PREA Facility Audit Report: Final

Name of Facility: Grand Forks County Correctional Center
Facility Type: Prison / Jail
Date Interim Report Submitted: NA
Date Final Report Submitted: 09/19/2025

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	☑
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	☑
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	☑
Auditor Full Name as Signed: Candace L. Snyder	**Date of Signature:** 09/19/2025

AUDITOR INFORMATION	
Auditor name:	Snyder, Candy
Email:	snyder@gwtc.net
Start Date of On-Site Audit:	08/04/2025
End Date of On-Site Audit:	08/05/2025

FACILITY INFORMATION	
Facility name:	Grand Forks County Correctional Center
Facility physical address:	1701 North Washington Street, Grand Forks, North Dakota - 58203
Facility mailing address:	

Primary Contact

Name:	Jodi Hilde
Email Address:	jodi.hilde@gfcounty.org
Telephone Number:	701-738-2799

Warden/Jail Administrator/Sheriff/Director	
Name:	Sheriff Andy Schneider
Email Address:	andrew.schneider@gfcounty.org
Telephone Number:	701-780-8274

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

Facility Health Service Administrator On-site	
Name:	Tess Wall
Email Address:	twall@grandforksgov.com
Telephone Number:	701-787-8101

Facility Characteristics	
Designed facility capacity:	328
Current population of facility:	217
Average daily population for the past 12 months:	197
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both women/girls and men/boys

In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of "intersex" and "transgender," please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	18-99
Facility security levels/inmate custody levels:	Maximum, Medium, Minimum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	67
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	7
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	80

AGENCY INFORMATION	
Name of agency:	Grand Forks County Adult Corrections Department
Governing authority or parent agency (if applicable):	
Physical Address:	1701 North Washington Street, Grand Forks, North Dakota - 58203
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Jodi Hilde	**Email Address:**	jodi.hilde@gfcounty.org

Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

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

POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-08-04
2. End date of the onsite portion of the audit:	2025-08-05

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?	(●) Yes ( ) No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Community Violence Intervention Center

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	328
15. Average daily population for the past 12 months:	197
16. Number of inmate/resident/detainee housing units:	28
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	( ) Yes (●) No ( ) 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	
23. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit:	208
25. 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:	2
26. 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:	1
27. 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
28. 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
29. 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:	4
30. 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:	1

31. 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:	0
32. 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:	1
33. 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:	4
34. 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:	0
35. 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):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. 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:	68
37. 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:	80

38. 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:	7
39. 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

40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	15
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☐ Age ☒ Race ☒ Ethnicity (e.g., Hispanic, Non-Hispanic) ☒ Length of time in the facility ☒ Housing assignment ☒ Gender ☐ Other ☐ None
42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Interviewed staff from all housing units
43. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	◉ Yes ○ No

44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	9
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".	
47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
48. 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:	4
49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	I interviewed inmates and staff and reviewed screening documents of inmates which corroborated that there were no inmates with this characteristic to be interviewed.
50. 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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	I interviewed inmates and staff and reviewed screening documents of inmates which corroborated that there were no inmates with this characteristic to be interviewed.
51. 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:	2

52. 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:	1
53. 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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	I interviewed inmates and staff and reviewed screening documents of inmates which corroborated that there were no inmates with this characteristic to be interviewed.
54. 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:	1
55. 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:	3

56. 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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	☒ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	I interviewed inmates and staff at the facility and reviewed other documents which corroborated that there were no residents with this characteristic to be interviewed.
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	12

59. 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
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	◉ Yes ○ No
61. 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.	
62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	5
63. Were you able to interview the Agency Head?	◉ Yes ○ No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	◉ Yes ○ No

65. Were you able to interview the PREA Coordinator?	◉ Yes ○ No
66. Were you able to interview the PREA Compliance Manager?	○ Yes ○ No ◉ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

67. 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

	☐ Other
68. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☒ Religious ☐ Other
69. Did you interview CONTRACTORS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of CONTRACTORS who were interviewed:	3
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☒ Medical/dental ☒ Food service ☐ Maintenance/construction ☐ Other
70. 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.

71. Did you have access to all areas of the facility?	(●) Yes ( ) No
Was the site review an active, inquiring process that included the following:	
72. 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
73. 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
74. Informal conversations with inmates/ residents/detainees during the site review (encouraged, not required)?	(●) Yes ( ) No
75. Informal conversations with staff during the site review (encouraged, not required)?	(●) Yes ( ) No

76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.

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.

77. 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?	(●) Yes ( ) No
78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.

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.

79. 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	1	0	1	0
Staff-on-inmate sexual abuse	2	0	2	0
Total	3	0	3	0

80. 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	4	0	4	0
Staff-on-inmate sexual harassment	1	0	1	0
Total	5	0	5	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.

81. 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

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

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

83. 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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	4	0	0
Staff-on-inmate sexual harassment	0	1	0	0
Total	0	5	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	4

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	◉ Yes ○ No ○ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	○ Yes ◉ No ○ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	◉ Yes ○ No ○ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	3
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	◉ Yes ○ No ○ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	5
94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	( ) Yes (●) No ( ) NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	4
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	( ) Yes (●) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	○ Yes ◉ No ○ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	◉ Yes ○ No ○ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. 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	
102. 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.	○ Yes ◉ No

Non-certified Support Staff	
103. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	(●) Yes ( ) No
a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:	1
AUDITING ARRANGEMENTS AND COMPENSATION	
108. Who paid you to conduct this audit?	(●) The audited facility or its parent agency ( ) My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) ( ) A third-party auditing entity (e.g., accreditation body, consulting firm) ( ) Other

Standards
Auditor Overall Determination Definitions
• Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Policy 103 Custody Manual **Interviews Conducted:** 1. Captain/PREA Coordinator 2. 12 random staff 3. 15 random inmates The Grand Forks County Correctional Center (GFCCC) is a 328-bed jail in Grand Forks, North Dakota. **Findings by Provision:** **115.11 (a): Zero-Tolerance Policy** **Compliance Determination:** Policy C.18 Prison Rape Elimination Act of 2003 states GFCCC has a zero tolerance policy toward all forms of sexual abuse and sexual

	harassment within its facility. The PREA policy outlines how GFCCC will implement the agency's zero tolerance approach to preventing, detecting, and responding to sexual abuse and sexual harassment. **115.11(b): PREA Coordinator** **Compliance Determination:** GFCCC has a designated upper-level, facility PREA Coordinator who has sufficient time and authority, as well as the authority to implement and oversee GFCCC efforts to comply with PREA standards in its facility. The PREA Coordinator holds the position of Captain and reports directly to the Sheriff. This facility has undergone a realignment in the few months preceding the on-site portion of the audit. Where previously they were operated by a Jail Administrator who reported to the county commissioners, now the administration of the jail is the responsibility of the Captain who reports to the Sheriff. The Captain was recently promoted to this position. She previously was a lieutenant and has been the facility's PREA Coordinator since 2019, and was the PREA Compliance Manager prior to that. She will retain the responsibility as PREA Coordinator through this audit cycle, but will be delegating this responsibility to the Lieutenant. Currently, the Lieutenant is assisting with PREA Coordinator duties so that he can take over this responsibility. The auditor interviewed the PREA Coordinator and found her to be very knowledgeable about her role and highly organized. She stated she has enough time to manage her PREA-related responsibilities, although with the new promotion and the additional responsibilities that come along with jail administration, it is more challenging. She depends heavily on the PREA Compliance Manager to ensure that all tasks are completed and stated that PREA-related responsibilities take a high priority. **115.11(c): PREA Compliance Manager** **Compliance Determination:** Currently, there is no staff designated as the PREA Compliance Manager. As there is only one facility for this agency, a PREA Compliance Manager is not required. However, the Captain anticipates appointing a staff member to fulfill this role once the Correctional Lieutenant has assumed his duties as PREA Coordinator. The PREA Compliance Manager will handle the day-to-day PREA compliance efforts within their facility and will report to the PREA Coordinator. The auditor reviewed Policy 103 Custody Manual, which states that the Command Staff consists of the Sheriff, the Correctional Captain, and the Correctional Lieutenant The auditor determined compliance through a review of the pre-audit questionnaire, a review of policy, and interviews with the Captain/PREA Coordinator. All staff and inmates were knowledgeable of the zero-tolerance policy as demonstrated through the interviews.

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

	Documents Reviewed: 1. Pre-Audit Questionnaire **Interviews Conducted:** 1. Captain/PREA Coordinator **Findings by Provision:** **115.12 (a): Contracts for confinement of inmates comply with PREA** **Compliance Determination:** The GFCCC does not contract for the confinement of inmates with an outside entity. **115.12 (b): Contracts provide for contract monitoring to ensure compliance** **Compliance Determination:** The GFCC does not contract for the confinement of inmates with an outside entity. The auditor determined compliance through a review of the pre-audit questionnaire, and an interview with the Captain/PREA Coordinator.

115.13	**Supervision and monitoring**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Grand Forks County Correctional Center 2025 Staffing Plan 4. Grand Forks County Correctional Center Staff schedule 5. Superviosor Round Log Reports 6. Administrator Round Log Reports **Interviews Conducted:** 1. Captain/PREA Coordinator 2. Correctional Lieutenant **Findings by Provision:** **115.13 (a) Staffing Plan** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, the 2025 staffing plan review, and interviewed administrators. In calculating adequate staffing levels, the facility takes into consideration: the physical layout of the facility, the composition of the inmate population, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, and any other relevant factors. The auditor toured all areas of the facility and observed all areas, including the housing units, restrooms, dayrooms, kitchen, laundry, storage areas, pat search area, booking, and staff areas. While touring the facility, the auditor noted camera locations, security mirrors, and looked specifically

	for blind spots. The auditor came in during all shifts, including the night shift, to see operations at all times of the day. The auditor had informal conversations and made observations about inmate supervision. The storage doors were locked, and the facility's practices and procedures ensure staff and inmates are not in a one-on-one situation out of camera view. The auditor observed that staffing levels were either at or above the levels indicated in the staffing plan. **115.13 (b): Document deviations** **Compliance Determination:** Both the policy and interviews with administrators verify that in circumstances where the staffing plan is not complied with, the facility will document and justify all deviations from the plan and advise the Captain/PREA Coordinator. There were no deviations from the staffing plan. The Captain/PREA Coordinator stated she would know about any shifts that were not covered. She checks the scheduling program first thing as soon as she comes into work and she can also pull up the schedule on her phone at any time to see the current status. They are currently working on filling positions for the new pod that is due to open soon. They ensure staff coverage through overtime, pulling from Team F, who have more administrative duties, or with other administrative or supervisory staff if necessary. **115.13 (c) Annual Review** **Compliance Determination:** The auditor reviewed the Grand Forks County Correctional Center Jail Staffing Plan which outlines the minimum number of staff on each shift, the composition of the inmates, the physical layout of the facility, technology review, and their consideration of any substantiated or unsubstantiated incidents of sexual abuse during their staffing plan review. The review was conducted on March 19, 2025, and included the Sheriff, and the PREA Coordinator. **115.13 (d) Unannounced Rounds** **Compliance Determination:** The auditor interviewed the Captain/PREA Coordinator and the Correctional Lieutenant who both stated that they complete unannounced rounds. The unannounced rounds responsibility is shared between the four upper-level administrators to ensure that one administrator’s round is completed each week. In addition, the mid-level managers include supervisory sergeants and corporals who conduct supervisor’s unannounced rounds at least once each day. These rounds are completed using a Spartan rounds tracker which electronically tracks each checkpoint the supervisor checked in during the round. The auditor reviewed unannounced rounds reports to verify that unannounced rounds are conducted as required and at varying times of day to include all shifts. The auditor determined compliance with this standard through a review of the documents listed above, through direct observations of rounds, staffing patterns, observing staff lines of sight and watching staff monitor the facility both in person and the video monitoring in the control room, through a review of the pre-audit questionnaire, interviews with the Captain/PREA Coordinator, and the Correctional Lieutenant, and through informal conversations with staff and inmates.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire **Interviews Conducted:** 1. Captain/PREA Coordinator **Findings by Provision:** **115.14 (a) –(c) Sight, sound separation and no physical contact with any adult inmate in housing areas** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states that youthful inmates are not housed at GFCCC. The auditor interviewed the Captain/PREA Coordinator, who stated that they do not house those under 18 years of age.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Policy 514 Searches **Interviews Conducted:** 1. Captain/PREA Coordinator 2. Lieutenant 3. 12 random staff 4. 15 random inmates **Findings by Provision:** **115.15 (a) No Cross Gender strip searches or cross-gender visual body cavity searches** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC staff will not conduct cross-gender unclothed searches or cross-gender visual body cavity searches (anal or genital opening) except in exigent circumstances or when performed by medical practitioners. The auditor also reviewed Policy 514 Searches which states unless conducted by a qualified health care professional or in case of an emergency, a modified unclothed body search or unclothed body search shall be conducted by

members of the same gender as the person being searched. Unless conducted by a qualified health care professional or in case of an emergency, a modified unclothed body search or unclothed body search shall be conducted by members of the same gender as the person being searched. Physical body cavity searches shall be completed as follows: (a) No person shall be subjected to a physical body cavity search without approval of the Correctional Captain or the authorized designee and only with the issuance of a search warrant. (b) Only a qualified health care professional may conduct a physical body cavity search. Except in exigent circumstances, only a qualified health care professional who is not responsible for providing ongoing care to the inmate may conduct the search. (c) Except for the qualified health care professional conducting the search, persons present must be of the same gender as the person being searched. Only correctional deputies needed to maintain the safety and security of the medical personnel shall be present during the search. The auditor interviewed the Captain/PREA Coordinator who stated there have been no cross-gender strip searches or cross-gender visual body cavity searches. Staff routinely answered that they do not conduct cross-gender strip searches or visual body cavity searches. The auditor observed the area used to conduct searches, and noted that it was private to prevent cross-gender viewing.

115.15 (b) No Cross-Gender pat-down searches of female inmates
Compliance Determination: The auditor reviewed Policy 514 Searches which states except in emergencies, all pat-down searches will be conducted by a member of the same gender as the inmate. Absent the availability of a member of the same gender, it is recommended that a witnessing member be present during a pat-down search of an individual of another gender. The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states GFCCC shall not permit cross-gender pat-down searches of female inmates/detainees, absent exigent circumstances. GFCCC will not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. During interviews both staff and inmates consistently stated that cross-gender pat-down searches are not done. Staff consistently stated that there were both male and female staff on duty at all times to complete searches by a staff of the same gender as the inmate. The auditor observed the pat search area. There is good camera coverage in this area.

115.15 (c): Document Cross-Gender Searches
Compliance Determination: The auditor reviewed Policy 514 Searches which states that any cross-gender modified unclothed body searches and cross-gender unclothed body searches shall be documented. The policy states with regard to physical body cavity searches that all such searches shall be documented, including the facts that led to the decision to perform a physical body cavity search of the inmate; the reasons less intrusive methods of searching were not used or were insufficient; the Correctional Captain's approval; a copy of the search warrant; the time, date, and location of the search; the medical personnel present; the names, gender, and roles of any correctional deputies present; and any contraband discovered by the search. Completed documentation should be placed in the inmate's file. A copy of any search warrant and the results of the physical body cavity search shall be included with the related reports and made available, upon request, to the inmate or other authorized

representative (except for those portions of the warrant ordered sealed by a court). This policy also states that all cross-gender pat-down searches shall be documented. Policy C.18 Prison Rape Elimination Act of 2003 states that staff will document in the electronic facility log all cross-gender searches (pat-down, unclothed, and visual body cavity) along with the exigent circumstances for the search. There were no cross-gender searches documented. However, they would be documented in the electronic log if there were any.

115.15 (d) Policies and Procedures for showers, bodily functions, and changing clothing

Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states all opposite gender staff, uniformed and non-uniformed, will consistently announce their presence denoted by staff gender, when entering an inmate housing unit where inmates may be seen using the shower, toilet, or different stages of undress. When an opposite gender staff is posted in a housing unit, said staff shall announce at the beginning of each shift notifying inmates that staff of the opposite gender will enter or be present in the housing unit during the shift. When the gender of the staff in the housing unit changes, a notification will be made to inmates announcing the staff member's presence in the housing unit. The auditor directly witnessed announcements while on the facility tour and throughout the audit and the practice was confirmed through both staff and inmate interviews. A few of the inmates stated during random interviews that there have been a couple who have forgotten the announcement, but the majority of those interviewed stated that the announcements occur consistently. The auditor reviewed camera views throughout the facility while in the control room. All camera views were adequately blocked to ensure that inmates have privacy to toilet. Shower stalls have doors or shower curtains for privacy which allow only feet and head to be seen. Inmates are required to be dressed at all times and only change in designated areas.

115.15 (e) Not searching or examining transgender or intersex to determine genital status

Compliance Determination: The auditor reviewed the policy, which states staff will not search or physically examine a transgender or intersex inmate/detainee for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined through conversation 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. If it is determined either through assessment or through admission by the inmate that they are transgender or intersex, the person responsible for the screening or the search shall ask the inmate if they prefer to be searched by a male or female officer and document the response. If the inmate does not have a preference or if a search must be completed due security concerns, available staff may conduct the search and document the reason the person was searched by someone not of the resident's preferred gender. There were no inmates who identified as transgender present to be interviewed. The auditor interviewed the Captain/PREA Coordinator and the staff who conduct the intake and screening, who stated that information regarding sexual identity is asked during the booking process. Identity as a transgender or intersex

	person would be gathered through conversation with the inmate, and then they would ask who they prefer to be pat searched by a male or a female staff. This was confirmed through staff random interviews as well. **115.15. (f) Train staff on how to conduct cross-gender pat-down searches** **Compliance Determination:** The auditor interviewed staff who consistently stated that they participate in cross-gender pat search training. The auditor confirmed this by reviewing employee training records. The auditor determined compliance with this standard through a review of the documents listed above, through direct observations while on the tour, and staff making verbal announcements when they entered housing of the opposite gender, through a review of the pre-audit questionnaire, interviews with the Captain/PREA Coordinator, and through random interviews with staff and inmates. The auditor reviewed the camera coverage, and there is no camera in an area where inmates might be in a state of undress. The auditor also had informal conversations with inmates regarding their privacy during showering, toileting, and changing clothing.

115.16	**Inmates with disabilities and inmates who are limited English proficient**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 **Interviews Conducted:** 1. Sheriff 2. Captain/PREA Coordinator 3. 12 random staff 4. 5 targeted interviews **Findings by Provision:** **115.16 (a) Inmates with disabilities equal opportunity** **Compliance Determination:** The auditor verified the facility's use of interpreting services by telephone with Propio, including American Sign Language. In conversations with the Sheriff, the Captain/PREA Coordinator, staff, and targeted inmate interviews, they will work with inmates who may have trouble reading or comprehension due to a disability or cognitive impairment. They read the information and explain it to them at a level they can understand. The auditor reviewed policy and training materials. They can also show the PREA video with subtitles and have written materials for inmates who may be deaf or hearing impaired. The auditor interviewed three inmates with a disability to ensure they understood the information

	as presented. **115.16 (b) Access for inmates LEP** **Compliance Determination:** They have instructed all staff in the use of interpreting by telephone services with Propio and provided the auditor with the number for their 24/7 interpretation service. The interpretive services can assist in the intake process, screening process, education on how to report, and translation during the investigative process. These procedures were confirmed during staff and inmate interviews. The auditor used Propio for two inmate interviews as the inmates were Limited English Proficient. In addition, the auditor reviewed materials provided to inmates to include materials that are in both English and Spanish, as Spanish would be the language primarily encountered at this facility. **115.16 (c) Not rely on inmate interpreters, readers, or other assistance** **Compliance Determination:** The auditor reviewed the policy, which states they will not rely 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 auditor interviewed administrators and staff, and there have been no reported uses of inmate interpreters, readers, or assistants. They consistently stated that they would use their contracted interpreter service. The auditor determined compliance with this standard through a review of the policies, use of the interpretation service, and through interviews with administrators, staff, and inmates.

115.17	**Hiring and promotion decisions**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. 6 background checks for employees 4. Documentation of check with prior institutional employer 5. 6 sexual misconduct questionnaires **Interviews Conducted:** 1. Captain/PREA Coordinator 2. Lieutenant responsible for HR documents **Findings by Provision:** **115.17 (a) Not hire or promote, or enlist contractors who have engaged in sexual misconduct** **Compliance Determination:** The auditor interviewed the Captain/PREA Coordinator

and the Lieutenant who maintains the HR documentation. They confirmed their compliance with this policy. They conduct reference checks of previous institutional employers and ask the sexual misconduct questions of applicants. The auditor requested and received a random sample of employees in which these questions have been answered upon hire as well as requiring the acknowledgment of the newly hired employees' understanding that they have a continuing affirmative duty to disclose any such misconduct.

115.17 (b) Consider sexual harassment incidents when hiring, promoting, or enlisting contractors

Compliance Determination: The auditor reviewed the policy which states that the GFCCC will not hire or promote anyone who may have contact with inmates, and will not enlist the services of any contractor or volunteer 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, has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in the activity described in this section. The auditor interviewed the Captain/PREA Coordinator, and the Lieutenant responsible for hiring who confirmed their compliance with this policy by conducting reference checks with previous institutional employees and a review of a staff member's personnel record and PREA documentation for any incidents of sexual misconduct when considering an employee for promotion. The facility utilizes contractors for medical services and the contracted food service. They conduct background checks and inquire about previous sexual misconduct.

115.17 (c) Criminal Background Checks Before hiring new employees

Compliance Determination: The auditor interviewed the Captain/PREA Coordinator and the Lieutenant responsible for hiring who stated that they conduct criminal background checks on applicants before an offer of employment is made and on current employees when they are promoted. The auditor reviewed a random sample of six employee files and found that the necessary background checks were run for new hires. The auditor requested and received the required documented information of inquiry made to a previous employer whether there were any previous substantiated allegations of sexual abuse or resignations pending an investigation of an allegation of sexual abuse for any employees who had previous institutional employment.

115.17 (d) Criminal Background Checks Before enlisting services of contractors

Compliance Determination: The auditor reviewed policy which states that they will perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates. The auditor interviewed the Captain/ PREA Coordinator and the Lieutenatn who stated that they will conduct criminal background checks before their services can be used at the facility. The facility utilizes contractors for the contracted food service and medical providers, and they conduct background checks. The auditor reviewed a sample of two contractor

	background checks. **115.17 (e) Criminal Background Checks every five years** **Compliance Determination:** The auditor reviewed the policy which states that criminal background checks will be conducted at least every five years on all current employees, and prior to promotion for employees, and on all contractors who may have contact with inmates. The auditor requested and received a random sample of six employees' criminal background checks. All were current within the last five years. The random sample included some background checks for veteran employees who had the most recent five-year update, as well as employees who had the background check run during the hiring process. **115.17 (f) Ask applicants and employees annually about previous sexual misconduct** **Compliance Determination:** The auditor reviewed the employee acknowledgment forms that ask the required sexual misconduct questions outlined in provision (a) of this standard. These are completed upon hiring and as part of the annual employee review process. Policy C.18 Prison Rape Elimination Act of 2003 states that GFCCC requires all applicants and employees to disclose any misconduct described in paragraph a. of this section through the following ways: Written applications or interviews for hiring or promotions; Written self-evaluations conducted as part of current employee reviews; and In writing or verbally to GFCCC Administration when updating information in accordance to Affirmative Duty. **115.17 (g) Omissions or false information regarding sexual misconduct grounds for termination** **Compliance Determination:** The auditor reviewed the policy, which states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination of employment. **115.17 (h) Provide information on substantiated sexual misconduct by former employees** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states that unless prohibited by law, GFCCC shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer with whom the employee has applied to work. The auditor interviewed the Captain/PREA Coordinator and the Lieutenant who verified that they do provide this information when requested. The Grand Forks County Correctional Center hiring and promotional processes were confirmed by a review of policy, employment, and human resource records and an interview with the Captain/PREA Coordinator and the Lieutenant who oversee all employment actions.

115.18	**Upgrades to facilities and technologies**

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 **Interviews Conducted:** 1. Sheriff 2. Captain/PREA Coordinator **Findings by Provision:** **115.18 (a) Consider design or modification on ability to protect inmates** **Compliance Determination:** The auditor reviewed the policy and interviewed the administrators who stated that they will always consider how any changes will contribute to their ability to protect inmates from sexual abuse. The auditor directly observed the facility and conducted interviews with the Sheriff, and the Captain/PREA Coordinator, who stated that they consider the protection of inmates and the standards when contemplating upgrades to the facility or in the application of technology. They have expanded this facility to include another living unit titled Pod 4. The construction of this unit has been completed but will not be occupied until hiring for the staff to support this unit has been hired. The auditor toured the new facility. Its design is eight individual units spoking out from a central control point. All units have glass facing the control center so that correctional officers can view inmates both directly through the glass and through video monitoring. **115.18 (b): Consider how technology may protect inmates** **Compliance Determination:** The auditor reviewed the policy and interviewed the administrators who stated that they always consider how technology, including cameras, may enhance their ability to protect inmates from sexual abuse. The auditor spoke with administrators who stated that they upgraded all cameras in 2024 with new digital cameras that provide more clarity and have wider angle views. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, through direct observation while on the facility tour, and through interviews with the administrators.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003

3. Investigative training certificates
4. North Dakota Sexual Assault Evidence Collection Protocol
5. North Dakota SANE Best Practice Guidelines
6. North Dakota Model Law Enforcement Sexual Assault Policy September 2011
7. MOU with Community Violence Intervention Center (CVIC)

Interviews Conducted:
1. Captain/PREA Coordinator
2. PREA Coordinator
3. 12 random staff
4. Administrative Investigator
5. Community Violence Intervention Center (CVIC)

Findings by Provision:
115.21 (a) Follow uniform evidence protocol
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states that they will follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The auditor reviewed the training documentation and interviewed an administrative investigator to verify that all investigators are trained in uniform evidence protocol. The investigators have completed courses from various organizations that all emphasize a uniform evidence protocol for collecting physical evidence – North Dakota DOCR and the National Institute of Corrections. Criminal investigations are completed by the Grand Forks County Sheriff's Department, unless a staff member is involved, and then it would be completed by an investigator from the North Dakota Bureau of Crininal Investigation

115.21 (b) Evidence protocol adapted "A National Protocol for Sexual Assault Medical Forensic Exams"
Compliance Determination: The evidence protocol used by this facility is the North Dakota Sexual Assault Evidence Collection Protocol 5th edition adapted from the Sexual Assault Protocol developed by the United States Department of Justice.

115.21 (c) Offer victims to forensic medical examinations
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states forensic medical examinations will be offered without financial cost to the victim. Forensic examinations will be conducted at Altru Health System Grand Forks. Forensic medical exams are conducted by a SAFE or SANE within 120 hours of the incident. When a SAFE or SANE is not available, the examination may be performed by other qualified medical practitioners. The GFCCC medical staff will document its efforts to provide SAFE or SANE. There have been no forensic medical exams conducted during the past 12 months. The auditor interviewed a random sample of staff to confirm they understand their responsibilities to preserve and protect evidence.

115.21 (d) Make victim advocate available
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 and reviewed the MOU with the Community Violence

	Intervention Center (CVIC) to verify the availability of advocacy services. The Captain/PREA Coordinator confirmed they have a MOU with Community Violence Intervention Center (CVIC) to provide advocates, resources, and referrals, and the auditor confirmed this by reviewing the MOU and discussing with the Community Violence Intervention Center (CVIC) staff. The program's number is a free call for inmates. The auditor also verified through viewing posters while on the facility tour, through a review of inmate training materials, and through random inmate interviews that the contact information for Community Violence Intervention Center (CVIC) is available to all inmates. The auditor verified it was a free call by calling the Community Violence Intervention Center (CVIC) from an inmate phone. **115.21 (e) Victim advocate accompanies to forensic exam, interviews, emotional support etc.** **Compliance Determination:** The auditor interviewed an advocate from the Community Violence Intervention Center (CVIC) who confirmed that they have an MOU with the facility and that they would provide the inmate with advocacy that included emotional support services either over the phone or in person, accompanying them to the hospital for support during a forensic exam, support during investigative interviews, and through the court process. **115.21 (f) Request investigating agency follow provisions (a)-(e)** **Compliance Determination:** The auditor interviewed the Captain/PREA Coordinator/ PREA Coordinator who stated that they will follow and request any external investigating agency follow uniform evidence protocol, offer victims forensic medical examinations free of charge, make a victim advocate available that can accompany the inmate during the forensic exam, in interviews and provide emotional support services. **115.21 (g) Provisions (a)-(e) apply to State and DOJ investigators** **Compliance Determination:** The auditor interviewed the Captain/PREA Coordinator who stated that they and any other investigatory entity would always be required to protect and collect the evidence, offer a SANE forensic examination, and provide an advocate. **115.21 (h) Qualified agency staff member screened and educated to advocate** **Compliance Determination:** The auditor reviewed the policy, which states that if or when a rape crisis center is not available to provide victim advocate services, the facility provides a qualified agency staff member, or qualified community-based organization staff member. The auditor interviewed the Captain/PREA Coordinator, who stated that the advocate is typically provided by the local rape crisis center. All staff consistently stated that they would use the Community Violence Intervention Center (CVIC) for advocacy services. The auditor determined compliance through a review of the pre-audit questionnaire, a review of policy, and the documentation as stated in each provision above. The auditor also drew on interviews with the PREA Coordinator, the local rape crisis center, and interviews with random staff.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Administrative Investigation Reports 4. Grand Forks County Correctional Center website **Interviews Conducted:** 1. Sheriff 2. Captain/PREA Coordinator 3. Administrative Investigator **Findings by Provision:** **115.22 (a) Administrative or criminal investigation completed for all allegations** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states that the GFCCC wiill ensure an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. The auditor interviewed the Sheriff and the Captain/PREA Coordinator, who both confirmed that investigations would always be completed and outlined the process for both referrals for investigations and starting the investigative process. **115.22 (b) Policy to ensure all allegations are referred for investigation on website** **Compliance Determination:** The auditor reviewed the GFCCC website at https-://www.gfcounty.nd.gov/government/adult-corrections/prea which has the Policy C.18 Prison Rape Elimination Act of 2003 in its entirety to include the section with the requirement to refer all allegations for investigation, that the Grand Forks County Correctional Center is responsible for administrative investigations and the Grand Forks County Sheriff's Office or the North Dakota Bureau of Criminal Investigation (BCI) are responsible for conducting criminal investigations, and outlines the investigative procedures. **115.22 (c) Investigation policy describes responsibilities for conducting criminal investigation** **Compliance Determination:** The auditor verified through policy and through interviews with the Captain/PREA Coordinator that an administrative or criminal investigation is completed for all allegations of sexual violence, sexual misconduct, sexual harassment, or retaliation. The Captain/PREA Coordinator will determine when the evidence is sufficient for criminal prosecution and will refer appropriate incidents to the Grand Forks County Sheriff's Office, and these referrals will be documented. The auditor reviewed reported allegations and interviewed the Sheriff, the Captain/PREA Coordinator, and an administrative investigator who corroborated compliance with the standard and the facility's policies.

	115.22 (d) Any State entity responsible for investigation shall have a policy governing conduct **Compliance Determination:** Any investigations will be conducted either by an administrative investigator within the facility or by a criminal investigator from the Sheriff's department or BCI. The auditor determined compliance through a review of the pre-audit questionnaire, a review of the PREA policy, a review of investigative reports, and through interviews with the Sheriff, the Captain/PREA Coordinator, and an administrative investigator.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. PREA Employee training curriculum 4. Staff training records **Interviews Conducted:** 1. Captain/PREA Coordinator 2. 12 random staff **Findings by Provision:** **115.31 (a) Train all employees** **Compliance Determination:** The auditor reviewed the Policy C.18 Prison Rape Elimination Act of 2003 which states that the GFCCC trains all employees during orientation prior to independent inmate contact and every two yers thereafter on the 10 components listed in the standard. The auditor reviewed the curriculum and interviewed a random sample of twelve staff, which included both veteran and newly hired staff. All staff interviewed knew the required components regarding PREA as well as the current sexual abuse and sexual harassment policies and procedures. **115.31 (b) PREA Training tailored to gender of inmates** **Compliance Determination:** The auditor reviewed the training policy, which states that the PREA training will be tailored to the gender of the inmates. Staff were able to state during the interviews the differences in supervising male vs. female inmates. Several staff stated that many of the male inmates' motivations are about power and control, dominance and scare tactics while female inmates' motivations were more about relationships and manipulation to get what they want. **115.31 (c) PREA Refresher training every two years and on policy in year when no refresher** **Compliance Determination:** The auditor interviewed the Captain/PREA Coordinator

who stated that they have a comprehensive PREA orientation for all newly hired employees, and a refresher every year which includes training on Corrections One. Interviews with staff also confirmed that they have initial PREA training when they are hired. They are provided with some type of training annually on different subjects, but always a policy review and a PREA refresher. Training includes a refresher, a video, or a module on a specific subject. During interviews, staff were knowledgeable in the required competencies and stated that they have some form of PREA training every year that includes a basic refresher on the main PREA components with additional training components added occasionally on their e-learning about more narrow topics. Many staff also mentioned that when they attend the Correctional Officer Basic course they also cover PREA and cross-gender pat searches.

115.31 (d) Document all staff training
Compliance Determination: The auditor interviewed the Captain/PREA Coordinator, and random staff and reviewed the training documentation. Some are electronic training records for courses they completed through software and some documentations are signed documents which included the name of the employee, the title of the training, the orientation training documentation for new employees, and the date the training was completed.

The auditor determined compliance with this standard through a review of the training policy, a review of the pre-audit questionnaire, a review of the curriculum, and a review of training records. The auditor also confirmed these policies and procedures through interviews with the Captain/PREA Coordinator, and randomly selected staff.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Contractor/Volunteer training documentation **Interviews Conducted:** 1. Captain/PREA Coordinator 2. PREA Coordinator 3. 3 Contractors 4. 1 Volunteer **Findings by Provision:** **115.32 (a) PREA Training for all volunteers and contractors** **Compliance Determination:** The auditor reviewed the PREA policy, which states that GFCCC will ensure all volunteers and contractors who have contact with inmates

	will be trained on their responsibilities regarding GFCCC's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The auditor interviewed three contractors and one volunteer currently in service at the facility. During the interview, they confirmed that they had completed the training which included going over the PREA information to include a PREA presentation packet and video. **115.32 (b) Level and type of training based on level of service and contact** **Compliance Determination:** The auditor spoke with the Captain/PREA Coordinator who stated that the level and type of training is based on the services they provide and the level of contact they have with inmates, but all are taught at a minimum about the zero-tolerance policy regarding sexual abuse, sexual assault/rape, sexual misconduct and sexual harassment and informed how to report such incidents. **115.32 (c) Document all volunteer and contractor training** **Compliance Determination:** The auditor reviewed documentation confirming contractor and volunteer training. The documentation included a signature sheet acknowledging that they received the volunteer training and watched the PREA video and acknowledge Grand Forks County Correctional Center's zero-tolerance policy. The auditor determined compliance with this standard through a review of the training policy, a review of the pre-audit questionnaire, a review of the curriculum, and a review of training records. The auditor also confirmed these policies and procedures through interviews with the Captain/PREA Coordinator, the PREA Coordinator, contractors and a volunteer.

115.33	**Inmate education**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Posters posted throughout the facility 4. 19 Initial PREA Orientation Information forms signed by inmates 5. 28 Comprehensive PREA Inmate Education Acknowledgement forms signed by inmates **Interviews Conducted:** 1. Captain/PREA Coordinator 2. Intake Staff 3. 15 random inmates 4. 6 targeted inmates **Findings by Provision:**

115.33 (a) Inmates receive PREA training at intake

Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states that a GFCCC inmate/detainee who is deemed unstable by the shift supervisor because of level of intoxication/detoxification, combative behavior, suicidal status, or display of significant degree of mental illness, such as psychosis will be placed in a holding cell, where the inmate may be under an intense level of observation consisting of frequent staff checks and video surveillance camera monitoring. The intake/booking process will occur upon stabilization of the inmate. During the booking process, upon reasonable stabilization, inmates/detainees shall receive information explaining GFCCC's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Prior to being placed in general population and after completion of the PREA Intake and Initial Assessment (the vulnerability/aggression screening tool), the inmate is issued the Inmate PREA Brochure and the Inmate Handbook. The auditor reviewed training information provided to the inmates, had a staff who conducts intakes go over the process, and discussed the information presented during intake with the inmates who were interviewed. During booking the staff inform them that there is a zero tolerance policy and that they can report verbally to any staff, use an inmate request form, use an inmate grievance form, or through a third party report (contractor, volunteer, family member, attorney), or to the Grand Forks Sheriff's Department as their external reporting agency. The facility recently underwent a reorganization and now the facility is under the direction of the Sheriff. Therefore, the Grand Forks Sheriff's Department is no longer an external reporting agency. The Captain/PREA Coordinator stated that all of their inmate training documents will be changed to reflect that the new external reporting agency will be the Grand Forks Police Department. The intake staff providing the education points out the items discussed on the sheet and then the inmate signs the acknowledgement form and the staff who completed their orientation signs the form. Everyone that comes into the facility completes the same, full, PREA intake process regardless of where they came from – even if they just had PREA information at their previous placement. The inmates' education was evident in the inmates' responses during the interviews. The auditor reviewed in initial education documents signed by the inmates. Of those four were over 72 hours. Those four were completed within 96 hours because the inmate was not stabilized enough to receive the intake PREA education. The inmates were housed individually within a holding cell and were under a more intense level of observation during this time.

115.33 (b) Within 30 days of intake provide comprehensive education

Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states that within 30 days of the intake/booking, facility staff will provide comprehensive education to all inmates/detainees by showing the video, 'PREA: What You Need to Know', in either group or individual sessions. The comprehensive education will explain the following: GFCCC's zero tolerance policy regarding sexual abuse and sexual harassment; Their right to be free from sexual abuse or sexual harassment; How to report incidents or suspicions of sexual abuse or sexual harassment; Their right to be free from retaliation; The agency's policies and procedures for responding to such incidents. An Inmate Orientation PREA Information

fact sheet is provided to each inmate in the inmate's property box, with information on definitions and reporting methods. The auditor interviewed staff that complete the comprehensive education process. Inmates watch the video with comprehensive PREA education while in holding prior to being placed in their housing unit. The Supervisor and the PREA Coordinator verifies the education documentation was completed and that the inmate has signed Inmate Education Acknowledgement form that they received the PREA comprehensive training. The auditor interviewed inmates who confirmed they watched the video.

115.33 (c) Receive education upon transfer to extent policies and procedures differ

Compliance Determination: The auditor interviewed the administrators and random inmates who confirmed that everyone that comes into the facility completes the same, full, PREA intake process and comprehensive education process regardless of where they came from – even if they just had PREA information at their previous placement.

115.33 (d) Inmate training in formats accessible to all, including LEP, and those with disabilities

Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states inmate PREA education is available in accessible formats for all inmates including those who are limited English proficient, deaf, hearing impaired, visually impaired or otherwise disabled or limited in their reading skills. The facility's efforts include posters in Spanish and various ways of presenting the orientation material dependent upon the disability. The facility will provide translation services for inmates who need either the information in other languages or sign language. The information will be communicated orally and in written form in a manner that is clearly understood by the inmate, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled as well as inmates who have limited reading skills. The auditor interviewed three inmates with disabilities and two inmates who are Limited English Proficient. These inmates verified through their interviews that the information was presented either orally to them by staff, through video in their native language, or through written materials in their native language. These inmates confirmed that the staff made the information available to them in a way that they understood and confirmed that they were aware that services are available to them at any time. Staff stated they will read the material aloud to inmates who may need assistance due to visual impairments, learning disabilities, literacy or comprehension problems, or other reasons that require staff to give them specialized training.

115.33 (e) Document all inmate education

Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states the GFCCC shall maintain documentation of inmate participation in these education sessions. The auditor interviewed intake staff and reviewed inmate training documentation. The orientation information and the comprehensive information is explained to them, they are allowed to keep copies of the materials, and the inmate signs that they received and understood the information presented to them.

	115.33 (f) Key information continuously and readily available **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states that GFCCC ensures key information is continuously and readily available or visible to inmates through posters, Inmate Handbooks, and the Inmate PREA Brochure. The auditor interviewed the staff and the inmates and was advised that the inmate is offered to keep a copy of the PREA information provided to them. There are also posters throughout the facility so that there is readily available information that outlines how to report and how to contact external resources for both support and reporting. The auditor verified compliance with this standard through a review of the inmate training information and signed inmate training documentation. The auditor also confirmed these policies and procedures through interviews with the Captain/PREA Coordinator, intake staff, and random and targeted inmate interviews.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Training certificates of Specialized Investigator Training **Interviews Conducted:** 1. Captain/PREA Coordinator 2. Administrative Investigator **Findings by Provision:** **115.34 (a) Specialized training for Administrative investigators** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states that in addition to the general training provided to all employees pursuant to § 115.31, GFCCC shall ensure that, to the extent GFCCC itself conducts sexual abuse investigations, its PREA Investigators who investigate allegations of sexual abuse are trained in conducting sexual abuse investigations in confinement settings. This includes: Department of Justice approved PREA investigator training. Techniques for interviewing sexual abuse victims; and proper use of Miranda and Garrity Warnings; Sexual abuse evidence collection in confinement settings; and Criteria and evidence required to substantiate a case for administrative action or for prosecution referral. The auditor interviewed the Captain/ PREA Coordinator who stated that there are fourteen trained administrative investigators for the facility. The auditor interviewed the Correctional Lieutenant who is an administrative investigator. He is knowledgeable in investigative techniques in a confinement setting and the relevant requirements in this standard.

	115.34 (b) Investigator training includes Miranda and Garrity, evidence collection, etc. **Compliance Determination:** The auditor reviewed the training curriculum and interviewed a criminal and an administrative investigator to confirm that the training contains the required components. **115.34 (c) Document specialized investigator training** **Compliance Determination:** The auditor reviewed training certificates for investigators to confirm that they documented the required training. Investigators have received training certificates from the North Dakota Department of Corrections and Rehabilitation course PREA Investigator Training and certificates from the National Institution of Corrections course Investigating Sexual Abuse in a Confinement Setting. **115.34 (d) State or DOJ investigators specialized training** **Compliance Determination:** The auditor interviewed the Captain/PREA Coordinator who stated that if an outside state or DOJ investigator is brought in to investigate, Grand Forks County Correctional Center will ensure that all investigators have received training and experience in sexual abuse investigations. The auditor verified compliance with this standard through a review of the investigator training information and training certificates. The auditor also confirmed these policies and procedures through interviews with the Captain/PREA Coordinator and an administrative investigator.

115.35	**Specialized training: Medical and mental health care**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Training certificates from the National Institute of Corrections **Interviews Conducted:** 1. Captain/PREA Coordinator 2. Nurse **Findings by Provision:** **115.35 (a) Specialized training for medical and mental health staff** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC will ensure that all full- and part-time medical and mental health care practitioners who work regularly in the facility have been trained in: 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. The auditor interviewed the Captain/PREA Coordinator who stated that they have three contracted medical staff. The auditor interviewed a contracted nurse who stated that they have completed specialized training to include the National Institute of Corrections course PREA 201 for Medical and Mental Health Practitioners. She was well versed in how to preserve physical evidence; how to detect and assess signs of sexual abuse and sexual harassment; 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. **115.35 (b) Medical and mental health staff who conduct forensic examinations receive appropriate training** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states forensic exams will be conducted at Altru Health System (Grand Forks). The auditor interviewed the medical staff, who stated that all inmates who report a sexual assault are transported to the local hospital with SANE services. **115.35 (c) Document specialized training for medical and mental health staff** **Compliance Determination:** The auditor reviewed training certificates for the contracted medical staff to confirm that there is documentation of the required specialized training. **115.35 (d) Medical and mental health staff also receive training mandated for employees** **Compliance Determination:** The auditor reviewed training documentation to verify the contracted staff participate in basic PREA instruction as mandated for employees of this facility.

115.41	**Screening for risk of victimization and abusiveness**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Random sample of 28 initial PREA Risk Assessments 4. Random sample of 28 30-day PREA Risk Assessments **Interviews Conducted:** 1. Captain/PREA Coordinator 3. 15 random inmates

4. Staff member who administers the risk assessment

Findings by Provision:
115.41 (a) All inmates assessed during intake
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states that all inmates/detainees shall be assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. The auditor also interviewed a staff member who walked the auditor through the screening process. The auditor interviewed a random sample of inmates who stated that they were all assessed upon intake. The auditor reviewed a random sample of the Intake PREA Risk Assessment documentation.

115.41 (b) Intake screening within 72 hours of arrival
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states during the booking process, which is usually within 24 hours of intake into GFCCC, or upon reasonable stabilization, an inmate/ detainee will receive an initial assessment for risk of being sexually abused by other inmates or being sexually abusive toward other inmates, prior to placement in general population. Housing assignments are made accordingly. The auditor interviewed both staff and inmates and reviewed the screening documentation to verify that the screening occurs within 72 hours of arrival. The auditor compared the date of the inmates' intake with the date of the initial PREA Risk Assessment. All inmates were assessed within 72 hours, even if they were transferred from another facility, with the exception of four inmates that were completed within 96 hours because the inmates were not stabilized enough to receive the intake PREA assessment. The inmates were housed individually within a holding cell and were under a more intense level of observation during this time.

115.41 (c) Objective screening
Compliance Determination: The screening is completed through the use of an interview using the PREA Intake and Initial Assessment. The form includes all questions required of this standard. The assessment used is objective and leads to a presumptive determination of risk using a point system. An offender scores a specified point value based on the questions answered and other factors such as a record review of offense history or a substantiated sexual assault or sexual abuse investigation or a history of sexual victimization within a correctional setting. The score value determines the outcome of risk for Sexual Victimization or risk for Sexual Aggression. Screening questions 1 through 11 under the Vulnerability Factors section evaluate risk for sexual victimization and a score of 4 or more requires special housing considerations. Screening questions 1 through 4 under the Aggressive/ Predatory factors section evaluate risk for sexual perpetration and a score of 3 or more requires special housing considerations.

115.41 (d) Screening criteria for risk of sexual victimization
Compliance Determination: The auditor reviewed the PREA Intake and Initial Assessment. The assessment considers mental, physical, or developmental disabilities, age, physical build, if this is the first time incarcerated, if the inmate

identifies as lesbian, gay, bisexual, transgender, intersex, or gender non-conforming, if they have a history of sexual victimization either in the community or in custody, or if the inmate perceives to be at risk for sexual victimization. These answers are used in assessing inmates for risk of being sexually victimized. The auditor reviewed sample assessments. The screening considers the criteria to assess inmates for risk of sexual victimization as required by the standard. The auditor interviewed the staff who administers the assessment.

115.41 (e) Screening criteria for risk of being sexually abusive
Compliance Determination: The auditor reviewed the PREA Intake and Initial Assessment. The assessment considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, in assessing inmates for risk of being sexually abusive.

115.41 (f) Reassessment within 30 days of intake
Compliance Determination: The auditor interviewed both staff and inmates and reviewed a sample of the Re-Assessment form to verify that the screening occurs again within 30 days of arrival. The auditor compared the date of the inmates' intake with the date of the 30-day reassessments. All inmates within the sample were reassessed within 30 days of arrival.

115.41 (g) Reassessment when referred, requested, incident of sexual abuse or additional info
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states an inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

115.41 (h) Inmates not disciplined for refusing to answer regarding disabilities, LGBTI, previous sexual victimization, perception of vulnerability
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states that inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(i), (d)(vii), (d)(viii), or (d)(ix) of this section.

115.41 (I) Appropriate controls on dissemination of reassessment information
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states that GFCCC shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. The assessment is maintained within the inmate's file. The PREA Coordinator stated that the officer who completes the assessment forwards it to the supervisor to score and make the housing assignment. The supervisor then forwards it to the PREA Coordinator to review and maintain. She keeps the only paper copy in her office in a locked file cabinet.

The auditor verified compliance with this standard through a review of sample assessment and re-assessment documents, and interviews with staff and inmates.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Random sample of 28 initial PREA Risk Assessments 4. Inmate Roster **Interviews Conducted:** 1. Captain/PREA Coordinator 2. Staff who administers the Assessments 3. One targeted inmate interview **Findings by Provision:** **115.42 (a) Assessment info used for housing, bed, work, education, and program assignments** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states GFCCC will use information gathered in the GFCCC PREA Intake and Initial Assessment to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. The auditor interviewed the PREA Coordinator who stated the information from the risk screening is utilized to determine housing and other program decisions. The PREA Coordinator stated that they choose the most appropriate housing for their safety. The auditor reviewed inmate risk screenings and inmate housing assignments to ensure that inmates with the potential for sexual perpetration are not housed with inmates assessed to have the potential to be victimized. **115.42 (b) Individualized determinations** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003that states using all available information, the facility staff shall make individualized determinations about how to ensure the safety of each inmate. The auditor interviewed the Captain/PREA Coordinator who stated that the screening helps to ensure the decisions are based on what will keep them safe. They determine this through the screening when they arrive and their criminal history. She stated that they ask all inmates if they fear for the safety, not just from sexual abuse but from physical harm, and the answer is noted on the Risk Assessment. She stated that they look at everyone’s placement, both the inmate being interviewed and the safety of all the other inmates. **115.42 (c) Case-by-case basis on a transgender or intersex inmate’s housing and programming assignments** **Compliance Determination:** The auditor reviewed the Policy C.18 Prison Rape Elimination Act of 2003 which states when making housing and programming assignments for transgender or intersex inmates, GFCCC shall consider, on a case-by-

case basis, whether a placement would ensure the inmate's health and safety and whether the placement would present management or security problems. This was confirmed through interviews with the Captain/PREA Coordinator. There were no inmates who identified as transgender, or intersex housed in the facility while the auditor was onsite.

115.42 (d) Transgender or intersex inmates reassessed at least twice each year

Compliance Determination: The auditor reviewed the Policy C.18 Prison Rape Elimination Act of 2003 which states placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate. The Administrator (PREA coordinator) will complete the reassessments using a Transgender and Intersex Inmate Housing and Program Placement Reassessment form. The form will be maintained in the inmate file.

115.42 (e)Transgender or intersex inmate's own views given serious consideration

Compliance Determination: The auditor reviewed the Policy C.18 Prison Rape Elimination Act of 2003 which states a transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration. Both the policy and the interviews with the Captain/PREA Coordinator confirmed that a transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration.

1**15.42 (f) Transgender or intersex inmates opportunity to shower separately**

Compliance Determination: The auditor reviewed the Policy C.18 Prison Rape Elimination Act of 2003 which states transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. Inmates who identify themselves as transgender or intersex during the Intake Screening will be advised they can request the opportunity to shower separately from other inmates. The Captain/PREA Coordinator stated that all of the housing units have individual shower units. The auditor confirmed this while on the tour.

1**15.42 (g) LGBTI inmates not placed in dedicated facilities, units, or wings on such identification**

Compliance Determination: The auditor reviewed the Policy C.18 Prison Rape Elimination Act of 2003 which the agency GFCCC shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates. The auditor interviewed the Captain/PREA Coordinator who stated they do not have units designated or dedicated for housing inmates who identify as LGBTI. An inmate's LGBTI status is not criteria for the housing decision unless it is as an overall part of the point criteria in the assessment that signifies their vulnerability. Inmates who are identified as being more vulnerable during the assessment would not be housed with

	inmates who have the potential to perpetrate sexual abuse and may be placed in a housing unit where the more vulnerable population is housed. The auditor conducted one targeted interview in which the inmate confirmed that LGBTI status was not a criteria for his housing placement. The auditor determined compliance through a review of the pre-audit questionnaire, a review of the PREA Policy, a review of screening documents and evaluating the inmate roster with housing assignments and through interviews with the Captain/ PREA Coordinator, the PREA Coordinator, and the staff who administers the assessment.

115.43	**Protective Custody**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 **Interviews Conducted:** 1. Captain/PREA Coordinator **Findings by Provision:** **115.43 (a) Inmates at risk not placed in involuntary segregate housing unless no available means of separation** **Compliance Determination:** The auditor reviewed the Policy C.18 Prison Rape Elimination Act of 2003 which states inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If assessment can’t be completed immediately, the inmate may be held in involuntary segregated housing for less than 24 hours while assigned staff completes the assessment. **115.43 (b) Inmates segregated for this purpose have access to programs, privileges, education and work opportunities if possible** **Compliance Determination:** The auditor reviewed the Policy C.18 Prison Rape Elimination Act of 2003 which states inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities are restricted, GFCCC staff shall document: The opportunities that have been limited; The duration of the limitation; and The reasons for such limitations. **115.43 (c) Involuntary segregated housing only until an alternative means of separation can be arranged and to exceed 30 days** **Compliance Determination:** The auditor reviewed the Policy C.18 Prison Rape

	Elimination Act of 2003 which states inmates will only be assigned to involuntary segregated housing until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. Every effort shall be made to keep the victim in the victim's normal housing unit to prevent re-traumatization. **115.43 (d) If involuntary segregated housing made pursuant to provision (a), document the basis and the reason why no alternative means can be arranged** **Compliance Determination:** The auditor reviewed the Policy C.18 Prison Rape Elimination Act of 2003 which states if an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, staff shall clearly document: The basis for the concern for the inmate's safety; and The reason why no alternative means of separation can be arranged. The auditor interviewed the Captain/PREA Coordinator who confirmed that inmates at high risk for sexual victimization are not placed into protective custody unless the inmate cannot be protected by any other means. A review of status for protective custody would be completed at a minimum of every 30 days. They have not placed any alleged inmate victims of sexual abuse or sexual harassment in involuntary segregated housing.

115.51	**Inmate reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Posters 4. Staff training documents 5. Inmate training documents **Interviews Conducted:** 1. Captain/PREA Coordinator 2. 12 random staff 3. 15 random inmates **Findings by Provision:** **115.51 (a) Multiple internal ways to report** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC provides multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Inmates

can report in the following ways: Verbal reporting to any staff member; Third party reporting; Inmate request forms; Inmate grievance forms; or Medical complaint forms. The auditor reviewed various documents, including policy, handbooks, training materials, and posters, and interviewed inmates who confirmed that inmates can make verbal reports to any staff member. Staff will document the verbal report immediately on an incident report and forward it to the PREA Compliance Manager or the PREA Coordinator. They can make reports in writing, either through an electronic request or a grievance. The auditor requested an inmate to walk through the kiosk system to show what was available to them and to test the kiosk as a means of reporting to staff. Several stated that they would tell a staff member within the facility whom they trust. Both from observations and through interviews with the inmates, it is apparent that most inmates have a staff at the facility that they trust to do the right thing for them and have multiple internal ways to report.

115.51 (b) At least one way to report to an external entity
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC allows for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the GFCCC in the following ways: Grand Forks Police Department: (701) 787-8000; Grand Forks County Sheriff’s Office: (701) 780-8280; Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security. DHS OIG Hotline: (800) 323-8603. This information is available to inmates on posters and on the kiosk and is provided to inmates during the orientation process. The auditor interviewed inmates, and several stated that they were aware that there were numbers on their posters that they could call agencies outside of the facility to make a report. The auditor attempted to test calls from an inmate's phone to the Grand Forks County Police, the Grand Forks County Sheriff’s Department, and the Office of the Inspector General. The auditor used the generic account 54321 and the generic PIN 1234 to place a free, unmonitored call to these agencies. The system did not connect the calls, as it stated either that the call was not authorized or that they needed to contact customer service to add credits to the account. In addition, since the organizational restructuring, the Grand Forks County Sheriff’s Office is no longer an agency external to this jail, as both are administered by the Sheriff.

115.51 (c) Staff accept reports made
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. The auditor interviewed random staff who confirmed this procedure and reviewed investigative reports that included various ways that reports were submitted to staff and documented by staff.

115.51 (d) Method for staff to privately report
Compliance Determination: The auditor reviewed policy, which states that any employee, agency representative, volunteer, or contractor who becomes aware of an incident of sexual abuse, sexual harassment, or retaliation against inmates or staff shall immediately notify a supervisor, who will forward the matter to a sexual abuse

investigator. Staff may also privately report sexual abuse and sexual harassment of inmates to a supervisor, the PREA Coordinator, or the Correctional Captain. The auditor interviewed staff who consistently stated that they would report to jail administrators, including any lieutenant, the captain, or the sheriff.

CORRECTIVE ACTIONS: The auditor required that the Grand Forks County Sheriff's Office be removed from any materials listing them as an external reporting entity. Now that the jail is under the authority of the Sheriff, that agency is no longer an external reporting entity. The auditor required that modifications be made to the phone system to allow inmates to make free, unmonitored calls to their external reporting entities. The facility entered into a Memorandum of Understanding with the Grand Forks Regional Youth Assessment Center (GFYAC) to provide an agency external to the GFCCC in which inmates can report sexual abuse or sexual harassment. GFCCC corrected their materials to reflect the change to the GFYAC. This number now appears on posters, in the inmate PREA information provided at booking, in the inmate handbook, and on the kiosk. The company that provides their inmate phone service corrected the previous connection issue, and now all phone numbers to the Grand Forks Police Department, the Office of the Inspector General, and the GFYAC are set within the system so that if an inmate uses the generic account 54321 and the generic PIN 1234, it will place a free, unmonitored call to these agencies.

115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed:
1. Pre-Audit Questionnaire
2. Policy C.18 Prison Rape Elimination Act of 2003
3. Inmate training materials

Interviews Conducted:
1. Captain/PREA Coordinator

Findings by Provision:
115.52 (a) Exempt if no administrative procedures to address sexual abuse grievances
Compliance Determination: The auditor interviewed the Captain/PREA Coordinator and reviewed the PREA policy, which confirms that the grievance procedure may be used to address sexual abuse grievances. Inmates are educated on multiple ways in which to report complaints/allegations of sexual violence, which includes the grievance process.

115.52 (b) No time limit; do not have to attempt informal resolution; does not restrict agency's ability to defend against inmate lawsuit on grounds statute of limitations has expired

Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states there is no time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. Inmates are not required to use an informal grievance process or to otherwise attempt to resolve with staff an alleged incident of sexual abuse.

115.52 (c) Not submit to staff who is subject of complaint; not referred to staff who subject of complaint
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC ensures 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, and such grievance is not referred to a staff member who is the subject of the complaint.

115.52 (d) Final agency decision within 90 days of initial filing of the grievance
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states the GFCCC Administrator or designee will issue a final 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 shall not include time consumed by inmates in preparing any administrative appeal. The GFCCC Administrator or designee may claim an extension of time to respond, up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The investigating officer shall notify the inmate, in writing, of any such extension and provide a date by which a decision will be made. At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.

115.52 (e) Third parties permitted to assist in filing grievance alleging sexual abuse or filing on behalf
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. If a third party files a request on behalf of an inmate, the alleged victim must agree to have the request filed on his or her behalf. The alleged victim must also agree to personally pursue any subsequent steps in the administrative remedy process. If the inmate declines to have the request processed on their behalf, the investigator shall document the inmate’s decision and verify by inmate signature.

115.52 (f) Procedures for filing an emergency grievance
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states an inmate may file an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. Once received, staff shall immediately forward the grievance (or any portion thereof

that alleges the substantial risk of imminent sexual abuse) to the Administrator, or designee, for which immediate corrective action may be taken. The Administrator, or designee, will provide an initial response within 48 hours. The Administrator, or designee, will issue a final decision within five calendar days. The initial response and final decision will document GFCCC's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. After an agency's decision is made, a copy of the emergency grievance and all responses will be forwarded to the PREA Coordinator.

115.52 (g) May discipline only if demonstrates the inmate filed in bad faith
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states an inmate may be disciplined for filing a grievance related to alleged sexual abuse only when there is determination the inmate filed the grievance in bad faith.

The auditor determined compliance with this standard through an interview with the Captain/PREA Coordinator, through reviews of the PREA policy, and a review of other inmate education materials. All information confirmed that all allegations of sexual abuse or sexual harassment when received by staff through the grievance process would immediately result in an administrative or criminal investigation as well as being processed through the grievance process. There were no allegations reported using the written grievance system. Most allegations were reported via a PREA report on the Homewav kiosk system.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Inmate training materials 4. Posters on access to support services 5. MOU with Community Violence Intervention Center (CVIC) **Interviews Conducted:** 1. Captain/PREA Coordinator 2. 15 random inmates 3. Community Violence Intervention Center (CVIC) **Findings by Provision:** **115.53 (a) Access to outside victim advocates for emotional support** **Compliance Determination:** The auditor reviewed the Policy C.18 Prison Rape Elimination Act of 2003 which states inmates are provided with access to outside victim advocates for emotional support services related to sexual abuse through

mailing addresses and telephone numbers, including toll-free hotline numbers to the organizations listed below. Community Violence Intervention Center – Office Line (701)746-0405 or 24-hour Crisis Line (701) 746-8900 Write to: Just Detention International, 3325 Wilshire Blvd., Suite 340, Los Angeles, CA 90010. National Sexual Abuse Hotline – 1-800-656-4673 (toll-free, non-recorded line). The auditor reviewed the inmate training information and noted posters throughout the facility that had the Community Violence Intervention Center (CVIC) contact information. The auditor also interviewed a random sample of inmates to verify that they are aware of the availability of emotional support services from Community Violence Intervention Center (CVIC). Several of the inmates stated that CVIC comes into the facility every other week and meets with inmates. The auditor interviewed the Captain/PREA Coordinator and a random sample of inmates. Both staff and inmates stated that inmates have access to phones within the facility to place a free call to the Community Violence Intervention Center (CVIC). The auditor performed a test call from the facility and reached the Community Violence Intervention Center (CVIC) and spoke with a staff member who verified the services would be provided to inmates at the jail.

115.53 (b) Inform inmates extent that communications are monitored and when forwarded to authorities due to mandatory reporting laws
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall inform inmates, prior to giving them access to outside victim advocates, 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. The auditor used a generic account number of 54321 and a generic PIN of 1234 to make this call to verify that inmates are not charged for the call and that the call is not recorded. There was an announcement at the beginning of the call that stated, “This call will not be monitored or recorded”. The auditor also interviewed a random sample of inmates to verify that they are aware that the phone to the Community Violence Intervention Center (CVIC) is not recorded, and their communication with the Community Violence Intervention Center (CVIC) is confidential unless they sign a release or if it needs to be reported due to mandatory reporting laws such as child abuse. Inmates consistently stated during the interviews that they were aware of this.

115.53 (c) MOU with community providers of emotional support services
Compliance Determination: The auditor reviewed the MOU that the Grand Forks County Correctional Center entered into with the Community Violence Intervention Center (CVIC). The MOU outlines the services to provide an advocate, provide accompaniment and support through the forensic medical examination process and investigatory interviews, emotional support, crisis intervention, information, and referrals. The auditor spoke with a staff member at Community Violence Intervention Center (CVIC) who verified that they have an MOU with the facility and that they would provide services to any inmate who requested them.

The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, the inmate PREA information, the posters throughout the facility, the MOU with the Community Violence Intervention Center (CVIC), and

	through interviews with the Captain/PREA Coordinator, a staff with the Community Violence Intervention Center (CVIC), and a random sample of inmates.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Grand Forks County website **Interviews Conducted:** 1. Captain/PREA Coordinator **Findings by Provision:** **115.54 Establish method to receive third-party reports – reporting info on website** **Compliance Determination:** The auditor reviewed the Grand Forks County website at https://www.gfcounty.nd.gov/government/adult-corrections/prea. The website states, “If you have knowledge about an inmate who may have experienced sexual abuse, or sexual harassment at any time while incarcerated at the Grand Forks County Correctional Center, please make a third-party report. Simply write, call, or email the GFCCC Administrator or PREA Coordinator at the address or phone number listed below. You may assist a GFCCC inmate in filing a grievance regarding sexual abuse or sexual harassment upon the inmate’s request.” Then has links to email the Sheriff or the PREA Coordinator and also lists their mailing addresses and phone numbers. The auditor determined compliance through a review of the pre-audit questionnaire, a review of the PREA policy, a review of the website, and through an interview with the Captain/PREA Coordinator.

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 **Interviews Conducted:**

1. Captain/PREA Coordinator
2. 12 random staff

Findings by Provision:
115.61 (a) All staff to report immediately
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states all GFCCC staff are required to report immediately 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 GFCCC; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Staff, volunteers, and contractors shall accept reports of sexual abuse and sexual harassment made: verbally, in writing, anonymously, and from third parties. Staff, volunteers, and contractors shall immediately notify the shift supervisor of any verbal report of sexual abuse or sexual harassment against inmates or staff. Documentation of inmate verbal reports will be completed and turned in to the shift supervisor by the end of shift. All GFCCC employees, volunteers, and contractors shall immediately report any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation. GFCCC employees, volunteers, or contractors may privately report sexual abuse and sexual harassment of inmates to their supervisor or any other facility supervisor. The auditor interviewed the Captain/PREA Coordinator and random staff who consistently stated that staff are required to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment. When an allegation of sexual abuse or sexual harassment is reported, the allegation is immediately turned over to the shift supervisor who notifies the PREA Coordinator unless staff wish to privately report to another supervisor due the nature of the allegation. The Captain/ PREA Coordinator ensures that all allegations are assigned an administrative investigator, and if criminal, the allegation is reported to the Grand Forks County Sheriff's Office.

115.61 (b) Staff shall not reveal info to anyone other than designated supervisors or officials
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states apart from reporting to designated supervisors or officials, GFCCC staff, volunteers, and contractors may not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. Staff interviews confirmed that the information must be kept confidential and not shared with other coworkers or inmates.

115.61 (c) Medical and mental health providers required to report and inform inmates of their duty to report and their limits to confidentiality at initiation of services
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states unless otherwise precluded by federal, state, or local law, GFCCC medical, mental health, and behavioral health practitioners shall report sexual abuse and inform inmates of the practitioner's duty to report, and the

	limitations of confidentiality, at the initiation of services. The auditor interviewed the nurse, who stated that they inform inmates that they must report any sexual abuse to the Captain/PREA Coordinator. **115.61 (d) Report to designated agency when under 18 or vulnerable adult** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states if the alleged victim is considered a vulnerable adult under a state or local vulnerable persons' statute, GFCCC shall report the allegation to the ND Department of Human Services under applicable mandatory reporting laws. The auditor verified during interviews with random staff that they understand they are mandatory reporters and must report to law enforcement and DHS. Even though Corrections Officers are not specifically listed in the North Dakota mandatory reporter laws, the facility requires by policy to report it. The medical staff are aware of their responsibility as mandatory reporters. The auditor interviewed the Captain/PREA Coordinator, the nurse, and random staff who stated that sexual abuse of a vulnerable adult will be reported to law enforcement and DHS. Many staff stated that they would report it to their supervisor, and the administrators would make the mandatory reporter notification, but they were aware that they could report it directly if they felt that was needed. The auditor also reviewed the North Dakota Mandatory Reporting laws. **115.61 (e) Report all allegations to facility's investigators** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states the PREA Coordinator, Administrator, or designee, shall assign an investigator for all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports. The auditor interviewed the Captain/PRA Coordinator who is a trained administrative investigator and confirmed that she initiates the investigative process by assigning an investigator right away. The facility has fourteen trained administrative investigators. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, a review of the North Dakota mandatory reporting laws, and through interviews with the administrative staff, and an auditor's selection of random staff.

115.62	**Agency protection duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 **Interviews Conducted:**

	1. Sheriff 2. Captain/PREA Coordinator 3. 12 random staff **Findings by Provision:** **115.62 Immediate action to protect inmate when risk of imminent sexual abuse** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003 which states when facility staff learns an inmate is subject to a substantial risk of imminent sexual abuse, staff shall take immediate action to protect the inmate. The auditor interviewed a random sample of staff who stated that they will immediately separate the inmate from the threat to keep them safe. The auditor interviewed the Sheriff who stated that he expects staff to immediately separate and then report it so that it can be investigated. The auditor interviewed the Captain/PREA Coordinator who stated that she expects staff to do something to keep the inmate safe – keep the inmate with staff, move the inmate who is making the threat, or if unknown, move the inmate who feels threatened. There have been no reported incidents in which staff needed to take immediate action to protect an inmate from imminent sexual abuse. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, and through interviews with the Sheriff, the Captain/PREA Coordinator, and staff randomly selected by the auditor.

115.63	**Reporting to other confinement facilities**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Notices made to other facilities **Interviews Conducted:** 1. Sheriff 2. Captain/PREA Coordinator **Findings by Provision:** **115.63 (a) Notify head of agency when receiving an allegation while confined at their facility** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states upon receiving an allegation that an inmate was sexually abused, or sexually harassed, while confined at another facility, the Administrator, or designee, shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. The auditor interviewed the Sheriff and

	the Captain/PREA Coordinator, who confirmed that the Sheriff or the Captain/PREA Coordinator notifies the head of the facility or the appropriate office of the agency where the alleged abuse occurred. If an allegation is received by them from another facility, an investigation will be initiated immediately. Both notifying other agencies and receiving notifications are documented. There have been no allegations of sexual abuse that the facility received from inmates reported by other facilities. There were six allegations reported to other facilities that were reported by inmates during the intake at Grand Forks County Correctional Center. The auditor reviewed the notifications that were made to these other facilities. **115.63 (b) Notification to head of agency within 72 hours** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The auditor interviewed the administrators and reviewed the notifications that confirm that the notification is made right away and definitely within 72-hours. **115.63 (c) Document notification** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall document that it has provided such notification. The auditor reviewed the notification documentation emails. **115.63 (d) The agency head or office that receives notification shall investigate** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that the facility Administrator or PREA Coordinator who receives such notification shall ensure that the allegation is investigated in accordance with this policy. The auditor interviewed the Sheriff and the Captain/PREA Coordinator, who stated that if there is an allegation that an inmate was sexually abused while confined at their facility, if the incident was not already investigated, it will be immediately referred for investigation. There were no incidents reported to the administrators by another facility. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, through interviews with the Sheriff and the Captain/PREA Coordinator, and by reviewing the notification emails to other facilities.

115.64	**Staff first responder duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003

	Interviews Conducted: 1. 12 random staff who are First Responders 2. Contracted non-security staff **Findings by Provision:** **115.64 (a) First responder duties** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states the first security staff member responding to an allegation of sexual abuse must separate the alleged victim from the alleged abuser; Notify the shift supervisor of the alleged incident; and preserve and protect any potential crime scene until appropriate steps can be taken to collect evidence. If the alleged abuse occurred within the past 120 hours, request that the alleged victim not take any action that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, eating, or drinking. Refrain from asking the alleged victim detailed questions about the incident. If the alleged abuse occurred within the past 120 hours, staff will 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, eating, or drinking. The auditor interviewed 12 randomly selected staff who all were able to identify the first responder duties as separate the alleged victim and abuser, preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; and request that the alleged victim and ensure the alleged perpetrator, not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating. Many of the staff also said they would determine if the situation required immediate involvement of law enforcement or medical personnel and notify the supervisor or the on-call supervisor. The auditor reviewed investigative files, and staff took appropriate steps for the situations in each reported allegation. They were quick to separate the inmates right away until they could gather more information. **115.64 (b) First responder not security staff request victim not destroy evidence and notify security staff** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states if the first receiver of the incident is not a security staff member, the receiver shall be required to request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff. The auditor interviewed two contracted non-security staff. Both stated that they are trained to immediately call for security staff, ensuring that the victim and the perpetrator are separated and to make sure to secure the area where the incident occurred, and to notify the shift supervisor or the administrative staff. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, a review of investigative files, and through interviews with a random selection of security staff and of non-security contractors.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Coordinated Response Plan **Interviews Conducted:** 1. Captain/PREA Coordinator **Findings by Provision:** **115.65 Written institutional plan to coordinate actions** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall use this procedure as a plan to coordinate actions taken in response to an incident of sexual abuse and sexual harassment, among staff first responders, medical, mental health, and behavioral health practitioners, investigators, and facility leadership. The policy then continues to outline the duties of the first responder, the shift supervisor, the PREA Coordinator, the facility leadership, the medical staff, and the PREA investigator. These duties include protection of the alleged victim, protection of evidence, contacting the Grand Forks County Sheriff's office, and arranging for a SANE forensic examination at Altru Health System. The auditor interviewed the Captain/PREA Coordinator who stated that they have a written plan, and it is taught in their PREA training. The Captain/ PREA Coordinator confirmed that all staff are aware of the need to make a victim services advocate from Community Violence Intervention Center (CVIC) available and coordinating with law enforcement to ensure that a forensic examination is conducted by a SANE at the hospital. All interviews corresponded to the Coordinated Response Plan within the PREA policy The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy to include the Coordinated Response Plan, and through an interview with the Captain/PREA Coordinator.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003

	Interviews Conducted: 1. Sheriff **Findings by Provision:** **115.66 (a) No collective bargaining or other agreements that limit ability to remove staff abuser; (b) Agreements cannot contradict 115.72 Standard of evidence and 115.76 Disciplinary sanctions for staff. Agreements are not restricted regarding expungement or retention in the staff personnel file following a determination of not substantiated** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states Standard § 115.66 does not apply to North Dakota since there are no collective bargaining agreements; North Dakota is a right to work state. The auditor interviewed the Sheriff who stated that there is nothing that prevents them from removing staff from contact pending an investigation and that their staff are not represented by a union. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, and in an interview with the Sheriff.

115.67	**Agency protection against retaliation**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Investigative files **Interviews Conducted:** 1. Sheriff 2. Captain/PREA Coordinator **Findings by Provision:** **115.67 (a) Policy to protect all inmates and staff from retaliation** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states the GFCCC PREA Coordinator shall ensure protection of 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. The auditor interviewed the Sheriff and the Captain/PREA Coordinator, who is charged with monitoring for retaliation, to verify expectations and procedures on prevention efforts against retaliation and monitoring for retaliation. They stressed the importance of trying to prevent it by immediate separation. **115.67 (b) Employ multiple retaliation protection measures** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape

Elimination Act of 2003, which states the PREA Coordinator, in conjunction with the Administrator, shall ensure multiple protection measures are available, including housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. The Captain/PREA Coordinator verified in an interview the various measures they take to protect inmates and staff from retaliation to include monitoring disciplinary action, complaints, requests, inmate or staff behavior, and housing changes.

115.67 (c) Monitor for retaliation for at least 90 days; Act promptly
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states for at least 90 days following a report of sexual abuse or sexual harassment, the PREA Coordinator shall ensure monitoring of the conduct and treatment of inmates who reported the sexual abuse or sexual harassment of inmates who were reported to have suffered sexual abuse or sexual harassment to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. In the case of staff, the Administrator will assign a supervisory-level staff member to monitor for retaliation against staff who reported or provided information regarding inmate sexual abuse or sexual harassment. Items the facility should monitor for inmates include disciplinary reports, housing, or program changes. GFCCC shall continue monitoring beyond the 90 days if the initial monitoring indicates a continuing need. Items the facility should monitor for staff include, but are not limited to, performance reviews, absenteeism from work, a change in work performance, requests to move shifts, and/or reassignment of duties or shifts. GFCCC shall continue monitoring beyond the 90 days if the initial monitoring indicates a continuing need.

115.67 (d) Monitoring will include periodic status checks of inmates
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states in the case of inmates, such monitoring shall also include periodic status checks. The auditor interviewed the Captain/PREA Coordinator, who is charged with monitoring for retaliation. She stated that the administrators who conduct weekly unannounced rounds will check in with any inmate who has made a PREA report. The auditor had no evidence of documented periodic status checks. The auditor reviewed investigative files and unannounced rounds documentation and did not find any specific statements referencing a check-in with inmates who had alleged sexual abuse or sexual harassment.

115.67 (e) Protection of any other individual who cooperates with an investigation
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that if any other individual who cooperates with an investigation expresses a fear of retaliation, GFCCC shall take appropriate measures to protect that individual against retaliation. The Captain/PREA Coordinator, who is charged with monitoring, confirmed in her interview that she monitors everything going on. It could include checking in with witnesses who were

	interviewed as well. **115.67 (f) Obligation to monitor terminates if the allegation is unfounded** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that GFCCC's obligation to monitor shall terminate if GFCCC determines that the allegation is unfounded. The auditor interviewed the Captain/PREA Coordinator, who is designated to monitor for retaliation. She stated that she begins right from the beginning by checking with staff to ensure that housing changes were made because this is key to preventing retaliation. She continues to monitor throughout, with a minimum of check-ins at 30, 60, and 90 days. Monitoring continues for 90 days unless the investigation is completed and determined that the allegation was unfounded, the inmates involved are released from their custody, or at the end of 90 days, it appears there are still issues that may then they will monitor for however long it takes. The auditor determined compliance with this standard through a review of the PREA policy, review of investigative files, and an interview with the Sheriff, and Captain/ PREA Coordinator, who is charged with monitoring for retaliation. The auditor determined non-compliance with this standard due to no specific documented reference in the investigative files indicating status checks. There were other statements within the investigation file regarding separating individuals and other monitoring efforts. Specifically, period status checks of inmates should be documented throughout the 90-days following the allegation unless the allegation was determined to be unfounded. Other monitoring efforts such as a review of the conduct and treatment of inmates or staff who reported the sexual abuse for any changes that may suggest possible retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. **CORRECTIVE ACTION:** The auditor required that monitoring efforts are documented from the onset of the allegation until at least 90 days after or until the investigation determines that the case is unfounded. Although monitoring efforts were documented to some degree within the investigative report, there should be a specific area or form where monitoring efforts are documented, specifically when the staff assigned for monitoring completes a status check. The GFCCC changed their documentation method to include a monitoring for retaliation form that has a specific area in which the status checks with inmates are documented.

115.68	**Post-allegation protective custody**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed:

	1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 **Interviews Conducted:** 1. Captain/PREA Coordinator **Findings by Provision:** **115.68 Use of segregated housing for protection shall be subject to requirements of 115.43** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of standard § 115.43 Protective Custody. The auditor interviewed the Captain/PREA Coordinator, who stated that they have housing areas for high-risk inmates. They don't have to put them in administrative segregation to keep them safe. She stated that they may be put in segregated housing only at the request of the inmate or for an immediate need for protection until alternative housing could be provided. There were no instances of inmates who alleged to have suffered sexual abuse that were held in involuntary segregated housing.

115.71	**Criminal and administrative agency investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Investigative Reports 4. Administrative Investigator training certificates **Interviews Conducted:** 1. Captain/PREA Coordinator 2. Administrative Investigator **Findings by Provision:** **115.71 (a) An agency's own investigation will be prompt, thorough, and objective** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that when GFCCC conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall initiate a prompt, thorough, and objective investigation for all allegations, including third-party and anonymous reports. The auditor interviewed the Captain/PREA Coordinator. She stated that she will assign an investigator to every allegation, and the investigation begins immediately – usually the same day the allegation is received. She is also a trained administrative investigator for the facility.

115.71 (b) Sexual abuse investigations will be completed by investigators who have received special training in sexual abuse investigations pursuant to 115.34

Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that where sexual abuse is alleged, GFCCC shall utilize PREA investigators who have received Department of Justice approved sexual abuse investigation training. The auditor reviewed their specialized training certificates which showed that the investigators have completed specialized investigator training from both the North Dakota Department of Corrections and Rehabilitation and the National Institute of Corrections.

115.71 (c) Investigators shall gather and preserve direct and circumstantial evidence

Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states PREA Investigators: Shall gather and preserve direct and circumstantial evidence, including available physical and DNA evidence and available electronic monitoring data; Shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. The auditor interviewed an administrative investigator who stated that during an investigation, some examples of evidence he might encounter are video, phone call recordings, and electronic messaging. He stated that there could be DNA direct evidence as hard proof, but most of the time circumstantial evidence determines the outcome of the investigation.

115.71 (d) When evidence supports criminal prosecution, agency will conduct compelled interviews only after consulting prosecutor

Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that when the quality of evidence appears to support criminal prosecution, the GFCCC investigator will stop the administrative investigation while the criminal investigation is being conducted, unless otherwise directed by the Administrator. GFCCC shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. The auditor interviewed an administrative investigator who stated that he would let law enforcement work with the prosecutor. If staff are involved, they will probably turn it over to the North Dakota Bureau of Investigation instead of the Grand Forks County Sheriff’s Office.

115.71 (e) Credibility shall be assessed on individual basis

Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person’s status as inmate or staff. GFCCC may not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. The auditor interviewed an investigator who stated that everyone he interviews is credible until he proves otherwise with evidence. At the beginning, you start by believing it is true. He stated that they would not use a polygraph for an alleged victim. They don’t have access to one to use for anyone. The auditor reviewed investigative files and found

good credibility assessments within the investigative reports.

115.71 (f) Administrative investigations shall include items listed
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that administrative investigations: Must include an effort to determine whether staff actions or failures to act contributed to the abuse; and Must be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. The auditor interviewed an administrative investigator who stated that he includes in his investigative report the allegation, and the basics of who, what, when, and where. He will also include what he did through the investigative process, such as any phone calls or videos he reviewed and any statements made during the interviews he completed.

115.71 (g) Criminal investigations shall be documented
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states criminal investigations must be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. The auditor reviewed criminal investigative reports.

115.71 (h) Substantiated allegations of sexual abuse shall be referred for prosecution
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. The auditor reviewed documentation of allegations that were referred for prosecution.

115.71 (I) Retain all written reports for as long as abuser at agency plus five years
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall retain all administrative and criminal written reports referenced for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

115.71 (j) Departure of abuse or victim not basis for terminating investigation
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states investigations are completed regardless of employee status or inmate custody status; the departure of the alleged abuser or victim from the employment or control of the GFCCC shall not provide a basis for terminating an investigation. The auditor interviewed the investigator who stated that they would continue the investigation if the alleged abuser or victim was released from the facility or ended employment.

115.71 (k) State or DOJ shall follow above requirements
Compliance Determination: The auditor interviewed the Captain/PREA Coordinator, who stated they would assist and cooperate with BCI if the allegation were referred to them for investigation.

	115.71 (l) Facility shall cooperate with outside investigators and remain informed of progress of investigation **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that when the Grand Forks County Sheriff's Office investigates sexual abuse, GFCCC PREA Investigators shall cooperate with outside investigators and shall remain informed about the progress of the investigation. The Captain/PREA Coordinator stated that they would collaborate with the Grand Forks Sheriff's Office, or the Bureau of Criminal Investigation, and assist them with whatever they may need, provide any support they need to include setting up interviews, providing camera footage, etc., and follow up with them during the course of their investigation as to its progress. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, a review of investigative reports, a review of specialized investigator training, and through interviews with the Captain/PREA Coordinator and an Administrative Investigator.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Investigative reports **Interviews Conducted:** 1. Administrative Investigator **Findings by Provision:** **115.72 No standard higher than a preponderance of the evidence** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC may not impose a standard higher than a preponderance (more than 50 percent) of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The Administrative Investigator stated that he would use a preponderance of evidence, which means that it is more probable that it happened than that it didn't – 51% The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy and administrative investigation reports, and through an interview with an administrative investigator.

115.73	Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed:
1. Pre-Audit Questionnaire
2. Policy C.18 Prison Rape Elimination Act of 2003
3. Statement of Findings

Interviews Conducted:
1. Captain/PREA Coordinator
2. PREA Coordinator - Administrative Investigator

Findings by Provision:
115.73 (a) Inform inmate of the outcome of investigation
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that following an investigation, the PREA Investigator or staff member designated by the PREA Investigator will inform the inmate or inmates verbally whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The investigator will deliver, in person, a statement of findings which will require the signature of the inmate or inmates. If the inmate refuses to sign the findings form, the investigator will document the refusal and have a staff member witness and sign the refusal. The auditor reviewed investigations, which include the Statement of Findings that was provided to the inmate who signed the document, unless the inmate was released from the facility prior to the conclusion of the investigation.

115.73 (b) Request outcome from external investigative agency
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states if the GFSO conducts an investigation, GFCCC shall request the relevant information in order to inform the inmate of the outcome of the investigation. The auditor interviewed the Captain/PREA Coordinator who stated that if they are still in agency custody, they will provide them with criminal findings from the Sheriff’s Office or the Bureau of Criminal Investigation (BCI). The auditor reviewed one investigative file that was turned over to BCI, which had the relevant notification to the inmate.

115.73 (c) Inform inmate if alleged staff abuser is no longer posted in unit, no longer employed, or has been indicted or convicted
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states if there has been a substantiated or unsubstantiated complaint of sexual abuse committed by a staff member against an inmate, the PREA Coordinator will inform the inmate whenever: The staff member is no longer posted within the inmate’s unit; The staff member is no longer employed at the facility; The agency learns that the staff member has been charged with an offense related to sexual abuse within the facility; or The agency learns that the staff member has been convicted of an offense related to sexual abuse within the facility. The auditor reviewed one investigative file that was turned over to BCI, which had

	the relevant notification to the inmate. The auditor reviewed the policy and interviewed the Captain/PREA Coordinator who stated that they would make the proper notifications at the conclusion of the investigation if the inmate has not been released. **115.73 (d) Inform inmate if alleged inmate abuser has been indicted or convicted** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states following an inmate's allegation of sexual abuse by another inmate, the PREA Coordinator will inform the alleged victim whenever: The agency learns that the alleged abuser has be charged with an offense related to sexual abuse within the facility; or the agency learns that the alleged abuser has been convicted of an offense related to sexual abuse within the facility. The auditor interviewed the Captain/PREA Coordinator who stated that they would make the proper notifications at the conclusion of the investigation if the inmate has not been released. **115.73 (e) Document all attempts to notify** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that all such notifications or attempted notifications shall be documented. The auditor reviewed investigation files, which contained documentation of the notices given to inmates, and were signed by the inmate or stated the inmate was released. **115.73 (f) Obligation to report if inmate released from agency's custody** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC's obligation to report under this standard terminates if the inmate is released from GFCCC's custody. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, and through an interview with the Captain/PREA Coordinator and an administrative investigator.

115.76	**Disciplinary sanctions for staff**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 **Interviews Conducted:** 1. Captain/PREA Coordinator **Findings by Provision:**

	115.76 (a) Staff subject to disciplinary action up to and including termination for violating policies **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Employees shall cooperate fully by providing all pertinent information during an investigation. Failure of an employee to answer any inquiry fully will be grounds for disciplinary action. Employees may not make any attempt to contact the inmate victim from the time the allegation is first made until the completion of the investigation. **115.76.(b) Termination is the presumptive discipline for staff who have engaged in sexual abuse** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse with an inmate or ward of the state of North Dakota. **115.76 (c) Staff Discipline commensurate with the nature and circumstance, etc.** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states disciplinary sanctions for violations of GFCCC policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) must 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. **115.76 (d) All terminations unless activity not criminal reported to law enforcement agencies and relevant licensing bodies** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that all terminations for violations of GFCCC sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. The auditor interviewed the Captain/PREA Coordinator, who stated that allegations against staff are investigated. The Captain/PREA Coordinator stated that staff would be placed on administrative leave during the investigation and that termination would occur if the case is substantiated or the staff has not already resigned. If the staff member has resigned and the actions are criminal, the case is turned over to the Bureau of Criminal Investigation. The auditor reviewed one investigative file in which these procedures were followed. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, through an interview with the Captain/PREA Coordinator, and a review of a staff-involved investigation.

115.77	**Corrective action for contractors and volunteers**

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 **Interviews Conducted:** 1. Captain/PREA Coordinator **Findings by Provision:** **115.77 (a) Contractor or volunteer who engages in sexual abuse prohibited from contact and reported to law enforcement agency unless not criminal and to relevant licensing bodies** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The auditor interviewed the Captain/PREA Coordinator, who stated that there is nothing that would keep her from removing the volunteer or contractor from being in the facility, and she would turn it over for criminal charges if it were criminal. **115.77 (b) Contractor or volunteer policy violations - Take appropriate remedial measures and consider prohibiting further contact** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any other violation of GFCCC sexual abuse or sexual harassment policies by a contractor or volunteer. The auditor interviewed the Captain/PREA Coordinator, who stated they would investigate it and not allow them in the facility until the investigation is complete. if it were minor (like a policy violation) they would provide additional training. If the allegation appears to be criminal, contact law enforcement to seek criminal charges. There have been no allegations against contractors or volunteers. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, and through an interview with the Captain/PREA Coordinator.

115.78	**Disciplinary sanctions for inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed:

1. Pre-Audit Questionnaire
2. Policy C.18 Prison Rape Elimination Act of 2003
3. Inmate Handbook
4. Investigative Files

Interviews Conducted:
1. Captain/PREA Coordinator
2. PREA Coordinator

Findings by Provision:
115.78 (a) Inmates disciplined
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states inmates shall be subject to disciplinary sanctions pursuant to the GFCCC disciplinary process following an administrative or criminal finding of guilt that the inmate engaged in inmate-on-inmate sexual abuse. The auditor reviewed the Inmate Handbook, which includes rules and discipline. The auditor interviewed the Captain/PREA Coordinator, who stated that they would follow their disciplinary process, and the discipline depends on the seriousness of the allegation.

115.78 (b) Sanctions commensurate with the nature and circumstance
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that sanctions must 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 auditor interviewed the Captain/PREA Coordinator, who stated some examples of disciplinary sanctions would be loss of privileges, housing change, segregated housing, or criminal charges. Discipline would depend on the seriousness.

115.78 (c) Disciplinary process considers inmate's mental disabilities or mental illness
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states the disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. The auditor interviewed the Captain/PREA Coordinator, who stated that she would always consider this.

115.78. (d) if sex offender therapy offered, facility considers whether to require offender to participate as a condition of access to programming or other benefits
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall consider, as a condition of access to programming or other benefits, whether to require the offending inmate to participate in therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for the abuse. The auditor interviewed the Captain/PREA Coordinator, who stated that they do not offer any type of sex offender

	therapy. **115.78 (e) Discipline for sexual contact with staff only upon finding that staff member did not consent** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. **115.78 (f) Good faith report shall not constitute false reporting** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states 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 may not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. **115.78 (g) May prohibit all sexual activity between inmates but may not deem as sexual abuse it determined not coerced** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that GFCCC prohibits all sexual activity between inmates and may discipline inmates for such activity. GFCCC will not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, a review of the Inmate Handbook regarding rules and discipline, and a review of investigative files, and through an interview with the Captain/PREA Coordinator.

115.81	**Medical and mental health screenings; history of sexual abuse**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. Health Assessment form 4. Medical Release of Information form **Interviews Conducted:** 1. Captain/PREA Coordinator 2. Staff Responsible for screening 3. Inmates who reported previous sexual abuse 4. Contracted Medical Staff

	Findings by Provision: **115.81 (a) – (b) Screening prison inmates** **Compliance Determination:** The Grand Forks County Correctional Center is a jail not a prison therefore these provisions are not applicable **115.81 (c) If screening indicates jail inmate experienced sexual victimization, offer follow-up with medical or mental health practitioner within 14 days of intake screening** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states if the GFCCC PREA Intake and Initial Assessment indicates an inmate has experienced prior sexual victimization or perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure the inmate is offered a follow-up meeting with a mental health, medical or behavioral health practitioner within 14 days of the intake screening. The auditor interviewed the staff responsible for the screening and medical staff, reviewed the screening document, and conducted two targeted interviews with inmates to confirm that an offer is made for a follow-up meeting with the medical staff. **115.81 (d) Information related to sexual victimization or abusiveness strictly limited to medical and mental health practitioners and other staff to inform treatment plans and security and management decisions.** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that disclosure of information related to sexual victimization or abusiveness that occurred in an institutional setting must be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as required by federal, state, or local law. The auditor interviewed the administrators, a staff who administers the screening, and a medical staff to confirm that they limit the information as required by their policy. **115.81 (e) Medical or mental health practitioners obtain informed consent before reporting information that did not occur in an institutional setting unless inmate under the age of 18** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that Medical, Mental Health, and Behavioral Health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. The auditor interviewed a medical staff member who confirmed that when they meet with the inmate and complete the Health Assessment form, they ask about previous sexual victimization or perpetrated sexual abuse. At this time, they would obtain informed consent before reporting this information and discuss with the inmate their limits to confidentiality.

115.82	**Access to emergency medical and mental health services**

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 **Interviews Conducted:** 1. Captain/PREA Coordinator 2. Contracted medical staff 3. 12 Random Staff First Responders **Findings by Provision:** **115.82 (a) Access to emergency medical treatment and crisis intervention and 115.82 (b) If no medical or mental health staff on duty, security staff immediately notify medical and mental health practitioners** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical, mental, and behavioral health practitioners according to their professional judgment. **115.82 (b) If medical or mental health practitioners not on duty , security staff first responders take preliminary steps to protect victim and notify appropriate medical and mental health practitioners.** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states if qualified medical, mental, or behavioral health practitioners are not on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical, mental, and behavioral health practitioners. **115.82 (c) Offered timely information about and access to emergency contraception and sexually transmitted infections prophylaxis** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. **115.82 (d) Treatment services at no financial cost** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, and through interviews with the Captain/PREA Coordinator,

	medical staff and first responding staff. Staff stated that in the event services after hours are not available at the facility, inmates would be taken to Altru Health System Grand Forks. The Captain/PREA Coordinator stated that treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with the investigation. The medical staff verified that inmates would be offered timely information about and access to emergency contraception and sexually transmitted infections prophylaxis. The procedures were verified both through review of policy and through interviews with staff.

115.83	**Ongoing medical and mental health care for sexual abuse victims and abusers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 **Interviews Conducted:** 1. Captain/PREA Coordinator 2. Contracted Medical Staff **Findings by Provision:** **115.83 (a) Offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. **115.83 (b) Evaluation and treatment will include follow-up services, treatment plans, and referrals for continued care following their transfer or release** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states the evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. **115.85 (c) Provide medical and mental health services consistent with community level of care** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall provide such victims with medical and mental health services

	consistent with the community level of care. **115.83 (d) Provide pregnancy tests** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. **115.83 (e) Provide timely and comprehensive information and timely access to all lawful pregnancy-related medical services** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states if pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. **115.83 (f) Offer tests for sexually transmitted infections** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. **115.83 (g) Provided treatment services without financial cost** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The auditor interviewed the Captain/PREA Coordinator and the contracted medical staff, who verified that medical and mental health evaluations and treatment are offered at no cost to sexual abuse victims. The medical staff confirmed that they will test for sexually transmitted infections, and pregnancy tests are offered. If mental health services are required for crisis management, they are referred to community providers. The contracted medical provider stated that the medical and mental health services offered are consistent with a community level of care, and that the nature and scope of the services are determined according to their professional judgment. The nurse stated that there has never been any pushback from the jail staff or administrators. If medical staff state it needs to be done, the facility staff make sure it happens. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, and through interviews with the Captain/PREA Coordinator and the contracted medical staff.

115.86	**Sexual abuse incident reviews**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Documents Reviewed:
1. Pre-Audit Questionnaire
2. Policy C.18 Prison Rape Elimination Act of 2003
3. Administrative Incident Review form
4. Investigative reports

Interviews Conducted:
1. Captain/PREA Coordinator

Findings by Provision:
115.86 (a) Conduct sexual abuse incident review
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.

115.86 (b) Review within 30 days of conclusion of investigation
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states such review shall ordinarily occur within 30 days of the conclusion of the investigation.

115.86 (c) Review team includes upper-level management with input from line staff, investigator, and medical or mental health practitioners
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states the review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

115.86 (d) Review team will consider items outlined in provision
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states the review team shall: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area 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 a report of its findings, including determinations made pursuant to paragraphs (d)(i) through (d)(v) of this section, and any recommendations for improvement and submit such report to the GFCCC Administrator.

115.86 (e) Implement recommendations for improvement or document reasons for not doing so
Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall implement the recommendations

	for improvement, or shall document its reason for not doing so. The auditor interviewed the Captain/PREA Coordinator, who stated that they conduct incident reviews of sexual abuse incidents within 30 days of the conclusion of the investigation. The auditor reviewed the sexual abuse incident review forms from the investigative files. There were no sexual abuse allegations that required an incident review from the past 12 months. However, the auditor reviewed the form from an investigation that was concluded in 2023. The Grand Forks County Correctional Center uses the policy to guide what needs to be reviewed, as well as the PREA Sexual Abuse Incident Review form. The form has boxes to trigger discussion on each of the discussion components required by the standard (change policy or practice, motivation, physical barriers, staffing levels, monitoring technology, recommendations for improvement), and then they fill in the required explanatory section when needed. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, a review of the completed incident review form, and through an interview with the Captain/PREA Coordinator.

115.87	**Data collection**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003. 3. Investigative files **Interviews Conducted:** 1. Captain/PREA Coordinator **Findings by Provision:** **115.87 (a) Collect accurate, uniform data for every allegation** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall collect accurate, uniform data for every allegation of sexual abuse at its facility using a standardized instrument and set of definitions. GFCCC utilizes the Department of Justice, Bureau of Justice Statistics form SSV-2, Survey of Sexual Violence, if provided. **115.87 (b) Aggregate incident-based data annually** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states the GFCCC PREA Coordinator shall aggregate the incident based sexual abuse data at least annually. **115.87 (c) Data necessary to answer the questions from Survey of Sexual**

	Violence **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states the incident-based data collected shall 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. **115.87 (d) Maintain, review, and collect data from reports, investigation files, and sexual abuse incident reviews** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. **115.87 (e) Obtain incident-based and aggregated data from contracted private facilities** **Compliance Determination:** The auditor interviewed the Captain/PREA Coordinator who stated that they do not contract for the confinement of inmates in other facilities. **115.87 (f) Provide data to DOJ no later than June 30 upon request** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states upon request, GFCCC shall provide all such data from the previous calendar year to the Department of Justice no later than June 30. Aggregate annual data was provided to the auditor. The auditor interviewed the Captain/PREA Coordinator and reviewed the aggregate data. The facility collects uniform data for all allegations of sexual abuse based on a review of investigative reports. The aggregated data is included in their annual reports. They provide information on the Survey of Sexual Victimization when requested.

115.88	**Data review for corrective action**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. 2024 Annual report **Interviews Conducted:** 1. Sheriff 2. Captain/PREA Coordinator **Findings by Provision:** **115.88 (a) Prepare annual report; Review data to assess and improve**

	Compliance Determination: The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall review data collected and aggregated pursuant to PREA Standard 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training to include: Identifying problem areas; Taking corrective action on an ongoing basis; and Preparing an annual report of its findings and corrective actions. **115.88 (b) Annual report includes comparison of current year's data and corrective actions with prior years and provides progress** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse. **115.88 (c) Annual report approved by agency head and on website** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states the GFCCC's report shall be approved by the Administrator and made readily available to the public through its website or other means. **115.88 (d) Redact information that may be a threat to safety and security but must indicate nature of material redacted** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC may redact specific material from the reports when publication presents a clear and specific threat to the safety and security of the facility, but must indicate the nature of the material redacted. The auditor interviewed the Sheriff and the PREA Coordinator and reviewed the 2024 PREA Annual Report, which is posted on the website at https://www.gfcounty.nd.gov/government/adult-corrections/prea

115.89	**Data storage, publication, and destruction**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. Pre-Audit Questionnaire 2. Policy C.18 Prison Rape Elimination Act of 2003 3. 2024 Annual report with aggregate data **Interviews Conducted:** 1. Captain/PREA Coordinator **Findings by Provision:**

	115.89 (a) Data security retained **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC ensures that data collected pursuant to §115.87 are securely retained on the secure server. **115.89 (b) Aggregate data available to public annually** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall make all aggregated sexual abuse data readily available to the public at least annually through its website or by other means. **115.89 (c) Remove personal identifiers** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states that before making aggregated sexual abuse data publicly available, GFCCC shall remove all personal identifiers. **115.89 (d) Maintain data for at least 10 years after the date of the initial collection** **Compliance Determination:** The auditor reviewed Policy C.18 Prison Rape Elimination Act of 2003, which states GFCCC shall 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. The auditor interviewed the Captain/PREA Coordinator and reviewed the aggregate data posted on the website. The facility does not contract for the confinement of its inmates with any facility. The PREA policy addresses data storage, publication, and destruction requirements. Information is maintained locked within the offices of the Captain/PREA Coordinator or stored electronically on a secure drive that is password protected with limited access. Data collected is retained for at least ten (10) years. The Grand Forks County Correctional Center does not include any identifiable personal information within its report that would need to be redacted. The auditor determined compliance through a review of the pre-audit questionnaire, a review of PREA policy, and the annual report with the aggregate data, and through an interview with the Captain/PREA Coordinator.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: 1. The Grand Forks County Correctional Center 2016 PREA Audit 2. The Grand Forks County Correctional Center 2019 PREA Audit 3. The Grand Forks County Correctional Center 2022 PREA Audit 4. The Grand Forks County Correctional Center website with previous audits posted

	Findings by Provision: **115.401 (a) Each facility audited once every three years** **Compliance Determination:** This facility was initially audited on June 20 to 22, 2016. The second audit was conducted on August 29 to 30, 2019. The third audit was completed on August 8 to 9, 2022. The facility has consistently been audited every three years since June 2016 in the third year of each cycle. **115.401 (b) At least one-third of each facility type is audited each year** **Compliance Determination:** The Grand Forks County Correctional Center is the only correctional facility operated by the Grand Forks County Sheriff's Office. **115.401 (h) Auditor access to and observation of all areas of facility** **Compliance Determination:** The auditor had complete access and observed operations in every area of the facility. The auditor conducted a tour of the facility on the first day which included every area of the facility, including administrative areas, intake area, control desks, all housing areas, storage areas, food service areas, laundry, restrooms and showers, and maintenance areas. **115.401 (I) Auditor permitted to request and receive copies of any relevant documents including electronically stored information** **Compliance Determination:** The auditor was permitted to request and receive copies of any relevant documents (including electronically stored information). The auditor requested many documents throughout the audit process. The administrators of the Grand Forks County Correctional Center provided numerous copies of documents to include policies, inmate screenings, inmate training information, human resource documentation, forms, and investigative files. **115.401 (m) Auditor permitted to conduct private interviews** **Compliance Determination:** The auditor conducted private interviews with inmates and staff in an interview room that was provided for this purpose. The Grand Forks County Correctional Center staff were very cooperative throughout the audit process. **115.401 (n) Inmates permitted to send confidential information to auditor in same manner as if with legal counsel** **Compliance Determination:** The inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. The auditor did not receive any correspondence regarding this facility. The auditor determined compliance through a review of the pre-audit questionnaire, a review of previous PREA Audits, a very thorough tour, and a review of numerous documents.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	Documents Reviewed: 1. Grand Forks County Correctional Center website **Findings by Provision:** **115.403 (f) All final audit reports published on agency's website** **Compliance Determination:** This is the fourth audit for the Grand Forks County Correctional Center. All previous audit reports are published on the Grand Forks County Correctional Center website at https://www.gfcounty.nd.gov/government/a-dult-corrections/prea The auditor determined compliance through a review of the pre-audit questionnaire and a review of the Grand Forks County Correctional Center website.

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.)	na
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	na
115.12 (a)	**Contracting with other entities for the confinement of inmates**	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	**Contracting with other entities for the confinement of inmates**	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	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.)	yes
115.18 (b)	**Upgrades to facilities and technologies**	

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

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	**Evidence protocol and forensic medical examinations**	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	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

	suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
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 degree, 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 degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	evidence sufficient to substantiate the allegation?	
115.78 (g)	**Disciplinary sanctions for inmates**	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	**Medical and mental health screenings; history of sexual abuse**	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	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.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	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.)	yes
115.401 (h)	**Frequency and scope of audits**	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	**Frequency and scope of audits**	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	**Frequency and scope of audits**	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	**Frequency and scope of audits**	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	**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