to include the curriculum and STC Lesson Plan for Sexual Assault

## Investigation in a Confinement Setting training.

The agency/facility has met the requirements of Standard provision(s) 115.71(b), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.71.

<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.72(a) - P-0600 PREA - Criminal and Administrative Investigations mandates that "The Kern County Sheriff's Office (KCSO), as a law enforcement agency shall promptly, thoroughly, and objectively investigate all reports of inmate sexual assault, abuse, harassment, or retaliation occurring in its custodial facilities, including third-party anonymous reports. Investigations shall be conducted utilizing standard investigation methods in accordance with all laws. No standard higher than a preponderance of the evidence shall be used in determining whether allegations of sexual abuse or sexual harassment are substantiated in administrative investigations."</p> <p>Interview with investigative staff indicates that cases are referred for prosecution upon the completion of the investigation as long as there is probable cause and if the District Attorney sees that the case can be proved beyond a reasonable doubt.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.72.</p>

115.73	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.73(a) - P-0600 PREA - Criminal and Administrative Investigations mandates that, "All notifications specified below shall be attempted or made to the inmate unless released from custody. All notifications or attempts shall be documented on a PREA Incident Findings Notification (Attachment 'A'), and include whether the allegation has been substantiated, unsubstantiated or unfounded."</p> <p>Agency reports per the PAQ that no criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months. Since there were no alleged sexual abuse investigations that were completed in the past 12 months, no inmates were notified, verbally or in writing, of the results of the investigation. Agency indicates there were no criminal and administrative investigations conducted over the past 12 months.</p> <p>Interview with the Facility Commander indicates that inmates are notified whether the investigation was substantiated, unsubstantiated or unfounded regarding a sexual abuse investigation.</p> <p>Interview with investigative staff indicates that if out of custody investigations provides inmate with written notification regarding the final determination of the investigation. If inmate is in custody, the PREA Coordinator informs the inmate as to the outcome of the investigation. There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.</p> <p>15.73(b) - N/A - This standard provision is not applicable to this facility as the agency/facility is responsible for conducting administrative and criminal investigations.</p> <p>115.73(c) - The PAQ indicates that following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever:</p> <ol style="list-style-type: none"> <li>(1) The staff member is no longer posted within the inmate's unit;</li> <li>(2) The staff member is no longer employed at the facility;</li> <li>(3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or</li> <li>(4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.</li> </ol> <p>Policy P-0600 PREA - Criminal and Administrative Investigations mandates that, "Unless a sexual abuse allegation against staff was determined to be unfounded and absent any legal restriction, KCSO shall notify inmates reporting staff sexual abuse of the investigation findings, and whenever:</p> <ul style="list-style-type: none"> <li>• The staff member is no longer posted within the inmate's unit;</li> <li>• The staff member is no longer employed at the facility;</li> <li>• The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or</li> <li>• The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility." </li></ul>

"Following an inmate's allegation of abuse by another inmate, KCSO shall 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; or
- The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility."

There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.

115.73(d) - P-600 Attachment A - PREA Incident Findings Notification - English mandates that, "Following an inmate's allegation of abuse by another inmate, KCSO shall 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; or
- The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility."

There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.

115.73(e) - Policy P-0600 PREA - Criminal and Administrative Investigations mandates that, "All notifications specified below shall be attempted or made to the inmate unless released from custody. All notifications or attempts shall be documented on a PREA Incident Findings Notification (Attachment 'A'), and include whether the allegation has been substantiated, unsubstantiated or unfounded."

Agency provided auditor with a blank copy of P-600 Attachment A - PREA Incident Findings Notification - English which provides inmates with notifications based on requirements of the Prison Rape Elimination Act 115.73(e). The PAQ indicates that in the past 12 months, there were no documented notifications to inmates were provided pursuant to this standard. Agency subsequently provided auditor with no investigative records as there were no criminal or administrative investigations conducted over the past 12 months.

115.73 (f) Auditor is not required to audit this provision per DOJ.

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.73.



115.76	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.76(a) - P-0900 PREA Hiring Promotions and Discipline mandates that, "Procedure C Staff Discipline - KCSO shall appropriately discipline staff for substantiated allegations of sexual abuse or sexual harassment. Substantiated sexual abuse by a KCSO staff member shall be grounds for termination. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p>115.76 (b): PAQ indicates that in the past 12 months, no staff from the facility have violated agency sexual abuse or sexual harassment policies. In the past 12 months, agency reports they have not had any substantiated allegations against staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies. Policy P-0900 PREA Hiring Promotions and Discipline mandates that, "Substantiated sexual abuse by a KCSO staff member shall be grounds for termination. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse."</p> <p>115.76(c): P-0900 PREA Hiring Promotions and Discipline mandates that, "Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories." Per the PAQ, in the past 12 months, no staff from the facility have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse).</p> <p>115.76(d): Policy P-0900 PREA Hiring Promotions and Discipline mandates that, "All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations of ancillary staff in lieu of termination, shall be reported to the appropriate county department head, and informed of their obligation to report the violation to the appropriate licensing body in compliance with PREA laws." In the past 12 months no staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies."</p> <p>Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.76(d) and corrective action is required.</p> <p><b>Corrective Action Recommendation:</b></p> <ol style="list-style-type: none"> <li>1. Agency to amend policy P-0900 PREA Hiring Promotions and Discipline to mandate that standard mandates that 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</li> </ol>

**resignation, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies per PREA Policy 115.76(d)-1.**

**Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.**

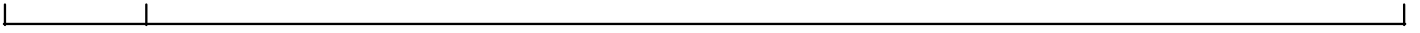
<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.77(a): P-0900 PREA Hiring Promotions and Discipline mandates that, "Any contractor or volunteer who engages in sexual abuse of an inmate shall be prohibited from contact with inmates and shall be reported to law enforcement agencies. Such conduct shall be reported to relevant licensing bodies."</p> <p>Per the PAQ, in the past 12 months, no contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates.</p> <p>115.77(b): P-0900 PREA Hiring Promotions and Discipline mandates that, "In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, the facility shall take appropriate remedial measures, and shall consider whether to prohibit all further contact by the contractor or volunteer with inmates."</p> <p>Interview with Facility Commander indicates that should a contractor or volunteer violate the agency sexual abuse or sexual harassment policy, the contractor or volunteer may lose security clearance pending outcome of the investigation. Conclusion of the investigation, may determine if the contractor or volunteer could be reinstated.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.77.</p>

115.78	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.78(a): P-0900 PREA Hiring Promotions and Discipline mandates that, "Inmates shall not be subject to disciplinary sanctions pursuant to DBPPM I-100 if the suspect(s) will be referred for criminal prosecution. Consensual sexual activity between inmates is a facility rule violation and inmates are subject to disciplinary action." In the past 12 months there have been no criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility.</p> <p>115.78 (b): The PAQ mandates that, "Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories." Per the PAQ, in the past 12 months, no administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility. In the past 12 months, no criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility.P-0900 PREA Hiring Promotions and Discipline mandates that the facility discipline is not sought if criminal charges will be filed to prevent double jeopardy. Interview with Facility Commander indicates that no sexual activity is allowed in jails. Sanctions for criminal sexual activity is up to the District Attorney's Office Prosecution. If administrative finding of guilt for sexual activity, sanctions imposed may be loss of commissary, loss of good time, rehousing, etc .</p> <p>115.78 (c): The PAQ indicates that the disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Interview with Facility Commander indicates that no sexual activity is allowed in jails. Sanctions for criminal sexual activity is up to the District Attorney's Office Prosecution. If administrative finding of guilt for sexual activity, sanctions imposed may be loss of commissary, loss of good time, rehousing, etc .</p> <p>115.78(d): P-0900 PREA Hiring Promotions and Discipline mandates that, "As a condition of access to programming or other benefits, KCSO may require the inmate to participate in a program designed to address and correct underlying reasons or motivations for the abuse." Interview with medical and mental health staff indicates that the agency offers skill building, independent living skills and healthy relationship skills.</p> <p>115.78(e): P-0900 PREA Hiring Promotions and Discipline mandates that, "The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact."</p> <p>115.78(f): P-0900 PREA Hiring Promotions and Discipline mandates 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 false reporting or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation."</p> <p>115.78(g): P-0900 PREA Hiring Promotions and Discipline mandates that, "KCSO prohibits all sexual activity between inmates and may discipline inmates for such activity. KCSO will not, however, deem such activity to constitute sexual abuse if it determines that the activity was</p>

**consensual."**

**Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.78.**

115.81	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.81(a): P-0350 PREA Intake and Screening mandates that, "Ensure that any PREA related issues reported during intake and screening are reviewed for compliance with PREA standards and KCSO policy. Ensure that inmates on automated list reporting prior sexual victimization are referred to medical or mental health in a timely manner so that they can receive treatment within 14 days of the intake and screening, PREA14AE.pdf - Agency provides electronic roster of two inmates who reported sexual abuse at intake Both were seen within 8 days of intake.</p> <p>115.81(b): N/A - Agency is a Jail and not a prison.</p> <p>115.81(c): P-0350 PREA Intake and Screening mandates that, "Ensure that any PREA related issues reported during intake and screening are reviewed for compliance with PREA standards and KCSO policy. Ensure that inmates on automated list reporting prior sexual victimization are referred to medical or mental health in a timely manner so that they can receive treatment within 14 days of the intake and screening in accordance with PREA14AE.pdf.</p> <p>115.81(d): Agency PAQ indicates that P-0550 Victim Services Response Plan Information and P-0350 PREA Intake and Screening related to sexual victimization or abusiveness that occurred in an institutional setting is not strictly limited to medical and mental health practitioners. P-0350 PREA Intake and Screening mandates that, "All staff shall exercise appropriate control on the dissemination of inmate responses to PREA Risk Screening questions, to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates per PREA standard §115.41(i). The designated PREA coordinator(s) will access a computer generated list of inmate intake screening question responses. The designated PREA Coordinator will review the list several times a week to:</p> <ul style="list-style-type: none"> <li>• Ensure that any PREA related issues reported during intake and screening are viewed for compliance with PREA standards and KCSO policy.</li> <li>• Ensure that inmates on automated list reporting prior sexual victimization are referred to medical or mental health in a timely manner so that they can receive treatment within 14 days of the intake and screening in accordance with PREA § 115.81.</li> <li>• Ensure inmates reporting gender identity issues during intake or screening are referred and reviewed by the gender identity committee per DBPPM P-410.</li> </ul> <p>115.81(e). P-0550 Victim Services Response Plan mandates that, "Mental Health shall notify the facility supervisor of any third party report of sexual assault or abuse. Mental Health staff shall obtain consent to share information from any inmate reporting sexual abuse prior to notifying the facility supervisor, except when significant danger to the inmate or other person exists." Agency does not house inmates under the age of 18 years.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.81.</p>



115.82	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p><b>115.82(a): P-0550 Victim Services Response Plan mandates that, "the Kern County Sheriff's Office (KCSO) Detentions Bureau has developed a policy on victim services and a victim services response plan to provide inmate victims of sexual harassment, abuse or assault with immediate intervention and/or prompt emergency and crisis intervention services from medical, mental health, and victim advocates. Medical staff shall provide inmate victims of sexual abuse timely, unimpeded emergency medical treatment, taking care to preserve and/or secure evidence, as possible." There was no record of any Minimum inmate who reported sexual abuse. Interview with medical and mental health staff indicates that sexual abuse victims receive timely and unimpeded access to emergency medical treatment and crisis intervention. There is an immediate response and referral to Womens Center High Desert is provided for emotional support. The nature and scope of these services are determined according to the practitioners professional judgement.</b></p> <p><b>115.82 (b): If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff 1st Responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.</b></p> <p><b>115.82(c): P-0550 Victim Services Response Plan mandates that agency is to "Provide inmate victims of sexual abuse timely, unimpeded emergency medical treatment, taking care to preserve and/or secure evidence, as possible." There was no record of any Minimum inmate who reported sexual abuse. Interview with medical and mental health staff indicates that victims of sexual abuse are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis at the the hospital with medical department followup.</b></p> <p><b>115,82(d): P-0550 Victim Services Response Plan mandates that, "KCSO shall provide free community level medical and mental health services to all sexual abuse victims with or without cooperation in any subsequent investigation."</b></p>



115.83	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<p data-bbox="247 168 885 201"><b>Auditor Overall Determination: Meets Standard</b></p> <p data-bbox="247 246 518 280"><b>Auditor Discussion</b></p> <p data-bbox="247 324 1460 436"><b>115.83(a): P-0550 Victim Services Response Plan mandates that, "KCSO shall provide medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized and to abusers if known."</b></p> <p data-bbox="247 459 1460 616">Interview with mental health staff indicates that they conduct mental health evaluations on every inmate referred to them from intake screening and also conducts followup. During the onsite physical plant review, auditor observed and verified the assistance provided by mental health all the way up to the mental health staff manager.</p> <p data-bbox="247 660 1348 694"><b>115.83 (b): P-0550 Victim Services Response Plan mandates that, "Medical staff will:</b></p> <ul data-bbox="247 705 1460 828" style="list-style-type: none"> <li>• Provide follow-up services and develop treatment plans; and</li> <li>• Offer referrals for continued care upon transfer or placement in other facilities or the victim's release from custody.</li> </ul> <p data-bbox="247 840 550 873"><b>Mental Health Staff will:</b></p> <ul data-bbox="247 884 1484 1086" style="list-style-type: none"> <li>• Conduct a suicide evaluation on victims of new or acute sexual abuse or assault, whether or not they receive a forensic exam.</li> <li>• 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."</li> </ul> <p data-bbox="247 1097 1460 1209">Interview with mental health staff indicates that mental health conducts evaluation and treatment of inmates who have been victimized on a case by case basis. There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.</p> <p data-bbox="247 1265 1460 1467"><b>115.83 (c): P-0550 Victim Services Response Plan mandates that "KCSO shall provide medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized and to abusers if known. Interview with Mental Health staff indicates that mental health services are consistent with community level of care. They can defer out to other additional care sources from the community if needed.</b></p> <p data-bbox="247 1523 1460 1601"><b>115.83(d): There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.</b></p> <p data-bbox="247 1657 1460 1736"><b>115.83(e): There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.</b></p> <p data-bbox="247 1792 1460 1982"><b>115.83(g): P-0550 Victim Services Response Plan mandates that "KCSO shall provide free community level medical and mental health services to all sexual abuse victims with or without cooperation in any subsequent investigation." There have been no inmates housed at Minimum facility since 11/10/18, therefore, no inmates were interviewed.</b></p> <p data-bbox="247 2038 1428 2116"><b>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.83.</b></p>



115.86	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.86(a) - P-0700 PREA Data Collection Reviews and Audits mandates that, "The facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded." In the past 12 months, no criminal and/or administrative investigations of alleged sexual abuse occurred at the Minimum facility.</p> <p>115.86(b) - P-0700 PREA Data Collection Reviews and Audits mandates that per PREA Sex Abuse Incident Reviews: "The facility shall conduct an incident review (Attachment – ‘C’) at the conclusion of every sexual abuse investigation, including allegations not substantiated, unless the allegation has been determined to be unfounded. The incident review shall ordinarily occur within 30 days of the conclusion of the investigation. The review team shall include the PREA coordinator, section manager, with input from line supervisors, investigators, and medical or mental health practitioners.</p> <p>115.86(c): P-0700 PREA Data Collection Reviews and Audits mandates that, "The incident review shall ordinarily occur within 30 days of the conclusion of the investigation. The review team shall include the PREA coordinator, section manager, with input from line supervisors, investigators, and medical or mental health practitioners."</p> <p>Interview with the Facility Commander indicates that the Minimum facility had Incident Review Team prior to closure for renovation. It consisted of the facility manager, investigator, on duty supervisor and medical staff.</p> <p>115.86(d): P-0700 PREA Data Collection Reviews and Audits mandates that, "The Compliance Section shall conduct a review of each incident reported and evaluate the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. Prepare and submit a report of its findings, including any recommendations for improvement, to the PREA Compliance Manager and appropriate Section Manager. The Section Manager shall implement the recommendations for improvement, or document their reasons for not doing so."</p> <p>Interview with Facility Commander indicates that the Incident Review Team uses information from the sexual abuse incident reviews to determine if there needs to be compliance checks, policy changes, training, facility redesign, logistics and determine what needs to be implemented with administrative approval.</p> <p>Minimum facility is not staffed. Auditor conducted an interview with the former PREA Compliance Manager indicates that a report of the Incident Review Team findings are prepared in a report which includes recommendations for improvement. The Compliance Manager has not had an incident to review. The Compliance Manager only sees the Incident Review Team findings and recommendations for improvement. When receiving a recommendation, she speaks with the Facility Commander and works on policy updates, procedural changes etc.</p> <p>Interview with a member of the Justice facility Incident review team who indicated that the Incident Review Team considers the criteria as outlined in standard provision 115.86(a). The team examines the area in the facility where the incident occurred and takes note of any</p>

**barriers that may enable abuse. We review if the staffing levels were adequate during all shifts and assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.**

**115.86: P-0700 PREA Data Collection Reviews and Audits mandates that, "The Compliance Section shall conduct a review of each incident reported and evaluate the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. Prepare and submit a report of its findings, including any recommendations for improvement, to the PREA Compliance Manager and appropriate Section Manager. The Section Manager shall implement the recommendations for improvement, or document their reasons for not doing so."**

**Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.86.**

115.87	<b>Data collection</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>115.87(a) - Policy P-0700 PREA Data Collection Reviews and Audits Procedure B Data Collection mandates that, "Collect accurate, uniform data for every allegation of sexual assault/abuse at all KCSO custody facilities using a standardized instrument and set of definitions, and aggregate the data at least annually. The data will be documented on an Annual PREA Facility Review Report form (Attachment 'D')."</p> <p>115.87(b) - The agency aggregates the incident-based sexual abuse data at least annually. Agency provided auditor with copy of the 2018 PREA Incident Review Data. Policy P-0700 PREA Data Collection Reviews and Audits ""The Compliance section shall conduct an annual review of the aggregated, incident-based data collected; to assess and improve the effectiveness of all PREA related training, policies, and procedures." Auditor was provided a copy of the Annual PREA Incident Data Sheet, which is an aggregated incident-based sexual abuse data roster incorporating data from all Kern CJ correctional facilities. The roster indicated that the Minimum facility recorded the following cases:  2016 - Unsubstantiated sexual harassment  2017 - Substantiated sexual battery  2018 - No entries for that year</p> <p>115.87(c) - Policy P-0700 PREA Data Collection Reviews and Audits, "Collect accurate, uniform data for every allegation of sexual assault/abuse at all KCSO custody facilities using a standardized instrument and set of definitions, and aggregate the data at least annually. The data will be documented on an Annual PREA Facility Review Report form (Attachment 'D')  • Collect incident-based data to 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."</p> <p>115.87(d) - Policy P-0700 PREA Data Collection Reviews and Audits mandates that: "The Compliance section shall:  • Collect accurate, uniform data for every allegation of sexual assault/abuse at all KCSO custody facilities using a standardized instrument and set of definitions, and aggregate the data at least annually. The data will be documented on an Annual PREA Facility Review Report form (Attachment 'D')  • Collect incident-based data to 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.  • Maintain, review, and collect data as needed from all available incident based documents, including reports, investigation files, and sexual assault/abuse incident reviews.  • Obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.  • Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice (DOJ) no later than June 30."</p> <p>115.87(e) - N/A - Agency does not contract for the confinement of inmates.</p>

**115.87(f) - Policy P-0700 mandates that, "Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice (DOJ) no later than June 30."**

115.88	<b>Data review for corrective action</b>
	<p data-bbox="247 168 890 201"><b>Auditor Overall Determination: Meets Standard</b></p> <p data-bbox="247 246 518 280"><b>Auditor Discussion</b></p> <p data-bbox="247 324 1468 739"> <b>115.88(a): Policy P-0700 PREA Data Collection Reviews and Audits mandates that, "The Kern County Sheriff's Office (KCSO) Detentions Bureau Compliance Section in accordance with the Prison Rape Elimination Act (PREA), shall maintain incident data for all reports of sexual abuse, assault, and harassment. The Compliance Section shall conduct a review of each incident reported and evaluate the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. All data shall be aggregated annually and a report made available to the public on the Sheriff's website. The data collected shall answer all questions from the most recent Department of Justice Survey of Sexual Violence." Agency provided auditor with a copy of the 2018 Minimum facility Annual Report which complies with this Standard.</b> </p> <p data-bbox="247 795 1468 1086"> <b>115.88(b): The 2018 Minimum facility Annual Report includes a comparison of the current year's data and corrective actions with 2017 Annual Report numbers. The Justice facility report indicates that there are no changes needed in addressing sexual abuse. Minimum facility female inmates were transferred to other facilities in June 2018 and male inmates were transferred to other facilities in November 2018. There are currently no inmates housed at Minimum Facility since November 2018. Review of the 2018 Minimum facility Annual Report indicates that there was no reported incident of sexual abuse in 2018.</b> </p> <p data-bbox="247 1142 1468 1265"> <b>115.88(c): Interview with the Agency Head designee indicates that the Agency Head approves annual reports written pursuant to standard 115.88 for each facility. Annual reports can be found on the agency website at <a href="http://www.kernsheriff.org/Prea">http://www.kernsheriff.org/Prea</a>.</b> </p> <p data-bbox="247 1310 1412 1388"> <b>Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.88(d) and corrective action is required.</b> </p> <p data-bbox="247 1444 686 1478"><b>Corrective Action Recommended:</b></p> <p data-bbox="247 1489 1460 1556"> <b>1. Agency to amend the 2018 Annual Report to include narrative which indicates the nature of redacted material.</b> </p> <p data-bbox="247 1612 1452 1736"> <b>Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.</b> </p> <p data-bbox="247 1780 758 1814"><b>Corrective Action Completion 11/15/19:</b></p> <p data-bbox="247 1825 1468 2161"> <b>1. 11/15/19, PREA Manager provided auditor with an amended 2018 Agency Annual report for the Justice and Minimum detention facilities. The report was amended to include the statement "This report was amended in October 29, 2019 to include the nature of redacted information. The amended text is underlined and in italics. Amended report approved on 11/14/19." This amendment was signed by the Acting Chief Deputy Detentions Bureau. On 11/20/19, the Auditor verified that the 2018 Annual Report for the Justice and Minimum detention facilities has been uploaded to the agency website, titled: Kern County Sheriff's Office 2018 PREA Agency Report.</b> </p>

The agency/facility has met the requirements of Standard provision(s) 115.88(d), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.88.

<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p><b>115.89(a): P-0700 PREA Data Collection Reviews and Audits mandates agency "Maintain, review, and collect data as needed from all available incident based documents, including reports, investigation files, and sexual assault/abuse incident reviews."</b>  Interview with the PREA Coordinator indicates that the agency collects, aggregates and reviews data pursuant to standard 115.87 bi-annually in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies and training. The agency conducts constant evaluations.</p> <p><b>115.89(b): P-0700 PREA Data Collection Reviews and Audits mandates that agency "Obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates." Standard does not apply to this facility as it does not contract for the confinement of its inmates. Upon approval, the report will be made readily available to the public via the agency website. <a href="http://www.kernsheriff.org/Prea">http://www.kernsheriff.org/Prea</a></b></p> <p><b>115.89(c): P-0700 PREA Data Collection Reviews and Audits ""Remove all personal identifiers prior to making all facility aggregated sexual abuse data available to the public annually on its website."" <a href="http://www.kernsheriff.org/Prea">http://www.kernsheriff.org/Prea</a></b></p> <p><b>115.89(d): P-0700 PREA Data Collection Reviews and Audits mandates that agency "Maintain collected sexual assault/abuse data for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise."</b></p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.89.</p>



115.401	<b>Frequency and scope of audits</b>
	<p data-bbox="247 168 885 201"><b>Auditor Overall Determination: Meets Standard</b></p> <p data-bbox="247 246 518 280"><b>Auditor Discussion</b></p> <p data-bbox="247 324 1476 616"><b>Auditor has conducted the onsite portion of the interim audit and is in the process of submitting the Interim report to the agency. Based upon the evidence relied upon in making a determination of compliance, auditor has determined that 19 standards have been determined to be non-compliant and the Minimum facility shall enter into the 180-day Corrective Action phase. The auditor has prepared a Minimum Interim Report Issue Log which outlines the corrective actions to bring the facility into compliance with the PREA standards. The issues identified are as follows:</b></p> <p data-bbox="247 705 1476 873"><b>115.11(a)-2 Agency to amend policy P-0100 to outline how it implements the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment as it relates to staff sexual misconduct against inmates as mandated in standard provision 115.11(a).</b></p> <p data-bbox="247 918 1444 1086"><b>115.11(b)2 Interview with the PREA Compliance Manager indicates he lacks sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities due to lack of line staff, no administrative Senior staff to collect data, maintain files and provide inmate education.</b></p> <p data-bbox="247 1131 1484 1254"><b>1. Agency to implement a plan to ensure the facility PREA Compliance Manager has sufficient time and authority to develop, implement and oversee agency efforts to comply with the PREA standards.</b></p> <p data-bbox="247 1299 1452 1422"><b>115.11(c)3 Policy P-0100 Zero Tolerance of Sexual Abuse and Sexual Harassment identifies the Administrative Sergeants of each jail facility to be designated as the facility PREA Compliance Manager.</b></p> <p data-bbox="247 1467 1476 1601"><b>1. Agency to provide auditor with the duty statement of the PREA Compliance Manager for the Minimum Justice facility which designates the facility Administrative Sergeant as the PREA Compliance Manager and outlines his/her duties.</b></p> <p data-bbox="247 1691 1412 1769"><b>115.13(a): Agency to provided auditor with the copy of a staffing plan which complies with criteria outlined in standard provision 115.13(a) for compliance verification.</b></p> <p data-bbox="247 1814 1476 2116"><b>115.15(d) Minimum facility is pending renovation but is still available to house inmates. Housing units Female 1 - 3 was found to have no curtains on the showers or privacy barriers for toileting. Primarily female staff were assigned to supervise the female housing units. If male staff were assigned, they are mandated to conduct the gender specific announcement prior to entering the housing unit. Male units 1 - 14, 19 - 22 were found to have no curtains on the showers or privacy barriers for toileting. If cross-gender staff entered the housing unit, they could view the 1st toilet from the entry doors.</b></p>

1. Agency to implement procedures and/or provide barriers that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks.

**115.17(a)**

Out of the 20 personnel staff records, 4 that were hired prior to the implementation of PREA were promoted within the past 7 years. None of these staff members were provided the 3 required questions as part of their promotional applications nor were these questions provided during the promotional interview.

1. Agency to provide auditor with personnel files of all staff and contractors who were hired between 6/1/19 and 9/1/19 to verify that the 3 questions as mandated in standard provision 115.17(a) has been provided and verified prior to the hiring and promotion of staff and the hiring of contractors.

115.21(b) Agency did not provide information as to what the uniform evidence protocol was adapted from per the standard provision.

115.31(c) & 115.31(d) - Agency has not provided source documents to verify staff assigned to Minimum facility has completed their initial and refresher PREA training in accordance with Standard 115.31.

1 - Agency to provide auditor with copies of signed PREA training acknowledgements for all custody staff assigned to work in the Minimum facility between 11/10/17 and 11/10/18.

2 - Agency to include the hire dates for the custody staff who received initial PREA training between the dates identified above and work at the Minimum facility.

115.33(a), 115.33(b) ,115.33(c) ,115.33(e),115.33(f) - The Minimum facility is pending renovation and no inmates have been housed there since 11/10/18, however, the facility remains open and available for housing inmates. During the physical plant review, all English & Spanish PREA posters to include Notice of Auditor was not available throughout the facility in the event inmates are housed there.

1. Agency to provide auditor with copies of inmate screening records from the Minimum facility for inmates housed there between 11/10/17 and 11/10/18.

2. Agency to provide auditor with copies of signed and dated acknowledgement from inmates assigned at the Minimum facility to verify each inmate reviewed and understood the PREA

video from July 2018 to November 2018.

**3. Agency to make available English & Spanish PREA posters to be located within each housing unit and general areas throughout the facility in the event inmates are housed there.**

**4. Agency to ensure posters provide contact/hotline numbers to internal reporting sources, advocacy agencies and external reporting sources. Agency to also include information to inform inmates if the contact numbers are confidential, toll free and monitored or not.**

**115.34(a), 115.34(b) ,115.71(b) - Special Investigator training for conducting sexual abuse investigations in a confinement setting is non-compliant. There is not Garrity warning training as required by the standard.**

**1. Agency to include Garrity warning training as required by standard provision 115.34(a).**

**2. Agency to include this training in the Special Investigator training curriculum for verification of compliance with the standard.**

**115.35(a), 115.35(c) - Agency provided auditor with sign-in sheets for the 2-hour PREA training for medical and mental health staff. No PREA training curriculum or signed acknowledgements were provided along with the sign-in sheets.**

**1. Please provide training curriculum and participation documentation for verification of compliance with the standards.**

**115.41(b) - Due to no inmates housed at the facility since 11/10/18, inmate screening records were not provided to auditor by the agency.**

**1. Agency to provide auditor with roster of inmates housed at the Minimum facility between 3/1/18 and 6/20/18 so auditor may conduct a random selection of intake screening records to review for compliance with this standard provision.**

**115.41(c), 115.41(d) - The PREA Intake and Screening assessment instrument fails to utilize all of the minimum questions mandated by standard provision 115.41(c). The electronic PREA risk assessment instrument does not include questions #1, #2, #3 or #5 as mandated by standard provision 115.41(d).**

**1. Agency to include questions #1, #2, #3 or #5 in the objective screening instrument as mandated by standard provision 115.41(d).**

**115.41(a), 115.41(d) ,15.41(e), 115.41(d) - P-0350 PREA Intake and Screening Holding Cell Risk Questions - Attachment A was provided by Agency. Questions are in English & Spanish. P-0200 PREA Facility Transfer Risk Reassessment - Attachment E was provided by Agency.**

**Questions are in English & Spanish.**

**Neither of these instruments provide the 10 criteria mandated by standard provision**

**115.41(d).**

**1. Agency to amend Policy P-0350 PREA Intake and Screening Holding Cell Risk Questions and Policy P0200 PREA Facility Transfer Risk Reassessment questions to meet the mandated screening question criteria outlined in standard 115.41.**

**115.41(f) - P-0350 PREA Intake and Screening policy does not require that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. Policy language only focuses on inmates who are placed in administrative segregation for risk of abusiveness.**

**1. Agency to amend policy to require that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening.**

**115.41(g) - Interview with risk screening staff indicates that if they receive any new documentation or information within 30 days, the inmate's risk level is reassessed. Interview with random sample of 22 inmates indicates they do not recall being reassessed after the initial assessment. Review of 22 inmate electronic classification notes indicates that 10 inmates have been reassessed within 30 days of intake.**

**1. Auditor to review inmate PREA reassessments which occurred within 90 days of 9/1/19 to verify compliance with standard provision 115.41(g).**

**115.51(c) - PAQ speaks only to reports to Medical and Mental Health Staff. The policy does not include custody staff and supervisors. Agency does not require documentation of verbal reports.**

**1. Agency to amend policy P-0450 to mandate that staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.**

**115.52(b) - Policy I-200 Inmate Grievances agency policy does not provide language which allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred.**

**1. Agency to amend policy I-200 Inmate Grievances agency policy to provide language which allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred.**

**115.52(c)-1 - Policy I-200 Inmate Grievances indicate that all written grievances, responses and appeals will be tracked by the Lerdo Compliance Section. Each facility will have a**

designated grievance box. The Compliance Section will check the grievance box at each Lerdo facility daily, with the exception of weekends and holidays.

1. Agency is to explain why an exception exists for the grievance box on weekends and holidays.

2. Is there a process or protocol where an inmate may submit a PREA related grievance without submitting it directly to a housing unit deputy?

3. Agency to provide auditor with a copy of the Inmate Handbook section that discusses the inmate grievance protocol.

4. Please provide auditor with a copy of DBPPM P-500 regarding the grievance protocol for handling allegations of sexual abuse or sexual harassment

115.52(c)-2 - Policy I-200 Inmate Grievances continues with stating that deputies will make every reasonable effort to resolve inmate grievances informally so that a written grievance is not necessary. However, if the deputy cannot resolve the grievance and the inmate still requests a grievance form, the deputy will give the inmate an inmate grievance form.

1. If an inmate has the ability to place a grievance of sexual abuse in the grievance box anonymously, then why is there a mandate that deputies will make every reasonable effort to resolve inmate grievances informally so that a written grievance is not necessary?

115.52(d) - Policy I-200 Inmate Grievances does not mandate or discuss the following:

- That a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance.
- If the agency claims the maximum allowable extension of time to resolve of up to 70 days per 115.52(d)(3) does the agency notify the inmate in writing of any such extension and provide a date by which such a decision will be made?
- 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?

1. Please amend Policy 1-200 Inmate Grievances and provide specific documentation (such as the inmate handbook which is available to the inmates) that outlines the inmate grievance response time frames as mandated by standard 115.52(d)

115.52(e) - Policy I-200 Inmate Grievances - Agency policy and procedure does not discuss or permit third parties, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates.



**1. Agency to provide written procedure or amend Policy I-200 Inmate Grievances to include language which permits third parties, family members, attorneys, and outside advocates, to**

assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates.

**115.52(e) - Policy I-200 Inmate Grievances does not require that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.**

**1. Agency to provide written procedure or amend Policy I-200 Inmate Grievances to require that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.**

**115.52(f) - Agency to provide auditor with copy of DBPPM P-500, which discusses filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse.**

**115.52(f) - Emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours. Policy I-0200 Inmate Grievances does not require a specific initial response time.**

**1. Agency to amend policy I-0200 Inmate Grievances to mandate that Emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours.**

**115.63(a) - P-0450 Reporting Sexual Abuse mandates that if KCSO receives information that a sexual assault had occurred at another confinement facility, it has the duty to report the incident to that confinement facility.**

- Security staff shall notify the next supervisor in their chain of command
- Section manager shall notify the head of the appropriate agency or jurisdiction where assault/abuse occurred
- Notification shall be made within 72 hours of the allegation
- Section manager shall notify the PREA Compliance manager
- Section manager shall ensure a CJIS incident is written.

**Policy is non-compliant with standard provision which requires the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred.**

**1. Agency to amend policy P-0450 to mandate that if KCSO receives information that a sexual assault had occurred at another confinement facility the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred.**

**115.63(b) - P-0450 Reporting Sexual Abuse mandates that if KCSO receives information that a sexual assault had occurred at another confinement**

facility, it has the duty to report the incident to that confinement facility.

- Security staff shall notify the next supervisor in their chain of command
- Section manager shall notify the head of the appropriate agency or jurisdiction where assault/abuse occurred
- Notification shall be made within 72 hours of the allegation
- Section manager shall notify the PREA Compliance manager
- Section manager shall ensure a CJIS incident is written.

Policy is non-compliant with standard provision which requires the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred.

1. Agency to amend policy P-0450 to mandate that if KCSO receives information that a sexual assault had occurred at another confinement facility the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred within 72 hours.

115.65(a) - The PAQ indicates that the facility has not developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

1. Agency shall develop a facility specific written plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators and facility leadership in accordance with standard 115.65.

115.66(a) - P-0200 Prevention and Detection Of Sexual Abuse mandates that KCSO is an agency of the County of Kern and bound by county civil service ordinances. The County of Kern conducts collective bargaining for all county agencies and their respective employee bargaining units. The County collectively bargains with Kern Law Enforcement Association (KLEA), Kern County Detention Officer Association (KCDOA) and Service Employees International Union (SEIU) for issues related to employee pay, leave time, health benefits, uniform allowances. No issues related to employee discipline are negotiated as part of the collective bargaining process. Interview with Agency Head designee indicates that collective bargaining is governed by policy P-0100.

1. Agency to provide auditor with policy P-0100 for compliance verification

115.67(a) - P-0600 PREA - Criminal and Administrative Investigations Procedure C: Harassment / Retaliation Investigations Detentions fails to provide language which 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.

1. Agency to amend Policy P-0600 to mandate protection for 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.**

115.71(b) 1. Agency to provide auditor with training certificates of all 13 special investigators trained to conduct sexual abuse investigations in a confinement setting, assigned to the Lerdo Justice facility.

2. Agency to include Garrity warning training as required by standard provision 115.34(a).

115.76(d) & 115.76(d) - Policy P-0900 PREA Hiring Promotions and Discipline mandates that "All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations of ancillary staff in lieu of termination, shall be reported to the appropriate county department head, and informed of their obligation to report the violation to the appropriate licensing body in compliance with PREA laws."

1. Agency to amend policy P-0900 PREA Hiring Promotions and Discipline to mandate that standard mandates that 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, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies per PREA Policy 115.76(d)-1.

115.88(d) - Interview with the PREA Coordinator indicates that the types of material typically redacted are personal identifying information. Standard provision 115.88(d) mandates that the agency indicates the nature of the material redacted. Review of the 2018 Annual Report does not include the mandated narrative.

1. Agency to amend the 2018 Annual Report to include narrative which indicates the nature of redacted material.

115.403(f) - Justice and Minimum 2018 Annual Report is not available on the agency website for public review.

1. Agency to upload the Minimum and Justice 2018 Annual Report to the agency website for public review.

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination: Meets Standard</b>
	<b>Auditor Discussion</b>
	<p>Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.403(f) and corrective action is required.</p> <p><b>Corrective Action Recommendation:</b></p> <p><b>1. Justice and Minimum 2018 Annual Report is not available on the agency website for public review.</b></p> <p><b>Auditor will conduct a 90-day status review on 8/24/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 11/22/19.</b></p> <p><b>Corrective Action Completion 8/8/19:</b>  <b>On 8/8/19, the PREA Coordinator uploaded copies of the Minimum and Justice Facility 2018 Annual Report to the auditor. The Minimum report was signed by the Facility Manager, PREA Coordinator and the Agency Head. Auditor accessed the Agency website to verify the report has been uploaded for public viewing.</b></p> <p><b>Agency provided copies of the Minimum and Justice Facility 2018 Annual Report to the auditor which met the requirements for standard provision 115.403(f). Auditor has determined that Agency meets Standard 115.407.</b></p>

**Appendix: Provision Findings**

<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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

<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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

<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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

<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	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



<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

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

	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes

<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	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

<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	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

<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	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

<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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

<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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 facility does not have female inmates.)	yes

<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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

<b>115.15 (d) Limits to cross-gender viewing and searches</b>		
	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

<b>115.15 (e) Limits to cross-gender viewing and searches</b>		
	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

<b>115.15 (f) Limits to cross-gender viewing and searches</b>		
	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

<b>115.16 (a) Inmates with disabilities and inmates who are limited English proficient</b>		
	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

	<p>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?</p>	<p>yes</p>
	<p>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?</p>	<p>yes</p>
	<p>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?</p>	<p>yes</p>
	<p>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?</p>	<p>yes</p>
	<p>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.)</p>	<p>yes</p>
	<p>Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?</p>	<p>yes</p>
	<p>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?</p>	<p>yes</p>
	<p>Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?</p>	<p>yes</p>
	<p>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?</p>	<p>yes</p>
	<p>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?</p>	<p>yes</p>

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

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

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

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



<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	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

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

<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	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

<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	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

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

<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	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

<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	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

<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	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

<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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

<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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

<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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

<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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

<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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

<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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

<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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

<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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

<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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

<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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).)	na

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

<b>115.31 (b)</b>	<b>Employee training</b>	
	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

<b>115.31 (c)</b>	<b>Employee training</b>	
	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

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

<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	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

<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	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

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

<b>115.33 (a)</b>	<b>Inmate education</b>	
	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

<b>115.33 (b)</b>	<b>Inmate education</b>	
	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

<b>115.33 (c)</b>	<b>Inmate education</b>	
	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



<b>115.33 (d)</b>	<b>Inmate education</b>	
	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

<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes

<b>115.33 (f)</b>	<b>Inmate education</b>	
	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

<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

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

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

115.35 (a)	<b>Specialized training: Medical and mental health care</b>	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

115.35 (b)	<b>Specialized training: Medical and mental health care</b>	
	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.)	yes

115.35 (c)	<b>Specialized training: Medical and mental health care</b>	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes

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

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

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

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

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

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

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes

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

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

<b>115.42 (a)</b>	<b>Use of screening information</b>	
	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

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

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

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

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

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



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

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

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 anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes

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

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

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

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

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

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

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

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

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

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes

115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes

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

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



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

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

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

<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	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

<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	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

<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	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

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

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

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

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

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

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

<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	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

<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	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

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

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

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

<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	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

<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	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

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

<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	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

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

<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	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

<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	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

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



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

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

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

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

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

<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	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

<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	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

<b>115.77 (a) Corrective action for contractors and volunteers</b>		
	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

<b>115.77 (b) Corrective action for contractors and volunteers</b>		
	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

<b>115.78 (a) Disciplinary sanctions for inmates</b>		
	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

<b>115.78 (b) Disciplinary sanctions for inmates</b>		
	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

<b>115.78 (c) Disciplinary sanctions for inmates</b>		
	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

<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	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

<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	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

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

<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	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

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

<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, 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

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

<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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

<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes

<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	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

<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	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

<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	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

<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	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

<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

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

<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

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

<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	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

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

<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	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

<b>115.87 (c)</b>	<b>Data collection</b>	
	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

<b>115.87 (d)</b>	<b>Data collection</b>	
	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

<b>115.87 (e)</b>	<b>Data collection</b>	
	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

<b>115.87 (f)</b>	<b>Data collection</b>	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	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

<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	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

<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	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

<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes

<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	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

<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes

<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	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

<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	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

<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	no
	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.)	yes

<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes

<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes

<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes

<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	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

<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	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