

PREA Facility Audit Report: Final

Name of Facility: Lerdo Maximum-Medium Security Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 08/03/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input 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 type="checkbox"/>
Auditor Full Name as Signed: Karen Dalton	Date of Signature: 08/03/ 2023

AUDITOR INFORMATION	
Auditor name:	Dalton, Karen
Email:	ksddrph@aol.com
Start Date of On-Site Audit:	06/20/2023
End Date of On-Site Audit:	06/21/2023

FACILITY INFORMATION	
Facility name:	Lerdo Maximum-Medium Security Facility
Facility physical address:	17645 Industrial Farm Road, Bakersfield, California - 93308
Facility mailing address:	

Primary Contact	
Name:	Kelcy Pilkington
Email Address:	pilkington@kernsheriff.org
Telephone Number:	661-391-7335

Warden/Jail Administrator/Sheriff/Director	
Name:	DONNY YOUNGBLOOD
Email Address:	YOUNGBLOOD@KERNSHERIFF.ORG
Telephone Number:	661-392-4314

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

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

Facility Characteristics	
Designed facility capacity:	408
Current population of facility:	0
Average daily population for the past 12 months:	0
Has the facility been over capacity at any point in the past 12 months?	No

Which population(s) does the facility hold?	Both females and males
Age range of population:	18+
Facility security levels/inmate custody levels:	Minimum, Medium, Maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	3
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	76
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	76

AGENCY INFORMATION	
Name of agency:	Kern County Sheriff's Office
Governing authority or parent agency (if applicable):	
Physical Address:	1350 Norris Road, Bakersfield, California - 93308
Mailing Address:	
Telephone number:	6613917850

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

Agency-Wide PREA Coordinator Information

Name:	Robert Hudson	Email Address:	hudsonb@kernsheriff.org
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Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

3

- 115.17 - Hiring and promotion decisions
- 115.34 - Specialized training: Investigations
- 115.71 - Criminal and administrative agency investigations

Number of standards met:

42

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-06-20
2. End date of the onsite portion of the audit:	2023-06-21

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Just Detention International Women's Center, High Desert

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	408
15. Average daily population for the past 12 months:	0
16. Number of inmate/resident/detainee housing units:	0
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

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

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>The KCSO PREA compliance manager has a robust system for tracking PREA identified targeted incarcerated people. The LMMF has not had an incarcerated person population over the past 12-months. Incarcerated person interviews were conducted at the KCSO Central Receiving Facility.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>3</p>
<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>0</p>

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	19
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None

<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>There are currently no incarcerated people at the KCSO LMMF. The auditor interviewed incarcerated people from the KCSO CRF. Because the CRF is an intake facility, many individuals who were randomly selected for interviews based on the first day population list had either been released or transferred to another KCSO jail facility. This required the auditor and PREA compliance manager to collaborate on finding a systematic way to conduct interviews. The interviews with incarcerated people were conducted on each housing block, looking at a list of current individuals not slated for release or transfer at the moment, and selecting randomly for interviews. No incarcerated person refused to be interviewed.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>5</p>

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The KCSO LMMF facility has not housed incarcerated people over the past 12-months. Incarcerated individuals at the KCSO Central Receiving Facility were interviewed as the KCSO Detentions Bureau policies, procedures, and operations are consistent across all KCSO jail facilities.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The KCSO LMMF facility has not housed incarcerated people over the past 12-months. Incarcerated individuals at the KCSO Central Receiving Facility were interviewed as the KCSO Detentions Bureau policies, procedures, and operations are consistent across all KCSO jail facilities.</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The KCSO LMMF facility has not housed incarcerated people over the past 12-months. Incarcerated individuals at the KCSO Central Receiving Facility were interviewed as the KCSO Detentions Bureau policies, procedures, and operations are consistent across all KCSO jail facilities. The auditor did inquire during random incarcerated person interviews if the person being interviewed knew of anyone who identified as lesbian, gay, or bisexual. The auditor was not able to identify any targeted individual in this category.</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The KCSO LMMF facility has not housed incarcerated people over the past 12-months. Incarcerated individuals at the KCSO Central Receiving Facility were interviewed as the KCSO Detentions Bureau policies, procedures, and operations are consistent across all KCSO jail facilities. The auditor did inquire during random incarcerated person interviews if the person being interviewed knew of anyone who identified as transgender or intersex. The auditor was not able to identify any targeted individual in this category.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The KCSO LMMF facility has not housed incarcerated people over the past 12-months. Incarcerated individuals at the KCSO Central Receiving Facility were interviewed as the KCSO Detentions Bureau policies, procedures, and operations are consistent across all KCSO jail facilities. The PREA compliance manager is notified immediately if an incarcerated individual makes an allegation of sexual abuse or sexual harassment. No notification came to the PREA compliance manager while on site.</p>

<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>2</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The KCSO LMMF facility has not housed incarcerated people over the past 12-months. Incarcerated individuals at the KCSO Central Receiving Facility were interviewed as the KCSO Detentions Bureau policies, procedures, and operations are consistent across all KCSO jail facilities. The KCSO does not generally use segregated housing for individual who are at high risk of sexual victimization. If necessary, the incarcerated person would be there temporarily until the classification unit could locate a safe place for the justice involved individual to be housed.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>

Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

71. Enter the total number of RANDOM STAFF who were interviewed:

14

72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)

- Length of tenure in the facility
- Shift assignment
- Work assignment
- Rank (or equivalent)
- Other (e.g., gender, race, ethnicity, languages spoken)
- None

73. Were you able to conduct the minimum number of RANDOM STAFF interviews?

- Yes
- No

74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):

No text provided.

Specialized Staff, Volunteers, and Contractor Interviews

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

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):

29

76. Were you able to interview the Agency Head?

- Yes
- No

a. Explain why it was not possible to interview the Agency Head:	The Sheriff was attending a national meeting during the onsite portion of the audit. The Sheriff's designee was interviewed.
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Victim Advocate from the Women's Center High Desert
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

84. Did you have access to all areas of the facility?

Yes

No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

Yes

No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

Yes

No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

Yes

No

88. Informal conversations with staff during the site review (encouraged, not required)?

Yes

No

<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>Because there have been zero incarcerated people at the KCSO LMMF, interviews with the incarcerated population occurred at the KCSO Central Receiving Facility. Staff who were assigned to the LMMF were interviewed but there were not enough to meet the minimum number of interviews necessary for the audit. The auditor interviewed both random and specialized staff at the KCSO and CRF offices.</p>
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Documentation Sampling

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

<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>No text provided.</p>
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

2

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>2</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>1</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>3</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>1</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

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

Non-certified Support Staff

<p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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AUDITING ARRANGEMENTS AND COMPENSATION

<p>121. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
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<p>Identify the name of the third-party auditing entity</p>	<p>PREA Auditors of America</p>
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Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy P-100 – Zero Tolerance of Sexual Abuse and Sexual Harassment</p> <p>KCSO Detentions Bureau Policy P-200 – Prevention and Detection of Sexual Abuse</p> <p>KCSO Detentions Bureau Policy P-600 – Criminal and Administrative Investigations</p> <p>KCSO Detentions Bureau Policy P-900 – PREA – Hiring, Promotions and Discipline</p> <p>KCSO Lerdo Maximum Medium Facility PAQ</p> <p>KCSO Organizational Chart</p> <p>KCSO Lerdo Maximum Medium Facility Site Review</p>

Interviews

Agency Head (Chief Deputy)

PREA Coordinator

PREA Compliance Manager

Facility Commander

Random Staff Interviews

Incarcerated Person Interviews

Findings

(a) The KCSO Detentions Bureau's Zero Tolerance of Sexual Abuse and Sexual Harassment Policy P-100 establishes the agency's zero tolerance for sexual abuse and sexual harassment. Page one of the policy states "The Kern County Sheriff's Office (KCSO) is committed to zero-tolerance of any form of sexual abuse and sexual harassment. The purpose of the policy is to set forth KCSO's zero tolerance towards all forms of sexual abuse, sexual harassment and retaliation for reporting or cooperating with investigators. The policy outlines the KCSO's commitment to preventing, detecting and responding to sexual abuse and sexual harassment.

The KCSO relies on the Detentions Bureau's Policy P-200, and the implementation of a robust PREA risk screening and classification protocol to ensure the prevention, detection, and response to sexual abuse and sexual harassment are managed appropriately. Directive 6 of policy P-200 states the information from the risk screening is used to determine housing, bed, work, education and program assignments with the goal of keeping separate those incarcerated persons at high risk of being sexually victimized from those at high risk of being sexually abusive. The agency makes individualized determinations about how to ensure the safety of each incarcerated person believed to be at risk of victimization and will not use segregated housing unless an assessment of all available alternatives has been made and there is no available alternative means of separation from likely abusers.

Definitions of prohibited behaviors regarding sexual abuse and sexual harassment are outlined in KCSO Detentions Bureau's Policy P-600 on pages 1-2. Policy P-900 discusses the sanctions staff, both civilian and sworn and volunteers and contractors are subject to if found to have participated in prohibited behaviors. The policy discusses prompt, thorough and objective investigations with potential outcomes leading up to and including termination.

All incarcerated persons interviewed were from the Central Receiving Facility as the Lerdo Maximum Medium Facility is not currently populated with incarcerated persons. Incarcerated people who were interviewed indicated they were provided information on the KCSO zero tolerance policy at the time of intake. Staff at the Lerdo Maximum Medium Facility indicated their knowledge of PREA began during their formal academy training where they are provided the history of PREA, its significance to justice involved individuals, and the department's zero tolerance for any acts of sexual abuse and sexual harassment.

(b) The KCSO PREA Coordinator is appointed by the KCSO Chief Deputy who oversees the Detentions Bureau, which is comprised of the Central Receiving Facility, Court Services, the Lerdo Facilities; Justice, Pre-Trial, Max/Med, and Minimum. Additionally the Chief Deputy oversees the Inmate Services, Population Management, and Compliance Sections. PREA is encompassed in the Compliance Section of the Detentions Bureau. The PREA Coordinator indicated he has sufficient time and authority to do his job and commended his hand selected team as the success to the department's PREA efforts. A review of the KCSO shows the PREA Coordinator at the rank of Lieutenant, a rank that provides authority to direct and manage the KCSO PREA responsibilities. The PREA Coordinator also mentioned the policies and process of PREA have been instilled since the first PREA audit cycle leaving no question the KCSO takes sexual safety very seriously.

(c) The Lerdo Maximum Medium Facility recognizes a sergeant level supervisor as the PREA Compliance Manager. Reporting directly to the PREA Coordinator, the compliance manager oversees the efforts of PREA compliance at all the KCSO facilities. Additionally, the compliance manager collaborates with key staff at each facility to ensure compliance is being managed daily.

Conclusions

Provisions (a)(b)(c) were documented in policy, organization charts, and confirmed through staff and incarcerated persons interviews. Based upon a review and analysis of all available evidence, KCSO and the Lerdo Maximum Medium Facility is found in compliance with standard 115.11.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Interviews

	<p>PREA Compliance Manager</p> <p>Findings</p> <p>The KCSO does not have any contracts with other entities for housing of their incarcerated people. There have not been any contracts since the last audit cycle. In discussion with the PREA compliance manager any contracts entered into in the future would include the appropriate PREA implementation language.</p> <p>Conclusion</p> <p>Provisions (a) and (b) are not applicable since the KCSO does not have contracts to house their incarcerated people in private facilities.</p>
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115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy P-200 – Prevention and Detection of Sexual Abuse, Attachment “E” – Kern County Sheriff Jail Facility Staffing Plan Process</p> <p>Lerdo Maximum Medium Facility Staffing Plan</p> <p>KCSO Annual PREA Review Report – Lerdo Maximum Medium Facility</p> <p>Site Review</p> <p>Interviews</p> <p>Lerdo Maximum Medium Staff (Lieutenant)</p> <p>PREA Compliance Manager</p> <p>Higher Level Staff (Sergeant)</p> <p>Findings</p> <p>(a) The KCSO Detentions Bureau Policy P-200, Attachment E outlines the agency jail facility staffing plan process. The attachment indicates that due to continual fluctuation within the jail system, multiple adjustments are made to the staffing plan throughout the year. The facility managers are responsible for establishing the staffing plan and working with risk management, financial services, training and</p>

internal affairs, where up-to-date information is acquired regarding training schedules, staff absence due to short- and long-term illness, FMLA, and or discipline. The facility managers are required to consult with the PREA Coordinator, who is also a facility manager about the various requirements of the standards and how to apply them when considering their staffing. These meetings occur often throughout the year. Both the PREA Coordinator and PREA Compliance manager acknowledged efforts are being made to repopulate the facility, and will utilize the 2021 staffing plan.

The Lerdo Maximum Medium Facility (LMMF) has a rated capacity of 408. The average daily incarcerated person population over the past 12-months has been zero. The first day of the Site Review there were zero incarcerated persons. The current staffing plan for LMMF is based on an average daily population of 400.

The detailed staffing plan outlines the following, and the PREA compliance manager discussed these during their interviews:

1) To comply with the generally accepted detention and correctional practices, the KCSO regular reviews updates from the National Institute of Corrections and other organizations. The agency is a member of the American Jail Association and the National Sheriff's Association. The KCSO regularly networks with other jails to keep up to date and seek better ways to ensure safety and security of the facility.

2) In 1992, the KCSO Max-Med facility had a judicial finding which states in part' "Defendants shall not operate the Lerdo Maximum/Medium Facility without a full complement of four correctional staff present at each observation post in the medium custody dormitory sections of the facility." The Sheriff reviewed the operations at Max-Med, which had a staffing ratio of 14:370 and determined that the risk of injury to staff or inmates is low in comparison to the risks at the Minimum facility which had a staffing ration of 16:698. By reallocating the two staff positions to the Minimum facility, the Sheriff increased staff presence and response time for all incidents, which will enhance PREA prevention, detection and response while not detracting from the PREA goals at the Max-Med facility. The KCSO noted two judicial rulings they were party to. The first was Yeager v. Kern (1987) related to pregnant and post-partum incarcerated people. The second ruling was Anderson v. Kern (1990) was related to population totals, and other conditions of confinement.

The requirements resulting from these cases have been implemented at the Lerdo Maximum Medium Facility. Currently there are no judicial findings of inadequacy specific to the Lerdo Maximum Medium Facility.

3) The Lerdo Maximum Medium Facility has not received any Federal investigative

findings of inadequacy.

4) The KCSO participates in biannual inspections from the Bureau of State Community Corrections (BSCC) to ensure compliance with regulations contained in Title 15 and Title 24 of the California Code of Regulations. Any issues of non-compliance are corrected via a documented corrective action plan. There are no corrective action plans pending for the Lerdo Maximum Medium Facility.

5) The LMMF, despite the age of the facility has a design and a size that works well to eliminate problems from any potential blind spots. The nature of the daily required activities, the close proximity of staff to each other (based on the proposed staffing plan) leave very little to no opportunities for staff and incarcerated people to be isolated. During the site review, camera placement as well as convex mirror placement were noted and no blind spots detected. Because there are no incarcerated people at the LMMF, the auditor utilized practices at the KCSO Central Receiving Facility to note the following: Supervisors make regular, unannounced rounds within the facility. These rounds are documented in a log with a green ink pen. A review of the logbook showed numerous rounds conducted on each shift.

6) The composition of the incarcerated persons at Lerdo Maximum Medium Facility when operational varies. Most of the incarcerated people population is either local residents of Kern County that violate various state laws; detainees held on warrants from other jurisdictions. A substantial amount from the highway traffic through the county, prison discharges on parole from State Prisons with local charges pending, and inmates held pursuant to a housing contract with the USMS>

7) The lieutenant assigned to LMMF has the overall responsibility for facility operations and administration and coordinates ancillary services such as Medical and Behavioral Health. The lieutenant also works closely with the other detention managers to coordinate inter-facility operations such as overtime or guarding of hospitalized incarcerated people.

8) The administrative sergeant oversees many support services such as key control, supplies, clerical staff, complaints, contract staff, and inspections. The administrative sergeant also serves as the facility PREA compliance manager. Day-to-day operations are directed by a sergeant and or a senior deputy each shift to oversee daily security and operational issues, responding to emergencies, and managing the schedules and overtime to ensure the staffing plan is adhered to.

9) There are no applicable state or local standards that specifically dictate staffing levels in county jails. As part of the Board of State Community Corrections biennial inspections staffing plans for the Lerdo Maximum Medium Facility are reviewed.

10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse at the Lerdo Maximum Medium Facility is contained in the LMMF PREA Review Report and is used to establish staffing needs and the staffing plan

11) No other relevant factors were identified at the LMMF jail that affect its ability to detect, prevent, and respond to issues of sexual abuse, assault, or harassment of

	<p>incarcerated people in its care and custody.</p> <p>(b) Deviations from the established staffing plan would be documented in writing. Over the past 12-months, the LMMF has no documented deviations from the staffing plan since the facility is curtailed. The PREA compliance manager will work closely with the facility lieutenant to arrange for known staffing shortages, i.e., pre-approved vacation, when the facility is repopulated.</p> <p>(c) At least once per year, the PREA coordinator and PREA compliance manager meet with the LMMF lieutenant to review the staffing plan. In addition, the collaboration is an established routine with staff indicating the staff deployment, plans, and changes are discussed as part of meetings and on an as needed basis. The LMMF has established a pattern of making staffing a priority in regular meetings and discussions.</p> <p>(d) KCSO Detentions Bureau Policy P-200 Prevention and Detection of Sexual Abuse, Directive #5 states normal operation procedures require facility supervisors to make unannounced supervisory checks of each post during each shift. The supervisory checks are documented in the post log book and through the use of the P.I.P.E system. This system is used for well-checks in the facility. It requires observing incarcerated people in their housing areas, ensuring safety. Staff members at the CRF noted conducting the supervisory rounds are prohibited from alerting other staff that the rounds are occurring. Interviewed staff articulated the rounds are for ensuring both staff and incarcerated people are not engaging in inappropriate behaviors. Since this is policy, the LMMF will incorporate these same practices.</p> <p>The CRF provided documentation of unannounced rounds occurring throughout the past 12-months, with all shifts being covered. While on-site the log-book was reviewed to ensure the unannounced rounds were current. Supervisors within the facility acknowledged these rounds are important and part of their routine pattern of practice.</p> <p>Conclusions</p> <p>Provisions (a)(b)(c)(d) were established through documentation, policy, observation, and interviews. The comprehensive staffing plan, coupled with documentation shows the KCSO LMMF meets standard 115.13.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documentation

	<p>KCSO Detentions Bureau Policy P-400 - Vulnerable PREA Population Inmates</p> <p>Site Review</p> <p>Interviews</p> <p>PREA Coordinator</p> <p>PREA Compliance Manager</p> <p>Findings</p> <p>KCSO Detentions Bureau Policy P-400 page one identifies a youthful incarcerated person as any person under the age of 18. Procedure A of the policy indicates the KCSO will not knowingly book or detain persons under the legal age of eighteen. Any incarcerated person determined after booking and or housing to be juveniles shall be transferred to an appropriate juvenile facility. The procedure also states that an incarcerated person claiming to be juvenile shall be given the opportunity to verify their age through legal documentation either from their property or presented by a family member. Additionally, an incarcerated person who is determined to be juvenile shall be immediately moved to a location away from sight and sound of adult incarcerated persons. In this instance, 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. The PREA compliance manager indicated on the rare occasion a juvenile is brought to the facility, they are immediately transported and generally do not remain in the custody of the KCSO.</p> <p>Conclusions</p> <p>Provisions (a)(b)(c) are not applicable since there are no youthful offenders in the LMMF. Based upon the analysis of all available evidence, the LMMF is found in compliance with standard 115.14.</p>
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy P-200 – Prevention and Detection of Sexual Abuse</p> <p>KCSO Detentions Bureau Policy P-350 – PREA Intake and Screening</p> <p>KCSO – Lerdo Maximum Medium Facility (LMMF) – Pre-Audit Questionnaire (PAQ)</p> <p>Site Review</p>

KCSO – LMMF – Staffing Plan

KCSO – LMMF – Security Camera Deployment & Monitoring

KCSO Training Bulletin – Cross-gender “PAT” Searches and Searches of Transgender or Intersex Inmates

Interviews

Random Staff

Random Incarcerated Persons

PREA Compliance Manager

Findings

(a) KCSO Detentions Bureau Policy P-200 outlines the department’s approach to cross gender viewing and searches. The policy defines a strip search as a search requiring a person to remove or arrange some or all of their clothing so as to permit a visual inspection of the underclothing, female breasts, buttocks or genitalia of such person by a Sheriff’s Office staff member. A visual cavity search is a visual inspection of the anal and or vaginal area, generally requiring the subject to bend over and spread the cheeks of the buttock, to squat and or otherwise expose body cavity orifices.

Directive 10 of the policy, page six notes the KCSO shall conduct all searches of inmates in a professional, equal, and impartial manner so as not to harass or cause humiliation to the incarcerated person. Cross gender pat down searches are not performed except in exigent circumstances at the LMMF.

Directive 11 of the policy on page six covers visual body cavity searches and indicates strip searches and or visual body cavity searches will be conducted by a staff member of the same gender as the incarcerated person being searched.

There were zero cross gender strip or cross gender visual body cavity searches at the LMMF during the past 12-months. There were zero cross gender strip or visual body cavity searches conducted in the past 12-months by non-medical staff. Staff indicated they do not conduct cross gender strip searches except in exigent circumstances. Male staff members noted they will not search an incarcerated female. During the site review the search areas were observed and no issues were noted. The LMMF has implemented electronic tools such as body scan devices which has aided in conducting appropriate searches.

(b) The KCSO Detentions Bureau does not allow cross gender pat down searches of female inmates, absent exigent circumstances. There have been zero incidents of cross gender pat down searches at the LMMF in the past 12-months, and access to

programs and services are not withheld to comply with this provision. The PREA compliance manager stated and indicated on the staffing plan that female staff members are scheduled on each shift. Female staff indicated they are sometimes requested to leave their post to conduct a pat search. Incarcerated females acknowledged they are searched by female staff, and none of those interviewed stated they had programs or services withheld because they were not able to be searched.

(c) The KCSO Detentions Bureau prohibits cross gender visual, strip, or pat searches, except in exigent circumstances. Any exigent circumstance that occurs is formally documented. There was no documentation to review since there were no exigent circumstances within the past 12-months. One staff member from the CRF indicated every possible effort would be made to ensure an exigent circumstance does not occur regarding cross gender strip or pat searches.

(d) Incarcerated persons at the LMMF are able 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. Interviews with staff indicated they are currently making ADA modifications to the LMMF. These modifications will ensure incarcerated individuals are able to shower and change their clothing in private. Incarcerated individual at CRF stated while performing bodily functions, as soon as they hear a cross gender announcement it means they are to cover themselves up and be fully clothed.

A review of the LMMF camera system indicated the cameras are well placed. The cameras are fixed position.

(e) Policy P-350 outlines the detentions bureau approach to screening for all incarcerated individuals. Staff are prohibited from searching or physically examining a transgender or intersex individual for the sole purpose of determining the individual's genital status. The policy specifies, on page 2, if the individual's genital status is not known it can be obtained through a conversation with the individual or by having medical staff review the individual's records. Staff interviews from CRF indicated an understanding of the policy related to the intake and processing of individuals who identify as transgender or intersex.

(f) All staff indicated they had been trained on how to conduct an appropriate pat search. Staff members were asked to describe and show the process. An observation during the intake process at the CRF of incarcerated individuals shows the staff are properly trained in conducting pat searches. In addition to the training received in the basic KCSO academy, a training bulletin was created. All training, including the dissemination of training bulletins is tracked and documented through the KCSO. Staff are required to sign in and acknowledge reading after reviewing the training bulletin. The pat search training bulletin begins by defining a pat down search. This is when the officer feels a subject's body over the clothing in an attempt to detect contraband.

	<p>Conclusions</p> <p>All provisions were documented by policy, training bulletins, interviews with staff and incarcerated persons, and by observation. Based upon the review and analysis of all available evidence the KCSO LMMF is found compliant with standard 115.15.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Incarcerated Person Brochure - A Prison Rape Elimination Act (PREA) Guide of Inmate Rights and Reporting Sexual Abuse or Staff Sexual Misconduct - English and Spanish</p> <p>KCSO Language Line Services Contract</p> <p>KCSO Detentions Bureau Policy P-400 - Vulnerable PREA Population Inmates</p> <p>KCSO Detentions Bureau Policy P-300 - Employee Training and Inmate Education</p> <p>KCSO Employee PREA Training Records</p> <p>KCSO - Lerdo Maximum Medium Facility (LMMF) Pre-Audit Questionnaire (PAQ)</p> <p>KCSO - LMMF - PREA Audit Announcements</p> <p>KCSO - PREA Video for Incarcerated Persons</p> <p>Interviews</p> <p>KCSO Chief Deputy</p> <p>Targeted Incarcerated Persons</p> <p>Random Staff</p> <p>PREA Compliance Manager</p> <p>PREA Coordinator</p>

	<p>Findings</p> <p>(a) KCSO Detentions Bureau P-400 outlines specific procedures as it relates to individuals with disabilities. Procedure B discusses incarcerated people with hearing impairments and states that TTY devices and or language interpreters who can interpret effectively, accurately and impartially will be provided to ensure the prevention, detection, and response to sexual abuse and sexual harassment. Written materials using formats and methods that ensure effective communication will be provided. A staff member at the CRF described an incident with an individual who was both deaf and blind. Unsure of how to effectively communicate with the individual, the department authorized contracting with an individual who was properly trained in a tactile form off communication where words were spelt onto the deaf/blind person’s hand using set positions and movement.</p> <p>A review of the Language Line Services Contract shows the contract is current and available to staff as needed. Staff were knowledgeable of the language line availability and although most had not needed to use the line, they knew how to access it. The KCSO also maintains a language fluency list where staff members who show competency in a language receive a stipend if called upon to utilize their language services. Many staff members within the KCSO are fluent in Spanish. The Chief Deputy, PREA coordinator and PREA compliance manager were aware of the many ways the KCSO works to ensure all incarcerated individuals, regardless of their abilities are ensured sexual safety during their incarceration</p> <p>During the site review PREA Audit announcements were posted throughout the facility including the lobby, medical area, holding areas, intake and housing areas. Announcements were posted in both English and Spanish.</p> <p>(b) In addition to the printed materials in both English and Spanish, incarcerated individuals are shown an informational educational video that is presented in both English and Spanish that addresses sexual safety in the jail.</p> <p>(c) The KCSO does not utilize or rely on incarcerated people to read, interpret, or assist other incarcerated people with PREA related content or issues. Interviews with staff confirmed their knowledge and understanding of how to obtain assistance for incarcerated individuals who are LEP, or have a disability.</p> <p>Conclusions</p> <p>Provisions (a)(b)(c) were documented in policy, staff interviews, and a review of printed and video materials. Based on the review and analysis of the available evidence, KCSO LMMF is found to be in compliance with standard 115.16.</p>
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion

Document Review

KCSO Detentions Bureau Policy P-900 – PREA – Hiring, Promotions and Discipline

Kern County Sheriff Donny Youngblood Letter to all new hires regarding PREA

KCSO – LMMF – Pre-Audit Questionnaire (PAQ)

KCSO Employee Files – New Hires

KCSO Employee Files – Promotion within the past 12-months

KCSO Employee Files – 5-years or longer of employment

KCSO Volunteer Files

KCSO Personal History Statement Application

KCSO List of personnel appointed for FY 2022-2023

Interviews

Human Resource Staff

PREA Compliance Manager

Findings

(a) KCSO Detentions Bureau Policy P-900 outlines the department’s approach to employment, hiring, investigation and termination policies and practices. The department adheres to and complies with all Federal, State and local County ordinances. The KCSO has multiple procedures in place to facilitate the hiring, retention, or promotion of employees. The 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. They also will not hire, promote, or contract with anyone who has a civil judgement 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.

The KCSO hiring process begins with a general employment application completed via their website at www.kerncounty.com. If the application for the KCSO is marked it is forwarded to the Sheriff’s Office of Human Resources where it is screened. Once screened and approved for processing the formal hiring process begins. The KCSO performs a criminal history records check on all applicants, which may include the submission of finger prints to DOJ and FBI. Each applicant is required 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. Applicants are required to provide whether they have engaged in sexual abuse in a prison, jail, lockup, community confinements facility, juvenile facility, or other institution; whether they have been convicted of engaging or attempting to engage in sexual activity in the community, facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse, or has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. A review of files of employees hired or promoted in the past 12-months indicated a proper criminal record background check had been conducted.

All new hires on the department receive a personal letter from the KCSO indicating the importance of complying with PREA, and expectations and responsibilities with compliance as an employee with the Sheriff's Office. The employee is required to sign the letter indicating an understanding of its contents prior to completion of the hiring process.

(b) The KCSO considers incidents of sexual harassment in determining whether to hire or promote individual, or enlist the services of contractors, volunteers or vendors. Human Resource Staff provided access to the Sheriff's Office electronic records for hiring individuals. For those who will have contact with the incarcerated population and attend the KCSO POST (Police Officer Standards & Training)-Certified academy, their screening is completed not only in accordance with KCSO hiring, but POST requirements as well. A POST-certified academy in California is the training standard for police officers, deputy sheriffs and other classifications of peace officers. A minimum of 664 hours of POST-developed training and testing in 42 separate areas of instruction (many which align with the PREA standards). These Learning Domains use various written, skill, exercise, and scenario-based tests, providing additional layers to the hiring process.

(c) For an individual seeking employment with the KCSO, the electronic file within Human Resources is initiated. For those who will have contact with the incarcerated population, there are 70 tasks required to complete the process. Of the 70 tasks, a review of the applicant's questionnaire for completeness, verifications of applicant information, making contact with previous employers, other agencies, references, conducting an NCIC (National Crime Information Center) check, and scheduling a background investigator, polygraph, and physical agility testing are included. Each task lists who the task is assigned to, when it is due, status, and any action required. Over 180 individuals who may have contact with incarcerated individuals have been hired by the KCSO over the past 12-months. All of them have undergone a criminal background records check. A review of the document showing KCSO personnel appointed for FY 2022-2-23, 100% had a criminal background check conducted.

(d) Volunteers, contractors, and vendors who apply to the KCSO are subject to a full criminal background check. All 26 individuals who currently provide volunteer, contracted, or vendor services in the KCSO, and who have contact with justice involved individuals, have had a background check completed.

- (e) The KCSO deploys a system that notifies the office if an individual who an employee, contractor, volunteer, or vendor has any law enforcement contact. Further, the KCSO requires the individual to notify the office directly of law enforcement contact has occurred. Human Resource Staff stated a notification comes to the Sheriff's Office, generally through a fax or email making notification, which triggers an inquiry into the report. Additionally, an automatic annual check is run through NCIC for every KCSO employee annually. A review of employee records who have served in the KCSO for five years or longer showed documentation of regular criminal background checks being conducted.
- (f) KCSO employees are required to answer honestly questions described in paragraph (a)(2) of this standard.
- (g) The KCSO employment application is signed by every applicant, as is the PREA letter provided to them by the KCSO Sheriff. Any material omissions of any information required by the applicant during the employment process shall be grounds for termination. This applies to volunteers, contractors, vendors and during the initial hiring phase and any promotional opportunity.
- (h) Policy P-900, Procedure A indicates that unless prohibited by law, KCSO will provide prospective employers information regarding substantiated allegations of sexual abuse or sexual harassment involving a present or former employee.

Conclusions

Provisions (a) through (g) were documented by a review of employee and contractor, volunteer, and vendor files and discussions with staff. Policy, written documentation, and electronic organization of personnel files indicate the KCSO exceeds standard 115.17.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documentation</p> <p>Site Review</p> <p>Interviews PREA Compliance Manager</p> <p>Findings The PREA Compliance Manager indicated there have been no acquisition of new facilities, nor substantial expansions or modifications to the LMMF since the last</p>

	<p>PREA Audit.</p> <p>Conclusions</p> <p>Based on discussions with the PREA compliance manager standard 115.18 is found to be compliant.</p>
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review</p> <p>KCSO Detentions Bureau Policy P-600 - PREA - Criminal and Administrative Investigations</p> <p>KCSO Detentions Bureau Policy P-500 - Sexual Assault/Abuse - Security Response Plan</p> <p>KCSO Detentions Bureau Policy C-2200 - Suspected Juveniles in Custody</p> <p>KCSO Detentions Bureau Policy P-400 - Vulnerable PREA Population Inmates</p> <p>KCSO Detentions Bureau Policy P-550 - Victim Services Response Plan</p> <p>PREA Checklist</p> <p>KCSO - LMMF - Pre Audit Questionnaire (PAQ)</p> <p>Investigative Reports of Incarcerated Persons who reported sexual abuse</p> <p>California Attorney General's Office - Marsy's Card</p> <p>KCSO Detention Facility Request Slip</p> <p>KCSO Detention Bureau - Incarcerated Person Orientation Booklet</p> <p>Site Review</p> <p>Interviews</p> <p>Random Staff</p> <p>PREA Compliance Manager</p> <p>LMMF Supervising Staff</p>

Hi-Desert Women's Center Supervising Staff

Facility Investigators

KCSO Investigators

Findings

(a) KCSO Detentions Bureau P-600 outlines a response plan, which provides an appropriate response to incidents of sexual abuse, assault, harassment or retaliation occurring in KCSO's facilities. This plan establishes the roles, responsibilities and actions of security staff responders, supervisors, investigators, and section managers. The KCSO is responsible for investigating both administrative and criminal allegations of sexual abuse, sexual harassment, or retaliation. The KCSO trains all of its employees as first responders, and follows a uniform evidence protocol. The protocol is written and titled PREA Checklist, and is carried by staff members on their person. Staff interviews (from the CRF) indicated they would reference the checklist. The checklist is a 10-point directive of steps to take when an allegation of sexual abuse has been made by an incarcerated person.

(b) The KCSO does not accommodate juveniles being booked into or housed within any Detentions Bureau facility. Any juvenile arriving at the facility will be refused per the shift supervisor, and will not be booked into the facility. Any incarcerated person suspected of being a juvenile will be immediately transferred to Juvenile Hall. Both Policy P-400 and C-2200 provide detailed directives on managing anyone who is reasonably believed to be, or is documented to be a juvenile.

(c) KCSO Policy P-550 provides information 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. Forensic medical examinations are provided at the Kern Medical Center. Notifications of the incident are provided to the Sexual Assault Response Team (SART) through the Women's Center - Hi Desert. The center collaborates with the KCSO, the medical center, and the incarcerated person alleging sexual abuse to provide accompaniment, emergency room accompaniment and support, accompaniment and advocacy for all legal meetings and court appearances. KCSO staff interviews and Hi-Desert Women's Center staff indicated and forensic medical examination are offered to the incarcerated persons without cost. The KCSO LMMF reports in the past 12-months there have been zero forensic medical exams conducted.

(d) The KCSO and the Hi-Desert Women's Center have entered into a contract for victim advocate services for both in-person and or remote services. Incarcerated persons in the KCSO facilities have access to an advocate who is on-site at all KCSO regularly. Daily meetings occur between the PREA compliance manager and the Women's Center - High Desert staff. Additionally, whenever a need arises, the victim advocate is accessible to staff and incarcerated people. Incarcerated persons are

	<p>verbally told at intake an advocate is available to them. This information is also included in the KCSO PREA posters as well as the Incarcerated Person Orientation Booklet. The advocate is highly qualified and has a good rapport with KCSO staff and the incarcerated person population. Several times while onsite the advocate was receiving notifications from various KCSO facilities for information and or assistance.</p> <p>(e) The Women’s Center – Hi Desert SART staff are available for accompaniment and supportive services throughout the forensic medical exams, and the investigative interview. All individuals are state certified. The on-site victim advocate provides day-to-day access for support services, information, and referrals. During the site review an individual was booked into the LMMF and indicated he had experienced previous sexual abuse by a family member. The individual was immediately offered support. Although services were declined, information was given to the individual on how to access services at any time. Additionally, the victim advocate was notified. Generally, the victim advocate reaches out to the individual being referred to reengage about available support and services.</p> <p>(f) This provision is not applicable to the KCSO as they are responsible for both administrative and criminal investigations involving staff as well as incarcerated individuals.</p> <p>(g) This provision is not applicable to the KCSO as they are responsible for both administrative and criminal investigations involving staff as well as incarcerated individuals.</p> <p>(h) All contractors and volunteers are vetted through the KCSO. The Hi-Desert Women’s Center advocates undergo a background check and are vetted by the Detention Bureau for appropriateness.</p> <p>Conclusions</p> <p>All provisions have been verified and documented. Interviews with staff and contractors, observations during the site review and an analysis of policy and agreements indicates the KCSO – LMMF is compliant with standard 115.21.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy P-600 – PREA – Criminal and Administrative Investigations</p> <p>KCSO Detentions Bureau Policy P-500 – Sexual Assault/Abuse Security Response Plan</p>

KCSO Detentions Bureau Policy C-2200 – Suspected Juveniles In Custody
KCSO Detentions Bureau Policy P-400 – Vulnerable PREA Population Inmates
KCSO website

Interviews

KCSO Detentions Bureau Deputy Chief
KCSO Facility Level Investigators (Senior Detention Deputies)
KCSO Investigators; Sexual Assault and Abuse Investigations Unit (SAAIU)
PREA Coordinator
PREA Compliance Manager

Findings

(a) KCSO Detentions Bureau Policy P-600 states that as a law enforcement agency the KCSO 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. The investigations are carried out through the direction of Detentions Bureau Policy P-500 which provides an appropriate response to incidents of sexual abuse, assault, harassment or retaliation occurring in the KCSO's facilities. All investigations are conducted utilizing standard investigation methods in accordance with all laws. The Detentions Bureau Deputy Chief noted investigations are of utmost importance, and he is briefed regularly on all investigations pertinent to the bureau. The PREA coordinator and PREA compliance manager, as well as investigative staff echoed the importance of a prompt, thorough and objective investigation. In the past 12-months there were zero allegations of sexual abuse as the facility has been curtailed.

(b) Although the KCSO conducts its own criminal and administrative investigations, there are times when the facility investigators will refer an allegation to the Sexual Assault and Abuse Investigations Unit. These referrals are documented. The allegation and information pertinent to the investigation is entered into the ILEADS tracking program. KCSO PREA information can be found at www.kernsheriff.org. Further, internal annual reports can be found for each facility on the website.

Conclusions

Provisions (a) and (b) were documented by policy, staff interviews, and a review of incident reports. Provision (c) is not applicable to the KCSO LMMF. Based upon the review and analysis of all available evidence, KCSO LMMF is found in compliance with standard 115.22.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy P-100 - Zero Tolerance of Sexual Abuse and Sexual Harassment</p> <p>KCSO Detentions Bureau Policy P-300 – Employee Training and Inmate Education</p> <p>KCSO Detentions Bureau Policy P-500 – Sexual Assault/Abuse – Security Response Plan</p> <p>KCSO Detentions Bureau Policy P-550 – Victim Services Response Plan</p> <p>KCSO Detentions Bureau PREA Training Curriculum</p> <p>KCSO Detentions Bureau Training Records</p> <p>Interviews</p> <p>Random Staff</p> <p>Human Resource Staff</p> <p>PREA Compliance Manager</p> <p>Findings</p> <p>(a) KCSO Detentions Policies P-100 and P-300 outline the zero-tolerance for sexual abuse and sexual harassment and training requirements for anyone who may have contact with incarcerated persons as a part of their duties and responsibilities. Policy P-300-Procedure A indicates KCSO shall provide its staff training on sexual abuse and sexual harassment through classroom training upon hiring and periodic refresher courses,. All trainings shall be provided in a format based upon the level of contact with inmates and the training requirements stipulated by the PREA standards. Policy P-300, Directive A-1: Custody staff address the required 10 components of training; Zero-tolerance policy for sexual abuse, sexual harassment and retaliation; how to fulfill their responsibilities regarding prevention, detection, reporting and response to sexual abuse and sexual harassment; inmate’s right to be free from sexual abuse and sexual harassment; the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment in confinement; the common reactions of sexual abuse and sexual harassment victims; how to detect and respond to signs of threatened and actual sexual abuse; avoiding inappropriate relationships with inmates; how to communicate</p>

	<p>effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex or gender non-conforming inmates; how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. Aggregate training records for both employees, contractors, and volunteers, sampling of employee personnel files, and training curriculum were reviewed. All staff confirmed receiving initial PREA training. For those who had been with the sheriff's office longer than 6-months, all acknowledged receiving refresher training annually. Staff were able to describe the training and their understanding of the curriculum.</p> <p>(b) There are 3 staff members at the Lerdo Maximum Medium Facility. Initial training is documented and signed by the employee, contractor or volunteer, while completion of the refresher training is acknowledged by electronic signature. LMMF houses male and female incarcerated persons. Therefore, all employees receive PREA related training specific to male and female incarcerated persons and addresses LGBTI issues.</p> <p>(c) Training records show that all staff at the LMMF have been appropriately trained, the training is documented, and refresher training is required annually. Policy P-300, page 2 also indicates training will be provided when any significant change is made in PREA policy.</p> <p>(d) Policy P-300 states, and was confirmed through documentation review, that the KCSO will maintain documentation of training and that staff understand the training they received. Documentation is maintained in the employee training files and is readily available to the PREA coordinator.</p> <p>Conclusions</p> <p>Provisions (a)(b)(c)(d) were documented by policy, training curriculum, training records and staff interviews. Based upon the review and analysis of all available evidence the KCSO LMMF is found in compliance with standard 115.31.</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review</p> <p>KCSO Detentions Bureau Policy P-300 Employee Training and Inmate Education</p> <p>KCSO Lerdo Maximum Medium Facility – Pre Audit Questionnaire (PAQ)</p>

Interviews

KCSO Contractor

PREA Compliance Manager

Human Resource Staff

Findings

(a) The KCSO Policy P-300, Directive A-2, page 3 indicates 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 trained on 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. The KCSO Training Section will maintain documentation confirming that volunteers and contractors understand the training they have received.

The KCSO utilizes 76 volunteers across all of its jail facilities. An interview with a KCSO contractor indicated that PREA training was first received through the contracted agency, prior to working in a Facility.

(b) The KCSO provides information and training to its volunteers and contractors based on the services they provide and level of contact they have with inmates. The curriculum used for volunteers and contractors mirrors that of the staff training. The contractor acknowledged receiving additional training through the KCSO. This training covered the zero-tolerance policy which the contractor described as having no tolerance for any kinds of sexual abuse, talk of sex, acts of sex between staff, workers, and incarcerated persons. The contractor indicated an immediate report to the supervisor at any facility would be made if there was any act or even suspicion of inappropriate behavior occurring.

(c) The KCSO, in compliance with Policy P-300 maintains records of volunteer and contractor training. The PREA compliance manager in collaboration with the sheriff's office contracting entity ensures all contractors are properly trained. Contracts for service include the requirement for zero-tolerance training.

Conclusions

The KCSO LMMF is found to be compliant with provisions (a)(b)(c) for standard 115.32. The evidence produced included policy, training records, personnel files, staff interviews and training curriculum.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review

KCSO Detentions Bureau Policy P-350 – PREA Intake and Screening

KCSO Detentions Bureau Policy P-300 – Employee Training and Inmate Education

KCSO Detentions Bureau Policy P-200 – PREA Facility Transfer Risk Reassessment

KCSO PREA Holding Cell Risk Questionnaire – Spanish and English

KCSO PREA Inmate Education Brochure

KCSO PREA Intake Flyer – Spanish and English

KCSO Detentions Bureau Incarcerated Person Orientation Booklet

KCSO – LMMF Pre-Audit Questionnaire (PAQ)

Site Review

Observation of Intake of Incarcerated Persons at the Central Receiving Facility

Interviews

PREA Coordinator

PREA Compliance Manager

Central Receiving Facility Intake Staff

Incarcerated Persons at the CRF

Findings

(a) KCSO Detentions Bureau Policy P-350 indicates a thorough PREA intake and screening process of each inmate received at its jail facilities is completed. This is to determine any medical or mental health needs, and to inform classification staff of pertinent information for use in making appropriate housing assignments. The PREA holding cell risk questions are asked by CRF staff in order to identify potential risks of harm, sexual victimization, or potential sexual abusers prior to placement in a general population holding cell. The risk screening process is conducted to provide classification staff with information about an inmate’s sexual orientation, gender identify, 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.

The PREA Holding Cell Risk Questions include “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 #17777, or talk to a Deputy or medical person.” Additionally, incarcerated persons are asked “Do you understand the information I told you about sexual abuse and how to report it?”. The completed form is signed by the incarcerated person.

Policy P-300, Directive B-1: Intake and Orientation mandates that during the intake process, incarcerated persons will receive information explaining KCSO’s zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. The information is provided in the form on a handout printed in both English and Spanish. Once an incarcerated person receives a bed roll, a PREA pamphlet is included. Inmates acknowledged receiving PREA information at intake. During the site review it was learned that the on-site PREA Advocate, medical and mental health staff also discuss sexual safety when a conversation is requested or initiated by an incarcerated person.

(b) During the past 12-months 0 incarcerated persons remained at the LMMF for longer than 30-days. The intake acknowledgement form signed by the incarcerated person can be followed through the classification system as it assists with appropriate placement of the individual. The comprehensive education is provided via video, which was being shown throughout the CRF facility tour. Additionally, staff conduct comprehensive education and maintain a PREA Inmate Education Attendance Log for each session conducted. Incarcerated persons who were interviewed acknowledged seeing the video on a regular basis, with some saying at least weekly, and others saying more often. One also stated information was brought to them after they were assigned to housing and awaiting transfer. The educational video shows all relevant information related to the zero-tolerance policy, what to do if you are sexually abused or sexually harassed, your right to be free from sexual abuse and sexual harassment, and how to report. Policy P-300, Directive B-2 covers the requirements of the comprehensive education requirements.

(c) The PREA Facility Transfer Risk Reassessment form is used when incarcerated individual are transferred to a different facility. Policy P-300, requires 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.” Although the PREA information is synchronous throughout the KCSO at all facilities, the LMMF utilizes the reassessment form to ensure the incarcerated people fully understand sexual safety in the jails.

(d) The PREA education information for incarcerated persons is available in many forms. For individuals who are LEP, the information is provided in Spanish (written and video), and any other language is accessible through the Language Line Service agreement. For blind individuals the information is provided through the spoken word, and deaf individuals through the written word. It was evident while observing the intake process, intake staff take time to read the PREA information, followed by a verbal and then written acknowledgement that the incarcerated individual

	<p>understands the content.</p> <p>(e) Information confirming incarcerated individuals receive and understand the inmate education provided by the KCSO is maintained in a database, that has the incarcerated individuals signature, and via attendance information at a comprehensive education session.</p> <p>(f) PREA Posters, Incarcerated Person Orientation Booklet, and the comprehensive video show how to report, how to access free, confidential emotional support services, and the sheriff's office's zero tolerance for sexual abuse and sexual safety.</p> <p>Conclusions</p> <p>Provision (a)(b)(c)(d)(e)(f) were demonstrated through policy, written materials, video material, interviews, and practice. This information, coupled with the classification staff demonstrating the system utilized by the KCSO which maintains detailed information related to every incarcerated person who enters and leaves the all KCSO facilities, the KCSO-LMMF has shown to meet standard 115.33.</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy P-300 - Employee Training and Inmate Education</p> <p>KCSO Detentions Seniors: Sex Crimes Investigators Training Course Curriculum</p> <p>KCSO PREA Training Records - 2022-2023</p> <p>Interviews</p> <p>KCSO Investigators</p> <p>KCSO Facility Investigators</p> <p>PREA Compliance Manager</p> <p>Findings</p> <p>(a) Directive A-3 of Policy P-300 mandates that in addition to the general training provided to all employees, KCSO will ensure that staff who conduct sexual assault and abuse investigations receive training in conducting such investigations in</p>

	<p>confinement settings. Interviews with investigative staff both at the department and facility levels indicated they had received comprehensive training on sexual abuse in confinement settings. The KCSO utilizes the rank of senior deputy at the facility level to conduct the initial PREA allegation inquiry. A review of the KCSO 2022-2023 shows the employee name, number, record identifier, title of training received, location, presenter and state mandated information. Under the title of training, it delineates between the initial PREA training, refresher, or specialized training.</p> <p>(b) A review of the curriculum entitled Prison Rape Elimination Act - KCSO Detentions Seniors: Sex Crimes Investigators Training Course, covers the PREA Statute for standard 115.34, an introduction to investigations, definitions, penal codes, crime scene and evidence collection, interviewing techniques, victim rights and rules, victim interviewing, suspect(s) interviewing, witness(s) interviewing, and report writing. A review of the training records coupled with interviews with senior detention staff who were trained as well as Special Victims Unit Detectives indicate training was comprehensive, received, and utilized during any allegation of sexual abuse or sexual harassment.</p> <p>(c) A comprehensive electronic database is maintained showing the education had been received and completed. Staff completing the training verify through signature their attendance and receipt of the training. Collectively, the KCSO shows 32 investigators who have completed the required training; 7 Special Victims Unit Detectives, and 25 Detention Senior Deputies.</p> <p>(d) Not applicable since the KCSO conducts its own investigations, both administrative and criminal.</p> <p>Conclusions</p> <p>Provisions (a)(b)(c) were met, and provision (d) is not applicable to the KCSO. The curriculum, documentation, and staff interviews, coupled with the acknowledgement that training crosses multiple levels or rank among the entire department exceeds the requirements for standard 115.34.</p>
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review</p> <p>KCSO Detentions Bureau Policy P-100 - Zero Tolerance of Sexual Abuse and Sexual Harassment</p> <p>KCSO Detentions Bureau Policy P-300 - Employee Training and Inmate Education</p>

KCSO Detentions Bureau Policy P-500 – Sexual Assault/Abuse – Security Response Plan

KCSO Detentions Bureau Policy P-550 – Victim Services Response Plan

KCSO Training Bulletin - In-Custody Sexual Assault/Abuse/Harassment Investigations

KCSO Training Bulletin – Detentions Bureau Manual Policy Updates: P-100, P-200, P-300

KCSO Training Bulletin – PREA Refresher Training

KCSO – LMMF Pre Audit Questionnaire (PAQ)

KCSO Training Records 2022-2023

Interviews

KCSO – Medical Staff

KCSO – Kern County Department of Behavioral Health Staff

PREA Compliance Manager

Findings

(a) Directive A-4 of Policy P-300 outlines the requirements of specialized training for medical and mental health professionals. The policy ensures training for medical and mental health staff within the KCSO will be trained on 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 whom to report allegations or suspicions of sexual abuse and sexual harassment. There are currently no individuals providing medical and mental health services at the LMMF because there are no incarcerated people housed there. Training records for KCSO medical and mental health staff indicate 100 percent of the staff have been trained. Interviews with medical and mental health staff from the Central Receiving Facility indicated they received training upon their assignment to the KCSO, specialized training, and refresher training annually.

(b) Medical staff at the KCSO jail facilities do not conduct forensic medical exams. These exams are conducted at the Kern County Medical Center with accompaniment by the Hi-Desert Women’s Center.

(c) KCSO training records confirm training for all medical and mental health staff

(d) In addition to confirming training through electronically documented training records, training and policy updates completed via an e-training platform must be signed by clicking an acknowledgement icon which is registered in the training database.

	<p>Conclusions</p> <p>Provisions (a)(b)(c)(d) are defined in policy, documented training records, curriculum and interviews. Based upon the review and analysis of all available evidence, KCSO LMMF is found in compliance with standard 115.35.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy K-200 – Classification Unit Responsibility</p> <p>KCSO Detentions Bureau Policy P-350 - PREA Intake and Screening</p> <p>KCSO Detentions Bureau Policy P-350 Attachment A – Intake PREA Holding Cell Risk Questionnaire</p> <p>KCSO Detentions Bureau Policy P-200 – Prevention and Detection of Sexual Abuse</p> <p>KCSO Detentions Bureau Policy P-200 Attachment E – Transfer Risk Reassessment</p> <p>KCSO LMMF – Pre Audit Questionnaire (PAQ)</p> <p>KCSO Classification Unit Risk Assessment Process</p> <p>Sample Records of Incarcerated Individuals</p> <p>Site Review - Central Receiving Facility</p> <p>Interviews</p> <p>Staff Responsible for Conducting Risk Screening – Classification Staff</p> <p>Classification Supervisory Staff</p> <p>Incarcerated People from CRF</p> <p>PREA Compliance Manager</p> <p>Findings</p> <p>(a) The Classification Unit at the CRF is responsible for managing incarcerated persons population levels and determining appropriate housing for all incarcerated</p>

people throughout the Detentions Bureau. Classification deputies will coordinate movement between facilities and transfers to and from other agencies. Once intake occurs, the Classification Unit uses the information to assign incarcerated people to their housing locations. The review requires utilizing classification status as required by state law, Title 15, PREA standards and court decisions. For anyone identified as being at risk for abusiveness during the initial intake, or through the result of an in-custody incident all information is used prior to assigning an incarcerated individual to a facility or housing area. Interviews with incarcerated people confirmed they received PREA information immediately when they arrived at the facility. One incarcerated individual could not recall receiving the information. Classification deputies were able to retrieve the intake and classification information for the individual and show when they received the information, and they confirmed through signature they received and understood the information. During the site review staff from the Classification Unit demonstrated how they used the information to inform best decisions for the incarcerated people. If any incarcerated individual is shown to be at risk for sexual victimization or sexual abusiveness the Classification Unit is flagged through their system.

(b) The comprehensive risk screening takes place during the intake process at the KCSO CRF. The information is accessible by the Classification Unit, who make housing placements within the KCSO housing facilities. In the past 12-months 0 individuals entered the LMMF and remained for 72 hours or longer.

(c) A review of the screening instrument - PREA Intake and Screening Form - shows an objective process. The Classification Unit utilizes the information from the form, seeks potential vulnerabilities or tendencies of acting out sexually or being victimized sexually and utilizes the information to make informed decisions.

(d) The incarcerated individual's risk of sexual victimization, any mental, physical, or developmental disability, age, physical build, previous incarcerations, Criminal history that includes any sex offenses, whether the individual is perceived to be gay, lesbian, transgender, intersex, or gender non-conforming, and seeks the incarcerated person's own perception of vulnerability.

(e) Interviews with Classification Unit staff indicate they look for information on prior acts of sexual abuse, prior convictions for violent offenses, or any history of institutional violence or sexual abuse. While observing the classification process it was noted these items are assessed and the unit staff were able to show how the information is documented.

(f) There were 0 incarcerated individuals who remained at the LMMF for longer than 30-days in the past 12-months. The Classification Unit staff were able to demonstrate how their system alerts (generally on day 28) that a reassessment is necessary. This was demonstrated on incarcerated people throughout the KCSO jails other than LMMF.

(g) Policy K-500, Directive B-2: PREA at risk Classification Review outlines that a 30-day PREA "at risk" inmate will be interviewed to determine if any unknown information exists that should be considered during the review process. The

	<p>Classification Unit supervisor provides subordinate staff with an at-risk list and staff then obtain an affirmative or negative response from the at risk incarcerated person to determine if next steps are needed. During the site review the current and upcoming 30-day reassessments were available to review. Further, the previous day's at risk assessments were shown, with all being completed. Staff will reassess an individual's status when they receive a referral from anyone, including medical, mental health, victim advocacy, or third party. The incarcerated individual can request a reassessment as well. Any incident of sexual abuse will also trigger a reassessment.</p> <p>(h) Interviews with staff indicated they never impose discipline on an incarcerated person for refusing to answer, or for not disclosing complete information. If an incarcerated person refuses to provide information it is documented in the file.</p> <p>(i) The PREA coordinator, PREA compliance manager, classification unit supervisor, and classification staff discussed the various levels of accessibility they have to the information residing in the classification unit database. The Classification Unit supervisor has the highest level of access. The supervisor discussed that immediately when a staff member transfers out of the facility the access is curtailed. The PREA compliance manager and the Classification Unit supervisor work closely together to ensure accountability to meeting the risk screening and reassessment process.</p> <p>Conclusions</p> <p>A review of policy, documents, electronic databases, interviews with staff and incarcerated people, coupled with observation during the site review show provisions (a) through (f) have been met and the KCSO LMMF is found in compliance with standard 115.41.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy K-300 – Classification Criteria</p> <p>KCSO Detentions Bureau Policy K-100 – Inmate Classification General Policy</p> <p>KCSO Detentions Bureau Policy P-410 – Gender Identity Committee</p> <p>KCSO CJIS Classification File of a formerly incarcerated Transgender individual</p> <p>Site Review – Central Receiving Facility</p> <p>Staff</p>

PREA Coordinator

PREA Compliance Manager

Classification Unit Staff

Findings

(a) The KCSO Detentions Bureau utilizes information from the risk screening process conducted at intake, coupled with criteria outlined in policies K-300 and K-100 to make individualized determinations about how to ensure the safety of each inmate, and to make or recommend 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. The PREA compliance manager and classification and intake staff indicated the information collected at intake is further processed through the directives in policy K-100. This policy directs that classification assessments and housing decisions will be made based on factors including, but not limited to; information obtained from the incarcerated person, medical and mental health issues, the objective PREA screening process, in-custody behavior and or history, charges and sophistication of the crime, escape history and information from other law enforcement agencies.

(b) An electronic classification record is maintained in the Criminal Justice Information System (CJIS). Both policies K-100 and K-300 discuss making individualized determinations for ensuring safety for each incarcerated person. Classification staff demonstrated the CJIS classification record system for several incarcerated persons housed at the LMMF. The classification process was easy to follow and records were requested for a variety of classifications of incarcerated people, including general population, transgender, reclassification, discipline, and requests made by incarcerated people.

(c) The KCSO policy P-410 discusses the directives for making housing and program assignments for transgender or intersex incarcerated people on a case-by-case basis. The policy ensures the KCSO is committed to protecting all incarcerated individuals in its custody, and recognizes that certain populations are more vulnerable to sexual abuse. This is accomplished through the Gender Identity Committee (GIC) to specifically address issues that are unique to transgender and intersex individuals in the custody of the KCSO. The GIC formally evaluates and makes decisions for transgender and intersex individual for the purpose of determining housing, clothing, and programming.

(d) Placement and programming assignments for each transgender or intersex individual housed in any KCSO facility are assessed at least twice per year to review any threats to safety to the incarcerated individual. During the site review there were no transgender or intersex individuals in custody at the LMMF. The PREA compliance manager is immediately notified if a transgender or intersex individual is booked into the KCSO. Because none were received while on-site, CJIS files of previously

	<p>incarcerated transgender individuals were reviewed. The system showed one individual who was in custody within the KCSO having been reassessed three times during her incarceration. First was at the request of the individual, second was being moved to disciplinary housing and last was being housed post-discipline.</p> <p>(e) The classification staff and PREA compliance manager indicated the GIC, in accordance with policy P-410, will ensure the incarcerated individual's health and safety and give serious consideration to the incarcerated person's views with respect to his or her own safety.</p> <p>(f) Policy P-410 also states that transgender and intersex individuals will be given the opportunity to shower separately from other inmates and the GIC will decide on the protocol within the housing unit to ensure the inmate's privacy when showering. During the site review it was observed that all housing unit showers are equipped with a single shower stall with a curtain that has privacy from the neck to just below the knees.</p> <p>(g) The KCSO does not operate dedicated facilities for LGBTI individuals. There are no consent decrees, legal settlement, or legal judgement required the LMMF to establish a dedicated facility, unit or wing for LGBTI individuals.</p> <p>Conclusions</p> <p>Provisions (a) through (g) were analyzed through the site review, observation of documentation, interviews, and policy. Based upon the analysis of all available evidence, the KCSO LMMF is found to be compliant with standard 115.42.</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy K-400 - Administrative Segregation</p> <p>KCSO Detentions Bureau Policy P-200 - Prevention and Detection of Sexual Abuse</p> <p>KCSO LMMF Pre-Audit Questionnaire (PAQ)</p> <p>Interviews</p> <p>KCSO CRF Facility Lieutenant</p> <p>Staff who Supervise Incarcerated People in Segregated Housing</p>

PREA Compliance Manager

Findings

(a) Policy P-200, Directive #6 states the KCSO makes individualized determinations about how to ensure the safety of each incarcerated person. Those believed to be at risk of victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made that there is no available alternative means of separation from likely abusers. The facility lieutenant and PREA compliance manager stated that involuntary segregated housing for individuals at high risk of sexual victimization is not an option. At the time of the site review there were zero individuals who were housed in involuntary segregation. Policy P-400, Procedure B states that when an inmate is administratively segregated at intake due to risk of sexual abuse, a classification deputy shall; conduct a complete assessment of the inmate within 24 hours of placement to ensure administrative segregation is necessary and that the inmate is housed in the least restrictive housing available, and ensure the inmate does not exceed 30 consecutive 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.

(b) Interviews with staff who supervise individuals in segregated housing and the PREA compliance manager indicated there is no restriction of access to programs, services, privileges, education or work opportunities at LMMF when housed in administrative segregation. Individuals in the administrative segregation area are able to access medical and mental health services as well as limited religious services. A review of CJIS files of individuals in administrative segregation showed regular reviews, housing changes, reasons for the housing changes, who the changes were handled by, and if a supervisor was required, an indication of that as well.

(c) CJIS records were reviewed of individuals in administrative housing throughout the KCSO facilities. Interviews with classification staff and the PREA compliance manager indicated that incarcerated individuals generally stay for less than 24 hours or up to 72 hours before being released or assigned housing at one of the KCSO jail facilities. Although involuntary segregated housing is not general practice at the LMMF, any and all housing, follow up and details on housing changes are included in the incarcerated person's CJIS electronic file.

(d) There were zero individuals housed in involuntary segregated housing in the past 12-months. Staff indicated all available options would be pursued before utilizing involuntary segregated housing for individuals at high risk of sexual victimization. The classification staff articulated their process should someone be placed in involuntary segregated housing and staff who supervise individuals in segregated housing indicated it would be a rare occurrence when someone was placed there involuntarily,

(e) Policy K-400, Procedure B requires a review every 30 days or sooner to determine the need for continued separation from general population. The policy also notes that to the extent possible, incarcerated persons administratively segregated for high risk of victimization they have access to programs, privileges, education and work

	<p>opportunities and if access is limited, the opportunity that was limited, duration of the limitation and the reason for the limitation shall be documented.</p> <p>Conclusions</p> <p>Provisions (a)(b)(c)(d)(e) were documented through review of policy, observation of files and practice and interviews. Based on the review and analysis of all available evidence, KCSO LMMF is found in compliance with standard 115.43.</p>
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115.51 Inmate reporting	
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review</p> <p>KCSO PREA Guide of Inmate Rights and Reporting Sexual Abuse or Staff Sexual Misconduct (English and Spanish)</p> <p>KCSO Detentions Bureau Policy P-450 – Reporting Sexual Abuse</p> <p>KCSO Women’s Center High Desert, Inc – Flyer</p> <p>Site Review</p> <p>Bakersfield Police Department Training Bulletin – Prison Rape Elimination Act: Outside Agency Reporting</p> <p>Kern County Personal/Professional Services Agreement between the KCSO and the Women’s Center High Desert, Inc</p> <p>Women’s Center High Desert Demographic Forms</p> <p>Women’s Center High Desert KCSO PREA Referral Forms</p> <p>KCSO Training Bulletin – In-Custody Sexual Assault/Abuse/Harassment Investigations</p> <p>KCSO Training Bulletin – Detentions Bureau Manual Policy Updates</p> <p>KCSO Training Bulletin – PREA Refresher – Employee Training</p> <p>KCSO Training Bulletin – PREA Update to Mobile LERMS (Law Enforcement Records Management System</p> <p>KCSO Detention Bureau Incarcerated Person Orientation Booklet</p> <p>KCSO Detention Facility Request Form</p> <p>KCSO Detention Facilities Inmate Grievance Form</p>

KCSO Sick Call Request

Observation of Intake Process

Utilizing the Incarcerated Person's telephone system to dial #17777

Interviews

Random Staff from CRF and LMMF

Random Incarcerated People from Central Receiving Facility

PREA Compliance Manager

Women's High Desert Victim Advocate

Mental Health Staff

Medical Staff

Findings

(a) The KCSO has multiple ways for incarcerated people to privately report sexual abuse and sexual harassment. Additionally, incarcerated people can report retaliation by other incarcerated people or staff for reporting such abuse and harassment. Finally, any staff neglect can be reported by incarcerated people. The rights of the incarcerated people to report are outlined in the KCSO PREA pamphlet, Women's Center High Desert Demographic Form and referral forms, the KCSO Detention Bureau Incarcerated Person Orientation Booklet, Facility Request Form, Inmate Grievance Form, and Sick Call Request. During the intake process incarcerated persons are verbally guided on their right to report and how to do it. Policy P-450 states "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." The policy further outlines in Directive #4 reporting methods that include telling any security staff member, telling medical staff at med pass, or submit a sick call slip, telling contracted staff at commissary pass or during classes, submitting a request to see Mental Health Staff, requesting to see the chaplain, or calling the free reporting hotline. Staff were able to articulate how an incarcerated person could report, and incarcerated people were knowledgeable on how to report. Most incarcerated individuals stated they would most likely report any abuse or harassment directly to a staff member. When asked "why", they noted staff would take action right away. Overall, the general sense at the CRF was that incarcerated people felt comfortable with staff and the on-site victim advocate. The incarcerated persons telephone line was utilized by the auditor during the site review. The telephone system was in working condition. There was no identifier required to utilize the phone system. Further, the PREA compliance

manager stated the contracted telephone company has controls in place and will not release individual telephone usage to the KCSO.

(b) The KCSO has an agency agreement with the Women’s High Desert Center where incarcerated people can report abuse or neglect. Flyers with information on how to make a report are accessible to inmates throughout the facility. The flyer provides a form to complete, and the form includes the hotline number #17777. The KCSO also has an agreement with the Bakersfield Police Department. This agreement states that in cooperation with the KCSO the Bakersfield Police Department will accept reports of sexual assault and or sexual abuse committed against incarcerated people in the custody of the KCSO. The PREA compliance manager has a notification system set up where any PREA related issues - including reports, are forwarded immediately to his office.

(c) All staff, including medical and mental health, and victim advocacy acknowledged their responsibility to accept a report of sexual abuse, harassment, or retaliation regardless of the manner the report was made. Additionally, staff articulated they would immediately make notification to their supervisor and the PREA compliance manager (detention staff), or a detention staff member (medical and mental health). The on-site victim advocate and PREA compliance manager meet daily to discuss any new reports made by incarcerated people. Staff were clear on how to ensure anonymity, with several noting they received training on how to assure an incarcerated person could remain anonymous.

(d) Staff stated they were able to report privately and confidentially sexual abuse or harassment of incarcerated people. Several new staff to CRF were interviewed and were asked scenario based questions related to suspicion of their partner acting inappropriately, or making inappropriate statements to incarcerated people. Staff from LMMF who were interviewed acknowledged the ability to re All staff indicated they would not hesitate to report this behavior to their supervisors. Additionally, staff acknowledged they could report any abuse, harassment, neglect, retaliation to any supervisor, even someone out of their chain of command.

Conclusions

Provisions (a)(b)(c)(d) were confirmed through documentation, policy, observation and interviews. Based on the analysis and all available evidence the KCSO LMMF is found to be compliant with standard 115.52.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Document Review

KCSO Detentions Bureau Policy I-200 – Inmate Grievances

KCSO Detentions Bureau Policy P-450 – Reporting Sexual Abuse

KCSO Detentions Bureau Policy P-900 – PREA – Hiring, Promotions and Discipline

KCSO LMMF Pre-Audit Questionnaire (PAQ)

KCSO Detention Bureau Incarcerated Person Orientation Booklet

Locked boxes

Interviews

PREA Compliance Manager

PREA Coordinator

Random Incarcerated Persons from CRF

Findings

(a) The KCSO Detentions Bureau Policy I-200 outlines the grievance system process noting a grievance system is maintained for incarcerated persons to communicate their grievances relating to any conditions of confinement to facility staff and administration. The intent of this system is to ensure that inmate grievances are resolved in a reasonable and timely manner. Directive #4 of the policy notes 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 such grievances received. The PREA coordinator indicated the PREA compliance manager is notified as well.

(b) Policy I-200 states whenever possible, deputies will resolve verbal grievances informally. When the deputy is not able to resolve the grievance issue informally, the incarcerated person may submit a written grievance. There is no time limit on submitting complaints or grievances. However, if the grievance is submitted more than 10 days after the incident in question, the supervisor will determine if there is good cause for the grievance to be processed. The 10 day rule does not apply to grievances alleging staff misconduct. Information in the incarcerated persons orientation booklet state if the housing officer cannot resolve the issue, the shift supervisor will attempt to resolve the issues. If the incarcerated person is still not satisfied, the right to appeal to the Facility Commander (Lieutenant) is provided.

(c) Incarcerated persons are not required to submit any grievance to a staff member

who is the subject of the complaint. During incarcerated person interviews many stated regardless of what the issue was, a complaint or request, they could submit it to anyone. Additionally, there are locked boxes throughout the facility incarcerated people could put forms or kites into. The PREA compliance manager stated the documents contained in the boxes were generally handled each shift.

(d) A detailed discussion with the PREA compliance manager regarding the KCSO grievance process revealed that all grievances for alleged sexual abuse are immediately referred to a supervisor for criminal or administrative investigation. In the past 12-months the LMMF received zero grievances alleging sexual abuse. The PREA compliance manager had no evidence where an extension of the 90-day period to respond to a grievance had been initiated. The PREA compliance manager stated that while there were zero grievances filed in the past year, should a notification be required, the incarcerated person would be notified of both an extension request and the outcome of any grievance filed.

(e) Policy P-450, Directive #4 states any third party person may assist an incarcerated individual with writing, or directly filing on their behalf a request for administrative remedy related to allegations of sexual assault/abuse provided the incarcerated person approved of the third party administrative remedy request filed on their behalf, the incarcerated individual agrees to participate in the administrative remedy process. Any refusal of an incarcerated person to participate in an administrative remedy shall be documented in CJIS using code 4050. There were zero grievances alleging sexual abuse filed by incarcerated persons in the past 12-months in which the incarcerated person declined third-party assistance.

(f) The LMMF has not had any emergency grievances filed in the past 12-months. The PREA compliance manager reports that any allegation of sexual abuse, harassment, or retaliation bypasses the informal grievance process and is referred for investigation immediately. Any such allegation is processed promptly, thoroughly and objectively by the KCSO.

(g) Policy P-900, Procedure D states 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.

Conclusions

Provisions (a) through (g) were documented in policy, interviews with staff and incarcerated persons. The PREA compliance manager discussion of the informal vs. formal grievance processes at the KCSO solidified the understanding and full compliance with standard 115.52.

115.53	Inmate access to outside confidential support services
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	Auditor Overall Determination: Meets Standard
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Auditor Discussion

Document Review

KCSO Detentions Bureau Policy P-550 – Victim Services Response Plan

Bakersfield Police Department Training Bulletin – PREA: Outside Agency Reporting

Kern County Personal/Professional Services Agreement with Women’s Center High Desert 2022-2024

KCSO Detention Bureau Incarcerated Person Orientation Booklet

KCSO PREA Pamphlet/Poster

Incarcerated Person Telephone Use

Site Review

KCSO Sick Call Request

KCSO Inmate Grievance Form

KCSO Personnel Complaint

Interviews

PREA Compliance Manager

Incarcerated Persons at CRF

Random Staff CRF and LMMF

Women’s Center High Desert Advocate

Findings

(a) During the site review it was observed the KCSO PREA pamphlet/poster and the Women’s Center High Desert poster were displayed throughout the facility. The information included the mailing address and telephone numbers on how to access outside confidential support services. Just Detention International and the Women’s Center High Desert addresses are provided to the incarcerated population. An incarcerated person telephone hotline for accessing victim advocacy #17777 was accessed during the site review. Additionally, #7732 can be used for reporting sexual abuse. The facility does not detain individuals solely for civil immigration services. The written agreement between Kern County and the Women’s High Desert Center provides for an on-site victim advocate. During the site review the victim advocate was in attendance and it was clear the accessibility of the advocate for a variety of

support including confidential emotional support services was a benefit to the efforts of sexual safety within the KCSO detentions bureau. Incarcerated persons knew the advocate, and knew how to gain access via a written request, or through the telephone. During interviews with three incarcerated individuals requests were made to speak to the advocate. All had stated they had previous communication with the advocate and wanted more emotional support. During the site review an incarcerated individual was booked into the facility who had experienced previous sexual abuse by a family member. The intake officer asked if the incarcerated person had reported the incident, whether the individual wanted to report the incident, and offered immediate access to the victim advocate. I had an opportunity to interview the individual who understood that the victim advocate would be available at any time. The victim advocate discussed participation in local, regional, state and national meetings as a means of promoting the collaboration between the KCSO and the Women's High Desert Center, and to learn best practices in the field of PREA and victim advocacy,

(b) Staff interviews indicated during their training they learn how to inform the inmate, prior to giving them access to outside support services, the extent to which such communications will be monitored. This generally includes information about mandatory reporting rules.

(c) A copy of the Personal/Professional Services Agreement between Kern County and the Women's High Desert Center was reviewed. The agreement is current, expires in 2024, and outlines the services required by the Women's Center High Desert. In addition to the administrative requirements, i.e., background checks completed, and training, the agreements requires:

- a. Providing emergency Sexual Assault Response Team (SART) hospital accompaniment
- b. Arrange accompaniment with qualified organization
- c. Provide on-site, one-on-one counseling of inmates
- d. Provide "hotline" counseling phone services for inmates
- e. Provide bilingual counseling for inmates as necessary
- f. Provide in person victim support during investigation interviews as requested by the inmate
- g. Consult with Correctional Mental Health as necessary, within confines of confidentiality requirements
- h. Administer inmate case files and reports
- i. Attend in person and phone consultations/meetings with Responsible County Department staff as necessary
- j. Participate in the PREA audit process

	<p>Conclusions</p> <p>Provisions (a)(b)(c) are met through documentation, policy, interviews and observation. The KCSO model of victim advocacy should be a national model. The proactive approach, and collaborative process is a force multiplier in ensuring sexual safety in the KCSO. Based on the review and analysis of all available evidence, the KCSO LMMF is found to meet standard 115.53.</p>
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115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review</p> <p>KCSO website: www.kernsheriff.org</p> <p>Interviews</p> <p>PREA Compliance Manager</p> <p>Findings</p> <p>(a) Information on third party reporting is found on the KCSO website. Under the "PREA" tab there is information stating 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 661.391.2604 or email PREAcoordinator@kernsheriff.org. Additionally, the reporting form is available to download. Once the form is completed it can be mailed to the PREA coordinator, via the U.S. Postal System, or through the email system.</p> <p>Conclusions</p> <p>The standard was documented with verification of information available on the website. Based on the review of the website and staff interview, the KCSO is in compliance with standard 115.54.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Document Review</p> <p>KCSO website: www.kernsheriff.org</p> <p>Interviews</p> <p>PREA Compliance Manager</p> <p>Findings</p> <p>(a) Information on third party reporting is found on the KCSO website. Under the “PREA” tab there is information stating 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 661.391.2604 or email PREAcoordinator@kernsheriff.org. Additionally, the reporting form is available to download. Once the form is completed it can be mailed to the PREA coordinator, via the U.S. Postal System, or through the email system.</p> <p>Conclusions</p> <p>The standard was documented with verification of information available on the website. Based on the review of the website and staff interview, the KCSO is in compliance with standard 115.54.</p>
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115.62	Agency protection duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review</p> <p>KCSO Detentions Bureau Policy P-350 – PREA Intake and Screening</p> <p>KCSO Detentions Bureau Policy P-410 – Gender Identity Committee</p> <p>KCSO Detentions Bureau Policy P-400 – Vulnerable PREA Population Inmates</p> <p>KCSO LMMF Pre-Audit Questionnaire (PAQ)</p> <p>Interviews</p>

	<p>Detentions Bureau Chief Deputy</p> <p>PREA Coordinator</p> <p>PREA Compliance Manager</p> <p>Facility Administrator (Lieutenant)/CRF</p> <p>Random Staff LMMF & CRF</p> <p>Findings</p> <p>(a) Policy P-400 states the KCSO recognizes that certain incarcerated persons in its custody are potentially vulnerable and at greater risk for sexual abuse or sexual harassment. The KCSO shall apply the specific guidelines afforded by the PREA standards to protect at-risk or vulnerable populations from abuse. All staff interviewed emphasized how important sexual safety is in the facility. Immediate action would be taken if any knowledge was received that an incarcerated person is subject to substantial risk of imminent sexual abuse,</p> <p>Several measures are in place to protect at risk individuals. These include housing options, separation from any potential threats against them. Staff confirmed their understanding to act immediately to substantial risk for imminent abuse. The Detentions Bureau Deputy Chief indicated he is made aware of any allegation of sexual abuse or sexual harassment, including retaliation. He relies on the PREA coordinator and the PREA compliance manager to ensure the KCSO protection duties are carried out.</p> <p>There have been zero determinations in the past 12-months that an incarcerated person was subject to a substantial risk of imminent sexual abuse. All staff interviews noted if there was an incident, action would be taken immediately.</p> <p>Conclusions</p> <p>Policy and interviews with staff confirm the KCSO LMMF is in compliance with standard 115.62.</p>
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Document Review

KCSO Detentions Bureau Policy P-500 – Sexual Assault/Abuse – Security Response Plan

KCSO Detentions Bureau Policy P-450 – Reporting Sexual Abuse

KCSO LMMF Pre-Audit Questionnaire (PAQ)

Interviews

PREA Compliance Manager

Detentions Bureau Deputy Chief

Facility Administrator (Lieutenant)/CRF

Findings

(a) Policy P-500, Directive A-5: Other Agency In-Custody Assault outlines the notification process when knowledge is obtained that an incarcerated person was sexually abused while confined to another facility. Specifically, security staff must notify the on duty shift supervisor. They will obtain basic information, i.e., date, current injuries, and previously reported to law enforcement. If medical care is necessary or requested it is obtained immediately. A report is written and a CJIS report using PREA code 4050 are written. The individual making the report will be offered victim advocate contact information. In the past 12-months there have been zero notifications of sexual abuse occurring at another confinement facility. The shift supervisor holds the responsibility for notifying the other agency where the sexual abuse occurred, the PREA compliance manager is notified as well. A supplemental incident report documenting the agency and the person the notification was made to is required. The PREA compliance manager noted if KCSO receives information that a sexual assault 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 the assault or harassment occurred. The section manager will notify the PREA compliance manager and ensure a jail management system incident report is created.

(b) Policy P-450, Directive #9 states any notification made to another agency shall be made within 72 hours of the allegation being received.

(c) The report will be documented in the Criminal Justice Information System and a copy of the report is accessible by the PREA compliance manager.

(d) Any report received from another facility will be investigated in accordance with the PREA standards. This is outlined in Policy P-450 which states reports of assault/

	<p>abuse occurring outside of KCSO facilities shall be referred to the appropriate custodial facility or law enforcement agency. The Detentions Bureau Deputy Chief described the process of receiving an allegation from an outside facility as follows: however the allegation of sexual abuse or sexual harassment comes to the KCSO the Deputy Chief will be briefed by the PREA coordinator and PREA compliance manager. The Deputy Chief receives regular briefings on all PREA related incidents and referred to the latest briefing which indicated there have been no allegations coming from other facilities. The Facility Administrator was not aware of any notifications from outside confinement facilities. The PREA compliance manager indicated the KCSO Sexual Assault and Abuse Investigations Unit (SAAIU) compiles an annual report that is provided to the state as well as posted on the KCSO website. A review of the website confirms an annual report.</p> <p>Conclusions</p> <p>Provisions (a)(b)(c)(d) were documented by policy, and staff interviews. Based upon the review and analysis of all available evidence, the KCSO LMMF is found in compliance with standard 115.63.</p>
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Document Review</p> <p>KCSO Detentions Bureau Policy P-500 Sexual Assault/Abuse – Security Response Plan</p> <p>KCSO LMMF Pre-Audit Questionnaire (PAQ)</p> <p>KCSO Detentions Bureau Policy P-550 – Victim Services Response Plan</p> <p>KCSO Detentions Bureau Policy P-300 – Employee Training and Inmate Education</p> <p>KCSO PREA Checklist</p> <p>KCSO PREA Training Records</p> <p>Interviews</p> <p>Detention and Non-Detention First Responders</p> <p>Random Staff LMMF & CRF</p>

	<p>Findings</p> <p>(a) Policy P-500, Directive A-1: New Assault outlines first responder duties for security staff. Among securing the scene, first responders will identify and separate any victim(s) from any known or potential suspect(s), advise the victim not to eat, drink, brush teeth, change clothes, or use the toilet in order to preserve evidence. All detention staff are trained in first responder duties during initial training, and during the annual refresher training. In the past 12-months there were two allegations that an inmate was sexually abused. Both allegations involved incarcerated person on incarcerated person sexual abuse. Additionally, both allegations were made after the alleged victim and alleged suspect were no longer housed together. One of the allegations was made after the alleged victim was transported to another facility, and the victim refused to provide suspect information. Neither allegation was made within a time frame that allowed for evidence collection. A review of one allegation showed the classification unit staff had put into the central housing database a “keep away” status between the alleged victim and alleged abuser. A LMMF contractor indicated immediate notification would be made to a detention staff member if they became aware of an allegation of sexual abuse. Policy 550, Procedure C provides directives on how to manage allegations made up to five days from the incident occurrence, and allegations made longer than five days after the incident. The policy further establishes procedures for medical staff, and mental health staff.</p> <p>(b) Policy dictates that non detention center staff are required to immediately notify detention center staff if they become aware of any form of sexual abuse, sexual harassment, or retaliation. Detention center staff, medical and mental health staff as well as a contractor from the CRF were able to recite first responder duties.</p> <p>Conclusion</p> <p>Provisions (a) and (b) were documented in policy and training and confirmed by interviews with staff, both security and non-security. Training records showed detention staff are trained as first responders. Based upon the review and analysis of all available evidence, the KCSO LMMF is found to be in compliance with standard 115.64.</p>
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review KCSO Detentions Bureau Policy P-500 – Sexual Assault/Abuse – Security Response Plan

Interviews

PREA Coordinator

PREA Compliance Manager

Facility Administrator (Lieutenant)/CRF

Findings

(a) Policy P-500 outlines the KCSO Coordinated Response Plan. The plan developed this sexual abuse/assault response plan, which provides an appropriate response to incidents of sexual abuse, assault, harassment, or retaliation occurring in KCSO's facilities. This plan establishes roles, responsibilities and actions of security staff first responders, supervisors, investigators, and section managers. The nine page document includes a list of definitions followed by a series of directives and procedures. The plan incorporates the responsibilities of LMMF staff, medical, mental health, advocacy, and investigative staff. The Facility Administrator, PREA coordinator and compliance manager were able to describe the process of the coordinated response plan.

- a. Directive 1: Lists all provisions staff shall adhere to when responding to or investigating a sexual assault/abuse incident
- b. Directive 2: Directs which investigative entity within the KCSO will conduct the preliminary and full investigations.
- c. Directive 3: Ensures detention deputy first responders write ILEADS and CJIS supplemental incident reports to the primary investigator's report as appropriate.
- d. Directive 4: requires the section manager to be notified by the shift supervisor of all reports of sexual assault, abuse, harassment, or retaliation for reporting an incident of sexual abuse or cooperating in an investigation of sexual abuse. The section manager shall direct the shift supervisor's incident response, and make notification to the PREA compliance manager.
- e. Procedure A: Sexual assaults
- f. Directive A-1: New Assault (Medical Priority; Security staff, shift supervisor duties and responsibilities
- g. Directive A-2: Acute In-Custody Assault (less than five days); Security staff, shift supervisor duties and responsibilities
- h. Directive A-3: Acute In-Custody Assault (less than five days) other KCSO facility; Security staff, shift supervisor, incident location supervisor duties and responsibilities

	<p>i. Directive A-4: Non Acute In-Custody Assault (more than five days); Security staff and shift supervisor responsibilities</p> <p>j. Directive A-5: Other Agency In-Custody Assault; Security staff, shift supervisor responsibilities</p> <p>k. Directive A-6: Sexual Assault In the Community; Security staff, shift supervisor responsibilities</p> <p>l. Directive A-7: Sexual Assault Transportation to hospital; Security transportation staff, shift supervisor responsibilities</p> <p>m. Procedure B: Sexual Abuse</p> <p>n. Directive B-1: First responder duties; Security staff and shift supervisor responsibilities</p> <p>o. Procedure C: Harassment/Retaliation/Threats</p> <p>p. Directive C-1: First responder, security staff, shift supervisor responsibilities</p> <p>q. Procedure D: Classification; outlining duties and responsibilities classification staff have to ensure sexual safety after an allegation of sexual abuse, harassment, retaliation, or threats.</p> <p>Conclusions</p> <p>Policy P-500 defines the written institutional response plan. Interviews with staff support their understanding of the response plan. Based upon a review of the plan coupled with staff interviews, the KCSO LMMF are found in compliance with standard 115.65.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>MOU between the Kern County and the Kern County Sheriff's Command Association (KCSCA); November 16, 2021 - June 30, 2024</p> <p>MOU between Service Employees' International Union (SEIU) and Kern County; November 16, 2021 - June 30, 2023</p> <p>MOU between Kern County and Kern Law Enforcement Association (KLEA); November 9, 2021</p>

	<p>MOU between Kern County and Kern County Detention Officers' Association (KCDOA); November 9, 2021 - June 30, 2024</p> <p>Interviews</p> <p>Detentions Bureau Chief Deputy</p> <p>PREA Compliance Manager</p> <p>Findings</p> <p>(a) In 2021, the County of Kern entered into new MOUs with the Kern County Sheriff's Command Association (KCSCA), the Service Employees' International Union (SEIU), the Kern Law Enforcement Association (KLEA) and the Kern County Detention Officers' Association (KCDOA). The MOUs were provided for review and there are no limitations on the entities 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 and imposed. The Detentions Bureau Chief Deputy is aware of all of the MOUs and noted any and all staff misconduct is investigated to the fullest extent with no limitation on discipline or termination for founded investigations. The PREA compliance manager indicated there were no changes in the disciplinary and termination processes with the new MOUs.</p> <p>Conclusions</p> <p>A review of the agreements coupled with staff interview show the KCSO LMMF is in compliance with standard 115.66.</p>
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy P-100 - Zero Tolerance of Sexual Abuse and Sexual Harassment</p> <p>KCSO Detentions Bureau Policy P-450 - Reporting Sexual Abuse</p> <p>KCSO Detentions Bureau Policy P-450 - Attachment A - PREA Victim Monitoring Form</p> <p>KCSO LMMF Pre-Audit Questionnaire (PAQ)</p>

Interviews

Detentions Bureau Chief Deputy

Facility Administrator Lieutenant/CRF

PREA Compliance Manager

Staff Charged with Monitoring Retaliation

Findings

(a) KCSO Detentions Bureau Policy P-100 states that 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. Policy 450 states that retaliation towards any inmate, staff member, volunteer, or contractor for reporting sexual abuse and or sexual harassment, and retaliation towards any inmate, staff member, volunteer or contractor for cooperating in an investigation are prohibited and will be thoroughly investigated. The Detentions Bureau Chief Deputy has assigned retaliation monitoring to the sergeant of the Detentions Bureau who is also the PREA compliance manager.

(b) The Detentions Bureau Chief Deputy cited several ways the KCSO makes efforts to protect incarcerated people and staff from retaliation. For staff, the individual suspect would be removed from the housing area the staff member is assigned. The PREA compliance manager would make recommendations for protection and together with the PREA coordinator protections would be put in place. Directive #7 - Protection from retaliation for reporting, of policy P-450 states protects all incarcerated people and staff who report sexual assault/abuse or sexual harassment or cooperate with sexual abuse/assault 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.

(c) For at least 90 days following a report of sexual abuse, the PREA compliance manager shall monitor the conduct and treatment of the incarcerated person or staff who reported sexual assault/abuse. The items to be monitors include 1) disciplinary reports of incarcerated persons, 2) housing assignments, 3) program changes, 4) negative performance reviews, 5) reassignments of staff, and 5) periodic status checks of the incarcerated person. The monitoring is documented on the PREA Victim Monitoring Form. In the past 12-months there KCSO LMMF has had zero allegations of retaliation. Should retaliation monitoring occur, it would terminate only if the agency determines that the allegation is unfounded.

(d) As reported by the PREA compliance manager, there have been zero incidents of retaliation monitoring. In addition to observation of the staff and or incarcerated

	<p>person alleging retaliation, the five elements listed in provision (c) are monitored.</p> <p>(e) Any staff member or incarcerated person who cooperates with an investigation who expresses fear of retaliation, the information would be documented and protective measures would be implemented. The PREA compliance manager would work with the victim advocate who would check in with the incarcerated person regularly and report back to the PREA compliance manager. Protection measures would be put in place for staff, and referrals would be made to the Kern County Employee Assistance Program (EAP).</p> <p>(f) The KCSO's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.</p> <p>Conclusions</p> <p>Provisions (a)(b)(c)(d)(e) are defined in policy and confirmed by interviews with staff. Based on the review and analysis of all available evidence, the KCSO is found in compliance with standard 115.67.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy K-400 - Administrative Segregation</p> <p>KCSO LMMF Pre-Audit Questionnaire (PAQ)</p> <p>Incarcerated Person CJIS Classification Review File</p> <p>KCSO Detentions Bureau Policy K-500 - Classification Review</p> <p>Site Review</p> <p>Interviews</p> <p>Staff who supervise incarcerated persons in segregated housing</p> <p>PREA Compliance Manager</p> <p>Findings</p>

	<p>(a) Procedure B of policy K-400 outlines administrative segregation of PREA at risk incarcerated persons. When an incarcerated person is administratively segregated at intake due to a risk of sexual abuse, a classification deputy shall conduct a complete assessment of the incarcerated within 24-hours of placement to ensure administrative segregation is necessary and that the incarcerated individual is housed in the least restrictive housing available. There were zero incarcerated individuals who alleged to have suffered sexual abuse who were held in involuntary segregated housing in the past 12-months for one to 24 hours awaiting completion of an assessment. There were zero incarcerated individual who alleged to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12-months for longer than 30 days while awaiting alternative placement. Staff who supervise individuals in segregated housing indicated most incarcerated persons who are housed there are highly violent, involved in violence within the jail or being disciplined. They noted there are other options, such as immediate classification review, interview with the incarcerated person, and discussion between the PREA compliance manager and Facility Administrator on housing ensuring the Individual is safe.</p> <p>Conclusions</p> <p>Site review observations, policy, and interviews with staff confirm the KCSO LMMF are in compliance with standard 115.68.</p>
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Exceeds Standard
	<p>Auditor Discussion</p> <p>Document Review</p> <p>KCSO Detentions Bureau Policy P-600 - PREA Criminal and Administrative Investigations</p> <p>KCSO LMMF Pre-Audit Questionnaire (PAQ)</p> <p>KCSO Training Records</p> <p>KCSO Specialized Training in Investigations Curriculum</p> <p>KCSO Incident Report (KCSO)</p> <p>KCSO Professional Standards Bureau (PSB) Investigative Brief</p> <p>KCSO Field Case Report (KCSO)</p> <p>Interviews</p>

PREA Compliance Manager

Facility Level Investigator - Senior Detention Deputy

KCSO Investigators - Professional Standards Bureau (PSB)

KCSO Investigators - SAAIU - Sexual Assault and Abuse Investigations Unit

Facility Administrator (Lieutenant)/CRF

PREA Coordinator

Findings

(a) The KCSO conducts investigations internally utilizing a tiered system. Policy P-600 outlines that as a law enforcement agency any allegation of sexual abuse or sexual harassment are investigated promptly, thoroughly, and objectively. All senior detention deputies receive specialized training in investigations and are generally the first line officer to review and initiate an investigation. In coordination with the PREA coordinator, PREA compliance manager and the Facility Administrator it is determined if the incident should be referred out to Professional Standards Bureau (administrative) or Kern County Sheriff's Office Sexual Assault and Abuse Investigations Unit - SAAIU (criminal). All staff interviewed noted investigations are initiated immediately for any allegation of sexual abuse, sexual harassment, retaliation, or misconduct. Third party and anonymous reports are pursued in the same manner.

(b) Directive 1 of Policy P-600 states that all administrative, criminal, and sexual abuse investigators shall receive specialized training in their respective assignments prior to conducting sexual abuse investigations. A review of personnel training records confirmed staff received the required training. Staff were able to articulate components of the training and the training is comprehensive and thorough. Staff noted they follow policy which requires investigation to be conducted utilizing standard investigation methods in accordance with all laws. They understood the special attention to victimization and confinement settings.

(c) Policy P-600, Directive 4, states investigators are to 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). As reported by the investigators the first steps would be to ensure the crime scene was locked down and the appropriate evidence was collected. Interviews would follow and all information is documented. There are several ways to cross-reference prior complaints and reports. Classification documentation would show if there were any previous "keep-away" orders. A review of LEADS would show any prior allegations. All investigators understood the investigative process and were able to discuss the tiered and referral system. During discussions with the investigators, PREA coordinator and PREA compliance manager,

it was evident that an institutionalized network of communication was in place for any allegations violating sexual safety.

(d) Policy P-600, Directive 4 indicated KCSO will not conduct any compelled interviews until after all criminal proceedings are completed, or the District Attorney has declined to file the compliant. Investigative documentation shows that in accordance with policy allegations of conduct that appears to be criminal shall be referred for prosecution.

(e) Investigators noted the evidence speaks for itself, therefore removing any need to assess credibility on the status of the individual; incarcerated person, staff, volunteer, or contractor. It is also practice of the KCSO to make a referral for prosecution definitely if there is enough for probably cause, however, most are sent out of abundance of caution.

(f) Investigators noted collecting evidence of previous reports, camera footage, interviews, and utilizing the documentation of the current allegation are used to determine whether staff actions or failures to act contributed to the abuse, A review of investigative reports shows thorough documentation not only of the evidence, but of the investigative process.

(g) All investigations, whether criminal or administration are thoroughly documented. Throughout Policy P-600 are directives on what must be documented, where it should be documented, and how the documentation is utilized throughout the investigative process.

(h) Substantiated allegations of conduct that appear criminal are always referred for prosecution. Although there were zero allegations of sexual abuse at the LMMF, a review of an investigative brief (from a different KCSO jail facility) showed that on 02/03/21 an allegation was made. Evidence was collected that indicated the allegations were possibly true. 02/05/21 the staff was placed on administrative leave pending further investigation, and the case was referred to the District Attorney who completed the investigation on 05/13/21. There have been zero substantiated allegations of conduct that appeared to be criminal in nature that were referred for prosecution since the last PREA audit.

(i) Policy P-600 requires written documentation to be retained for as long as the alleged abuser is incarcerated or employed by the agency plus five years.

(j) The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation. A review of an investigative brief showed that although a staff member resigned from the KCSO the investigation continued, and resulted in the District Attorney issuing a warrant for the arrest of the employee on attempted sexual activity and sexual activity with incarcerated individuals.

(k) Not applicable

(l) Not applicable since the KCSO conducts investigations, both criminal and

	<p>administrative internally.</p> <p>Conclusions</p> <p>Provisions (a) through (l) were documented by policy, interviews, records review, and observation of electronic file retention. The level of articulation of documentation, knowledge of the investigative staff, and communication established system wide for the investigative process shows KCSO exceeds standard 115.71.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detention Bureau Policy P-600 PREA – Criminal and Administrative Investigations</p> <p>KCSO Investigative Summary</p> <p>Interviews</p> <p>KCSO Investigative Staff</p> <p>Findings</p> <p>(a) Policy P-600 states that 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. Previous incident reports and investigative summaries show nothing exceeding a preponderance of evidence used in the investigations.</p> <p>Conclusions</p> <p>Provision (a) was documented in policy and confirmed through staff interviews. Based upon the review and analysis of all available evidence the KCSO is found in compliance with standard 115.72.</p>

115.73	Reporting to inmates
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Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review

KCSO Detentions Bureau Policy P-600 – PREA – Criminal and Administrative Investigations

KCSO PREA Incident Review Reports

KCSO PREA Incident Findings Notification Letter

KCSO Complaint Waiver

KCSO LMMF Pre-Audit Questionnaire (PAQ)

Interviews

Facility Administrator (Lieutenant)/CRF

PREA Compliance Manager

KCSO Investigative Staff

Findings

(a) Procedure D: Reporting to Inmates, of Policy P-600 states all notifications involving staff abuse allegations and inmate abuse allegations shall be attempted or made to the incarcerated person unless released from custody. All notifications or attempts shall be documented on a PREA Incident Findings Notification, and include whether the allegation has been substantiated, unsubstantiated, or unfounded. The Facility Lieutenant and investigative staff noted notifications are attempted or made to the incarcerated individual regarding the outcome of an investigation. A review of PREA Incident Review Reports and PREA Incident Findings Notification letters confirm these notification are made. In the past 12-months there were zero administrative investigations of alleged inmate sexual abuse. The PREA compliance manager indicated that should the incarcerated person recidivate and return to custody a notification of the previous allegation would be provided.

(b) The KCSO does not utilize outside entities for conducting their investigations. Therefore, this provision is not applicable.

(c) The LMMF PAQ shows zero substantiated or founded investigative findings as there were no investigations conducted. Policy P-600, Procedure D: Reporting to Inmates states that unless a sexual abuse allegation against staff was determined to be unfounded and absent any legal restriction, the KCSO shall notify inmates

	<p>reporting staff sexual abuse of the investigation findings, and whenever:</p> <ul style="list-style-type: none"> a. The staff member is no longer posted within the inmate’s unit; b. The staff member is no longer employed at the facility c. The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or d. The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility <p>(d) For incarcerated persons abuse allegation the KCSO shall inform the alleged victim whenever 1) the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility, and 2) the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.</p> <p>(e) All notifications or attempted notifications are documented utilizing the KCSO PREA Incident Findings Notification Letter. There were zero notifications made to an incarcerated person in the past 12-months. The notification form includes the name of the deputy making the notification, the incarcerated person, incident date, location and type.</p> <p>(f) Policy P-600 acknowledges the obligation to notify the incarcerated person should they be released, the PREA compliance manager indicated documentation is maintained on file of the investigation and the incident review.</p> <p>Conclusions</p> <p>Provisions (a) through (f) were documented in the investigative files and through interviews with staff. Provision (b) is not applicable as the KCSO conducts their investigations internally. Based upon a review and analysis of all available evidence, the KCSO is found in compliance with standard 115.73.</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy P-100 - Zero Tolerance of Sexual Abuse and Sexual Harassment</p>

KCSO Detentions Bureau Policy P-900 PREA - Hiring, Promotions and Discipline

KCSO LMMF Pre-Audit Questionnaire (PAQ)

KCSO Professional Standards Bureau (PSB) Investigative Brief

Interviews

PREA Compliance Manager

Findings

(a) Two policies; P-100 & P-900 of the KCSO Detentions Bureau addresses disciplinary sanctions for staff. Policy P-900, Procedure D: Staff Discipline indicates KCSO shall appropriate discipline staff for substantiated allegations of sexual abuse and sexual harassment. Policy P-100 states substantiated allegations may result in discipline up to and including termination of employment, cancellation of contract and/or criminal prosecution of staff and incarcerated persons.

(b) As reported on the LMMF PAQ, there have been zero staff from the facility who have violated KCSO sexual abuse or sexual harassment policies. One PSB Investigative Brief from 2019 showed administrative leave imposed for a staff member alleged to have violated the KCSO zero tolerance policy.

(c) The LMMF reports zero staff disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies. Procedure C: Staff Discipline notes 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.

(d) Policy P-900 indicates all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff in lieu of termination shall be reported to any relevant licensing bodies, unless the activity was clearly not criminal. In the past year there have been zero staff reported to law enforcement or licensing boards following their termination or resignation prior to termination for violating the KCSO zero tolerance policy.

Conclusions

Provisions (a)(b)(c)(d) are outlined in policy and confirmed through interviews. Based upon the review and analysis of all available evidence, KCSO LMMF is found in compliance with standard 115.76.

115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Document Review</p> <p>KCSO Detentions Bureau Policy P-900 – PREA – Hiring, Promotions and Discipline</p> <p>KCSO LMMF Pre-Audit Questionnaire (PAQ)</p> <p>Interviews</p> <p>PREA Compliance Manager</p> <p>KCSO Inmate Services Lieutenant</p> <p>Findings</p> <p>(a) Policy P-900, Procedure E: Corrective Action for Contractors and Volunteers indicates the KCSO will terminate services from any contractor or volunteer for any substantiated allegation of sexual abuse involving an incarcerated person. Further, any contractor or volunteer who engages in sexual abuse of an incarcerated person shall be prohibited from contact with incarcerated people and shall be reported to law enforcement agencies. In the past 12-months there have been zero contractors or volunteers reported to law enforcement agencies and or relevant licensing bodies for engaging in sexual abuse or with incarcerated people. There have been zero incidents of restricting a contractor or volunteer from access to incarcerated people for violating the KCSO zero tolerance policy.</p> <p>(b) Under Procedure E of Policy P-900, in 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 incarcerated people. Staff indicated the decisions for corrective action are taken on a case-by-case basis. Examples provided might be to restricting a contractor from one or all facilities, reporting them to their employer and leaving it up to the employer for the final outcome.</p> <p>Conclusions</p> <p>Provisions (a) and (b) are defined in policy and confirmed by staff interviews. Based upon the review and analysis of all available evidence, KCSO LMMF is found in compliance with standard 115.77.</p>

115.78	Disciplinary sanctions for inmates
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Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review

KCSO Detentions Bureau Policy P-900 – PREA – Hiring, Promotions and Discipline

KCSO LMMF Pre-Audit Questionnaire (PAQ)

KCSO Incarcerated Person Incident Reports

KCSO Detention Bureau Incarcerated Person Orientation Booklet

Interviews

PREA Compliance Manager

Mental Health Staff

Medical Staff

Findings

(a) Procedure D: Inmate Discipline of Policy P-900 outlines the incarcerated persons disciplinary sanctions for founded administrative or criminal allegations of sexual abuse. In the past 12-months there have been zero administrative and zero criminal findings of inmate-on-inmate sexual abuse at the LMMF.

(b) Procedure D further states the sanctions will 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. The PREA compliance manager noted the policy is followed and coordination with the PREA coordinator and facility administrator is discussed and any mental disability or illness is considered during the discussion.

(c) Outlined in Procedure D is that the disciplinary process shall consider whether an incarcerated person’s mental disabilities or mental illness contributed to their behavior when determining what type of sanction, if any, should be imposed.

(d) Confirmed with mental health staff, the KCSO offers various types of therapeutic modeling designed to address and correct the underlying reasons or motivation for any recognized abuse.

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

(f) For the purposes of disciplinary action, a report of sexual abuse made in good

	<p>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>(g) Policy P-900, page 5 states consensual sexual activity between incarcerated people is a facility rule violation and incarcerated people are subject to disciplinary action. Further, the Incarcerated Person Orientation Booklet states on page 6, incarcerated people are not to solicit, or engage in sexual activity with other incarcerated people.</p> <p>Conclusions</p> <p>Provisions (a) through (g) are defined in both policy and the Incarcerated Person Orientation Booklet. Interviews with staff indicate an understanding of the disciplinary process. Based upon the review and analysis of all available evidence, the KCSO is found to be compliant with standard 115.78.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review</p> <p>KCSO Detentions Bureau Policy P-350 – PREA Intake and Screening</p> <p>KCSO LMMF Pre-Audit Questionnaire (PAQ)</p> <p>KCSO Detentions Bureau Policy P-200 – Prevention and Detection of Sexual Abuse</p> <p>Observation of Intake and Risk Screening at CRF</p> <p>Interviews</p> <p>Staff Responsible for Risk Screening</p> <p>Incarcerated People who Disclosed Sexual Victimization at Risk Screening</p> <p>Mental Health Staff</p> <p>Medical Staff</p> <p>PREA Compliance Manager</p> <p>Women’s Center Hi-Desert Victim Advocate</p>

	<p>Findings</p> <p>(a) KCSO Policy P-350 requires medical staff to interview and evaluate any newly booked incarcerated person’s claim of sexual victimization within the past 5 days for a required response. The LMMF has been curtailed for the past 12-months and have not housed incarcerated individuals during that time. During the site review of the CRF however, an incarcerated person being booked into custody indicated previous sexual abuse by a family member. The individual was offered mental health services and declined. The incarcerated person’s decline for offered services was documented. The PREA compliance manager and classification staff receive immediate notification whenever and individual being booked into custody acknowledges previous sexual abuse.</p> <p>(b) The KCSO offers mental health follow up for incarcerated individuals who have previously perpetrated sexual abuse that is indicated at intake screening. Information related to any medical or mental health services is maintained in their medical or correctional behavioral health file.</p> <p>(c) See response to provision (a). Observation of the intake and screening process at the CRF and interviews with CRF staff indicate the requirements for referral for services are being met.</p> <p>(d) Directive 6: Screening and Classification of Inmates requires the KCSO to make individualized determinations about how to ensure the safety of each inmate. Additionally, appropriate controls of dissemination of confidential information is implemented. Classification staff, supervisors and the PREA compliance manager discussed in detail the various mechanisms to maintain strict confidentiality of information. Classification information is maintained and accessible only through the classification unit, and different staffing classifications dictate the depth of accessible information. Medical and mental health information is maintained in the incarcerated persons electronic medical files.</p> <p>(e) An interview with medical and mental health staff as well as the victim advocate indicate informed consent must be obtained prior to reporting information about prior sexual victimization that did not occur in an institutional setting. The incarcerated person is also given the opportunity to have the report made anonymously.</p> <p>Conclusions</p> <p>Provisions (a)(b)(c)(d)(e) were documented in policy and confirmed through staff interviews and observation of the intake process. Based upon a review and analysis of all available information the KCSO is found to be in compliance with standard 115.81.</p>
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Document Review

KCSO Detentions Bureau Policy P-550 – Victim Services Response Plan

KCSO Detentions Bureau Policy P-350 – PREA Intake and Screening

KCSO LMMF Pre-Audit Questionnaire (PAQ)

CRF Security and Non-Security First Responders

Interviews

PREA Compliance Manager

Medical Staff

Mental Health Staff

Findings

(a) Procedure A: Emergency Care for Victims requires mental health staff to provide direct emergency crisis support to incarcerated people during a current or recent abuse incident as needed. Medical staff are required to provide victims of sexual abuse timely, unimpeded emergency medical treatment, taking care to preserve and or secure evidence as much as possible.

(b) As outlined in Policy P-350, ensuring the safety of incarcerated individuals who have been victimized is of highest priority to the KCSO. Medical services are available to the facility 24-hours a day. If the emergency services are required and there are no practitioners at the LMMF in time of need, practitioners on site at an adjacent KCSO jail facility will be solicited for services.

(c) Medical staff offer all victims of sexual abuse who do not receive a forensic examination with 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.

(d) As indicated through interviews all treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation resulting out of the incident. Policy P-550 states KCSO shall provide free community level medical and mental health services to all sexual abuse victims with or without cooperation in any subsequent investigation.

Conclusions

Provisions (a)(b)(c)(d) are outlined in policy and confirmed through interviews. Based upon a review of all available evidence, the KCSO LMMF is found compliant with

	standard 115.82.
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy P-550 – Victim Services Response Plan</p> <p>Interviews</p> <p>PREA Compliance Manager</p> <p>Medical and Mental Health Staff</p> <p>Findings</p> <p>(a) KCSO Detentions Bureau Policy P-550 outlines ongoing medical and mental health care treatment for victims and abusers. Specifically, Procedure B: Ongoing Medical and Mental Health Treatment states KCSO shall provide medical and mental health evaluations and, as appropriate, treatment to all incarcerated persons who have been victimized and to abusers if known.</p> <p>(b) KCSO medical and mental health staff share responsibilities for ongoing treatment. Medical staff provide follow up services and develop treatment plans. Staff offer referrals for continued care upon transfer or placement in other KCSO facilities, or the victim’s release from custody. Mental health staff conduct a suicide evaluation on victim of new or acute sexual abuse or assault, whether or not they receive a forensic exam. Staff will also 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.</p> <p>(c) Mental health staff indicated they are part of a larger network of care in the county of Kern, and their level of care is consistent with the community level of care. Staff also noted that the detention staff go above and beyond by providing transportation for incarcerated persons who are transitioning to a medical or mental health services facility in the community.</p> <p>(d) Procedure A of Policy P-550 states that when applicable, incarcerated females who have experienced sexual assault will be offered pregnancy tests. This information</p>

	<p>is maintained in the electronic medical file.</p> <p>(e) If pregnancy results are confirmed the victim shall receive timely comprehensive information about and timely access to all lawful pregnancy related medical services.</p> <p>(f) KCSO medical staff will offer incarcerated victims of sexual abuse tests for sexually transmitted infections.</p> <p>(g) Policy P-550, page 1 states KCSO shall provide free community level medical and mental health services to all sexual abuse victims with or without cooperation in any subsequent investigation.</p> <p>(h) Although not required, the KCSO mental health staff, per policy P-550 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.</p> <p>Conclusions</p> <p>Provisions (a) through (h) were documented by policy and interviews. Based upon the review and analysis of all available evidence, the KCSO is found in compliance with standard 115.83.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy P-700 - PREA - Data Collection, Reviews and Audits</p> <p>KCSO Detentions Bureau Policy P-500 - Sexual Assault/Abuse Security Response Plan</p> <p>KCSO PREA Incident Review Reports</p> <p>KCSO LMMF Pre-Audit Questionnaire (PAQ)</p> <p>KCSO 2021 End of Year PREA Report</p> <p>KCSO LMMF Addendum 2020 PREA Report</p> <p>Interviews</p> <p>PREA Compliance Manager</p> <p>Facility Administrator (Lieutenant)/CRF</p>

PREA Coordinator

Incident Review Team Member

Women's Center Hi Desert - Victim Advocate

Findings

(a) Policy P-700, Procedure A: Sexual Abuse Incident Reviews states the facility shall conduct an incident review at the conclusion of every sexual abuse investigation, including allegations not substantiated unless the allegation has been determined to be unfounded. In the past 12-months the LMMF was not populated and therefore did not conduct any Incident Reviews. A copy of a PREA Incident Review Report from the CRF was obtained and reviewed. This case was deemed to be unsubstantiated.

(b) No incident reviews occurred at the LMMF during the past 12-months. One Incident Review was completed for the CRF in the past 12-months and was tested for this standard. Policy P-500 states the Incident Review shall ordinarily occur within 30 days of the conclusion of the investigation. For the referenced review the Special Victims Unit closed their investigation on 07/07/22. On 07/27/22 the PREA Incident Review Team met to review the incident. On 08/05/22 the review was approved by the PREA coordinator.

(c) Policy P-700 states the review team shall include the PREA coordinator, section manager with input from the supervisors, investigators, and medical and mental health practitioners. Interviews with the Incident Review Team stated the PREA compliance manager and victim advocate are involved in the incident reviews as well. The KCSO PREA Incident Review report shows two lieutenants, two sergeants, medical and behavioral health staff and a senior detention deputy from classification were involved in the review of the incident. The LMMF facility administrator is made aware of the incident reviews and signs the report which is then sent through the chain of command.

(d) The KCSO PREA Incident Review Report form assesses for motivation behind the incident by considering race, ethnicity, gang affiliation, gender identity, age, and stature. Policy P-700 requires an examination of the area in the facility where the incident is reported to have occurred to assess if physical barriers exist in the area which may enable abuse; assess the adequacy of staffing levels in that area during different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and prepare and submit a report of its findings including any recommendations for improvement to the PREA compliance manager and appropriate section manager.

(e) The section manager shall implement the recommendations for improvement or document their reasons for not doing so. The PREA compliance manager will forward all completed reports and documentation to the Detentions Bureau Chief Deputy via chain of command. A review of the incident report showed no findings or

	<p>recommendations. The report did show a series of signatures that were evident of chain of command.</p> <p>Conclusions</p> <p>Provisions (a)(b)(c)(d)(e) were outlined in policy, documented via the incident review report form, and confirmed through a completed incident review form and interviews. Based upon the review and analysis of all available evidence, the KCSO is found compliant with standard 115.86.</p>
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy P-700 – PREA – Data Collection, Reviews and Audits</p> <p>KCSO 2021 End of Year PREA Report</p> <p>KCSO LMMF Addendum 2021 PREA Report</p> <p>KCSO website</p> <p>Interviews</p> <p>PREA Compliance Manager</p> <p>Detentions Bureau Compliance Sergeant</p> <p>Findings</p> <p>(a) The KCSO Policy P-700 directs the Detentions Bureau Compliance Section, in accordance with PREA to maintain incident data for all reports of sexual abuse, assault, and harassment. The Compliance Section shall conduct a review of each incident report and evaluate the effectiveness of its sexual abuse prevention, detection, response policies, practices, and training. All data shall be aggregated annually and a report made available to the public on the Sheriff’s Office public website. The data collected shall answer all questions from the most recent DOJ Survey of Sexual Violence. A copy of both the latest year end PREA report and LMMF addendum report were reviewed.</p>

	<p>(b) The reports are published annually, one year in arrears.</p> <p>(c) See response to provision (a).</p> <p>(d) Procedure B of Policy P-700 requires the Detentions Bureau Compliance Section to maintain, review and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual assault/abuse incident reviews. Discussions with the Compliance Section sergeant and PREA compliance manager showed collaboration with respect to data collection. Both sergeants report to the PREA coordinator and meet daily to go over overall compliance and PREA issues, including data collection.</p> <p>(e) The KCSO does not contract for the confinement of their incarcerated people with private facilities, leaving this provision not applicable.</p> <p>(f) The Detentions Bureau Compliance Section would, upon request provide all such data from the previous calendar year to the Department of Justice (DOJ) no later than June 30th. Staff indicated there have been no requests from DOJ for data.</p> <p>Conclusions</p> <p>Provisions (a) through (f) were documented in policy, review of annual reports and staff interviews. Based upon the review and analysis of all available evidence the KCSO is found compliant with standard 115.87.</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review</p> <p>KCSO Detentions Bureau Policy P-700 - PREA - Data Collection, Reviews and Audits</p> <p>KCSO 2021 End of Year PREA Report</p> <p>KCSO LMMF Addendum 2020 PREA Report</p> <p>KCSO website www.kernsheriff.org</p> <p>Interviews</p> <p>Detentions Bureau Chief Deputy</p> <p>PREA Coordinator</p> <p>PREA Compliance Manager</p>

Compliance Section Manager

Findings

(a) Directive B-2: Data review for corrective action outlines the requirements of the Detentions Bureau's Compliance Section and their requirement to 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. The review must include:

- a. Identification of any deficiencies within each facility or section;
- b. Suggested corrective action (if any)
- c. Comparison of the current year's data with the prior year; and
- d. Assessment of progress in addressing sexual abuse/assault

The Detentions Bureau Chief Deputy indicated regular briefings occur with PREA and Compliance Section staff. Any recommendations for improvement are discussed and strategies are developed to address any problem areas. The PREA compliance manager and Compliance Section manager work closely to develop plans for recommendations of corrective action based on any input received related to PREA incidents, but also the BSCC recommendations as well. The PREA coordinator ensures maintenance of data collected is securely retained. Additionally, between the Compliance Section manager and PREA compliance manager, any issues that arise regarding recommendations for corrective action are done so continuously and on an ongoing basis.

(b) A review of the most current report shows a comparison to the previous year's report. The current report shows no recommended corrective actions to request or include in the report.

(c) The reports are posted on the KCSO website at www.kernsheriff.org.

(d) Specific material that would present a clear and specific threat to the safety and security of a facility will be redacted prior to publication for public viewing. This would include, but not be limited to personal identifiers. The report shall indicate the nature of the material redacted.

Conclusions

Provisions (a)(b)(c)(d) were demonstrated by policy, review of annual reports and interviews with staff. Based upon the review and analysis of all available evidence KCSO is found to be compliant with standard 115.88.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review

KCSO Detentions Bureau Policy P-700 – PREA – Data Collection, Reviews and Audits

KCSO 2021 End of Year PREA Report

KCSO LMMF Addendum 2020 PREA Report

KCSO website www.kernsheriff.org

Interviews

PREA Coordinator

Findings

(a) Directive B-3 of Policy P-700 states the Compliance Section shall ensure that data collected is securely retained. Data is maintained in secure electronic files that are password protected, in locked filing cabinets within a locked office. The PREA coordinator reviews data collected in order to assess and improve the effectiveness of its sexual safety efforts.

(b) Although the KCSO does not contract with private facilities, aggregate data collected for the LMMF and all other facilities operated by the KCSO that become a part of the annual reports are made readily available to the public annually through the website.

(c) The Detentions Bureau Compliance Section removes all personal identifiers prior to making all facility aggregated sexual abuse data available to the public annually on its website. A review of the reports show no personal identifiers.

(d) The Compliance Section shall also 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. The website shows several past years' PREA reports for LMMF.

Conclusions

Provisions (a)(b)(c)(d) were demonstrated by policy, a review of documents, a review of the website, and through interviews with staff. Based upon the review and analysis of all available evidence, KCSO is found compliant with standard 115.89.

115.401	Frequency and scope of audits
	<p data-bbox="280 188 983 224">Auditor Overall Determination: Meets Standard</p> <p data-bbox="280 264 564 300">Auditor Discussion</p> <p data-bbox="280 340 539 376">Document Review</p> <p data-bbox="280 412 1353 448">2021 KCSO Lerdo Maximum Medium Facility PREA Audit Certification Report</p> <p data-bbox="280 555 427 591">Interviews</p> <p data-bbox="280 627 663 663">PREA Compliance Manager</p> <p data-bbox="280 770 399 806">Findings</p> <p data-bbox="280 842 1484 1590">The KCSO Lerdo Maximum Medium Facility (LMMF) was audited in August of 2021 with the final report submitted in February of 2022. The original audit dates were set for 2020, but due to COVID 19 the audit was postponed. The current audit was conducted June 120-22, 2023 which is within the required three year time frame. This is the first year of the current audit cycle. The auditor was given full access to the KCSO Lerdo Maximum Medium Facility, the Detentions Bureau Policies, and all areas of the facility, files, and documentation were accessible by the auditor. All records were not provided within the Pre-Audit Questionnaire were requested by the auditor while onsite. While conducting the site review the auditor noted areas where forms would be placed, and lock boxes for inmate correspondence. There has been no incarcerated people housed at the LMMF for the past 12-months. The incarcerated person interviews were conducted at the Central Receiving Facility. There are currently three staff at the LMMF who were interviewed for this audit report. Other referenced random staff interviews were with staff from the CRF. The PREA compliance manager indicated that at any time a staff member could be assigned to work at any of the jail facilities, and the policy, procedures, and practice would be consistent across all facilities. All staff and incarcerated person interviews were permitted to be conducted in a private setting.</p> <p data-bbox="280 1626 450 1662">Conclusions</p> <p data-bbox="280 1697 1430 1814">Based upon the review and analysis of the previous LMMF audit report and completion of the current audit the KCSO LMMF is found to be in compliance with standard 115.401.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation

KCSO Detentions Bureau Policies KCSO

KCSO Personnel Records

KCSO Incarcerated Person Records

KCSO Training Records

KCSO Detentions Bureau PREA Documents; posters, video, pamphlet, incarcerated persons handbook, grievance form, sick call request, victim advocate request form, general request form

KCSO Personnel Complaint Form

KCSO Investigative Files

Findings

The documentation provided and requested were thoroughly analyzed and tested against each provision and standard. Interviews with random staff, specialized staff, targeted and random justice involved individuals, informal discussions while on-site at the Lerdo Maximum Minimum Facility, were layered over the documentation and a determination of compliance was made. The KCSO PREA compliance manager is the nucleus to the operations and implementation of PREA throughout the KCSO. Discussions with the compliance manager were initiated immediately once the contract was signed by both parties, and regular communication ensued from there. There was no hesitation on behalf of the KCSO to provide requested information, and it was generally supported with an explanation of the request and a follow up phone call or email to ensure the auditor had a full understanding of the information provided. The LMMF 2021 final PREA Facility Audit Report is posted on the Kern County Sheriff's Office website at www.kernsheriff.org/Prea. Additionally, the LMMF has internal facility reports from 2016, 2017, 2018, and 2020 posted on the website. Finally, the LMMF Staffing Plans from 2016, 2020, and 2021 are available via the KCSO website.

Conclusions

Based upon the review and analysis of the website, documentation made available to the auditor, and discussions with KCSO employees and incarcerated persons to ensure what is written in policy is adhered to, that the adherence has been solidified throughout the system, and the PREA coordinator and PREA compliance manager are utilizing a continuous quality improvement style of management to ensure sexual safety within the system, the KCSO LMMF is found compliant with standard 115.403.

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

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

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

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

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

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

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

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

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

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

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does 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
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

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

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

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

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

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

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

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

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

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	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.)	na
	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.)	na
115.43 (c)	Protective Custody	

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

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

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

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

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

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

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

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

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

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

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

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

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	na

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

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

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

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

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