

PREA Facility Audit Report: Final

Name of Facility: Carroll County House of Corrections & Jail

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 12/14/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Jack Fitzgerald	Date of Signature: 12/14/2022

AUDITOR INFORMATION	
Auditor name:	Fitzgerald, Jack
Email:	jffitzgerald@snet.net
Start Date of On-Site Audit:	09/26/2022
End Date of On-Site Audit:	09/28/2022

FACILITY INFORMATION	
Facility name:	Carroll County House of Corrections & Jail
Facility physical address:	County Complex Building 2, Ossipee, New Hampshire - 03864
Facility mailing address:	PO Box 688, Ossipee, New Hampshire

Primary Contact	
Name:	Captain Michael Baker
Email Address:	mbaker@ccoc.org
Telephone Number:	603-539-2282

Warden/Jail Administrator/Sheriff/Director	
Name:	Superintendent Sean Eldridge
Email Address:	seldridge@cchoc.org
Telephone Number:	603-539-2282

Facility PREA Compliance Manager	
Name:	Sean Eldridge
Email Address:	seldridge@cchoc.org
Telephone Number:	O: (603) 539-2282
Name:	Brian King
Email Address:	bking@cchoc.org
Telephone Number:	O: (603) 539-2282

Facility Health Service Administrator On-site	
Name:	Commissioner Terry McCarthy
Email Address:	tmccarthy@carrollcountynh.net
Telephone Number:	603-539-7751

Facility Characteristics	
Designed facility capacity:	132
Current population of facility:	45
Average daily population for the past 12 months:	59
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	18-99
Facility security levels/inmate custody levels:	minimum, medium, maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	27
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	3
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	4

AGENCY INFORMATION	
Name of agency:	Carroll County Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	50 County Farm Road, Ossipee, New Hampshire - 03864
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information

Name:	Michael Baker	Email Address:	mbaker@cchoc.org
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SUMMARY OF AUDIT FINDINGS

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

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

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-09-26
2. End date of the onsite portion of the audit:	2022-09-28

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	The Auditor spoke with hospitals, and victims advocacy agencies in New Hampshire. Te Auditor also completed web searches for information on the facility, including news stories.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	132
15. Average daily population for the past 12 months:	59
16. Number of inmate/resident/detainee housing units:	5

<p>17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)</p>
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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

<p>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</p>	<p>59</p>
<p>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</p>	<p>2</p>
<p>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</p>	<p>2</p>
<p>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>

42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	1
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	1
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	1
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit

49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	27
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	1
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	3
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	10
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<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Age</p> <p><input checked="" type="checkbox"/> Race</p> <p><input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input checked="" type="checkbox"/> Length of time in the facility</p> <p><input checked="" type="checkbox"/> Housing assignment</p> <p><input checked="" type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>The Auditor first used the identified target population and then picked the remainder of the inmates using a random number across each unit until sufficient population was achieved. The Auditor interviewed 30% of the detained population</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>8</p>

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

60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div data-bbox="820 1615 1473 1780"> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div data-bbox="820 1827 1473 1910"> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	<p>The Auditor discussed with the PREA Coordinator, Classification Lieutenant, as well as medical and Mental Health about various target population members.</p>
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	<p>0</p>
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	<p>The Auditor discussed with the PREA Coordinator, Classification Lieutenant, as well as medical and Mental Health about various target population members.</p>
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	<p>1</p>
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	<p>1</p>

66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
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).	The Auditor discussed with the PREA Coordinator, Classification Lieutenant, as well as medical and Mental Health about various target population members.
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	1
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	1
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> 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).	There was one resident who voluntarily asked to be in segregation for a period of time. The individual had reportedly stated he was a victim in a prior institution.
70. 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

71. Enter the total number of RANDOM STAFF who were interviewed:	12
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None

73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	7
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input checked="" type="checkbox"/> Intake staff <input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	As a small agency many individuals wore multiple hats so there are individuals who answered more than one set of target questions.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

☒ Yes

☐ No

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

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	<p>The Auditor was able to move about the facility and requests to return to areas as needed without any concerns. The Auditor was able to test critical functions like phone, tablet and kiosk use with the help of the detainees in the facility. the Auditor used informal discussions with staff and detainees, as well as observations to see if practice matched policy statements</p>
<h2 style="text-align: center;">Documentation Sampling</h2>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	<p>The Auditor looked at both staff and client files while on site and was shown medical and mental health records. Additional resident files were provided to the Auditor during the corrective action period to ensure the appropriate changes were made and had become daily practice.</p>

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	4	0	4	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	4	0	4	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	2	0	2	0
Staff-on-inmate sexual harassment	3	0	3	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.

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	2
Staff-on-inmate sexual harassment	0	3	0	0
Total	0	3	0	2

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

4

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files) </p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>4</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p> <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) </p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) </p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files) </p>

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	5
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	3
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	<p>The Auditor looked at all cases in the past year with the facility investigator. The files supported investigation occurred even when the information came forward months after the allegation. The documents support in one case it was referred for criminal investigation consideration, but the law enforcement agency did not believe there was sufficient evidence to move forward. The facility investigated cases of inmate-on-inmate consensual contact and cases where inmates had been held accountable for misuse of the video visit system.</p>

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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

☐ Yes

☒ No

Non-certified Support Staff

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

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

☒ The audited facility or its parent agency

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

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

☐ Other

Standards

Auditor Overall Determination Definitions

- Exceeds Standard
(Substantially exceeds requirement of standard)
- Meets Standard
(substantial compliance; complies in all material ways with the standard 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
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Sexual Assault Prison Rape Elimination Act</p> <p>Policy 7-C-103 Administration and Management</p> <p>Carroll County Department of Corrections Organizational chart</p> <p>Individuals interviewed/ observations made.</p> <p>Interview with PREA Coordinator</p> <p>Interview with Superintendent</p> <p>Observations made</p> <p>Random Inmate</p> <p>Random Staff</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections s has developed an agency-wide policy to ensure compliance with the Prison Rape Elimination Act. Policy 4-D-200 Sexual Assault Prison Rape Elimination Act was written to address the various requirements of the standards. The 40-page policy set forth a zero-tolerance expectation for any sexual misconduct by inmates, staff, contractors, or volunteers. In the policy statement the agency’s expectation is set forth. “The goal of this policy is to ensure: all staff work to prevent sexual abuse and sexual harassment of inmates in keeping with the intent of the federal PREA statute; Health services are provided to all inmates and detainees in a professionally acceptable manner; and staff are qualified, adequately trained, and able to demonstrate competency in their assigned duties, specifically in this case, as those duties relate to the Prison Rape Elimination Act.” The policy further defines zero tolerance when it states, “CCDOC is committed to a zero-tolerance standard for sexual abuse and sexual harassment of inmates within the CCDOC, including abuse and/or sexual harassment by inmates on another inmate(s), by staff on an inmate/s, and/or by any other person working with or having contact with inmates in the Facility or under the Facility’s control or supervision. This policy</p>

makes the prevention of inmate-on-inmate sexual assault and staff sexual misconduct a top priority. Facility staff will immediately respond to, investigate, and support the prosecution of sexual assault, victimization and misconduct through both internal and external processes, in partnership with State Police, local law enforcement, County prosecutors and the N.H. Office of the Attorney General.” The subsequent pages of the policy further defines the different aspects of CCDOC’s efforts to prevent, detect, and respond to incidents of sexual abuse. It identifies screening, education, monitoring, and other elements supporting prevention, allowing for detection, and ensuring a full legal and medical response to any complaint.

In the facilities first ever PREA audit staff of the Carroll County Department of Corrections (SCDOC) showed knowledge consistent with training materials about their role in preventing, detecting, and responding to sexual assault claims. The Auditor observed, posters throughout the facility remind inmates and staff of the zero-tolerance expectation. The Auditor also had inmates show them how to access PREA Information on the inmate tablets and the visitation kiosk on the units. Random Inmates spoken with formally and informally reported that Carroll County Department of Corrections facility is a PREA safe environment and supports a Zero-Tolerance Culture exist. Staff complete frequent visits to the units where there is not direct supervision.

Indicator (b). The Carroll County Department of Corrections has only one facility for individuals awaiting trial or placement post-sentencing. As noted in addition to holding individuals who have committed crimes in New Hampshire, the facility can house inmates for up to 72 hours for the US Marshal’s Service but does not house inmates for Immigration and Customs Enforcement (ICE). PREA Policy 4-D-200 Sexual Assault Prison Rape Elimination Act defines the role of the PREA Coordinator. “PREA coordinator(s), or their designees, responsible for developing, implementing, and overseeing compliance of the Facility with PREA standards and Facility PREA policies.” The policy and interview defined the duties of the PREA Coordinator to include coordinating and developing procedures to identify, monitor and track sexual misconduct incidents and retaliation occurring in the CCDOC. The PREA Coordinator is a Captain recognized within the agency organizational chart as reporting to the Superintendent and Deputy Superintendent. This chart provided shows the structure of responsibilities within the environment. Interviews with the PREA Coordinator and Superintendent confirmed he has sufficient access to key agency administrators to influence policy and resources to ensure PREA safe environments. The Auditor also observed the routine interactions between upper management staff. The Superintendent reports there is basically daily interactions between all members of the management team.

Indicator (c) The indicator is not required as the Carroll County Department of Corrections only has one facility.

Compliance Determination

The Carroll County Department of Corrections have policies that support compliance by defining the steps to prevent, detect, and respond to sexual abuse and sexual harassment incidents. The agency’s PREA policy addresses prohibited behaviors and

	<p>sanctions for any form of sexual misconduct. The Auditor's review of other agency policies further supports the zero-tolerance expectation as well as a system of prevention, detecting and responding to critical incidents like a sexual abuse incident. The policy and other documents provided to the Auditor define the roles of the PREA Coordinator. The interview with the agency PREA Coordinator confirmed his roles to ensure PREA Compliance is maintained. The PREA Coordinator believes he has the capacity in to advocate for policy or procedural changes needed to support inmate safety. This was confirmed with the Superintendent of CCDOC. Interaction with staff at varying levels in the organization supports the importance of the PREA Coordinator and the agency's commitment to ensure a zero-tolerance culture exists. Compliance is based on interviews with staff, leadership, the documentation provided, and policy. The Auditor also considered the interviews and witnessed interactions between the PREA Coordinator and inmates, supporting access to the PREA Coordinator.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>PREA Coordinator</p> <p>Summary Determination</p> <p>Indicator (a) Carroll County Department of Corrections does not contract for the holding of inmates with any other institution. The facility is a contractor who can receive female inmates from other counties in New Hampshire or provide temporary holds for US Marshall services.</p> <p>Indicator (b) Carroll County Department of Corrections does not contract for the holding of inmates with any other institution. The facility is a contractor who can receive female inmates from other counties in New Hampshire or provide temporary holds for US Marshall services. The CCDOC has policy language in place in case it decides to contract out beds in the future. Policy 4 D 200 states, "In order to ensure compliance with PREA 115.12, Contracting with other entities for the confinement of inmates, CCDOC will ensure that any contracts for the confinement of inmates with private agencies or other entities, including other government agencies, shall include the entity's obligation to adopt and comply with the PREA standards, and allow for CCDOC contract monitoring to ensure that the contractor is complying with the PREA standards."</p> <p>Compliance Determination</p> <p>The Carroll County Department of Corrections does not contract with other entities to provide for the confinement of its inmates currently. As noted above the facility can house inmates for the US Marshals Services, and females for other counties in New Hampshire. Compliance is based on the fact that the current indicators do not apply. The Auditor also notes policy is in place and the Superintendent and PREA Coordinator are aware of any future contracting requirements related to this standard.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Supervisor Rounds</p> <p>Staffing plan document (includes both staffing and monitoring technology)</p> <p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>PREA Coordinator</p> <p>Lieutenant</p> <p>Supervisory Staff (Sgts.)</p> <p>Observation on tour of logbooks and Supervisory movement onsite</p> <p>Interview with control officers</p> <p>Interview with Inmates</p> <p>Summary Determination</p> <p>Indicator (a) Carroll County Department of Corrections (CCDOC) PREA Policy 4-D-200 sets forth the requirements of an annual review of staffing and video needs. Page 3 of the policy states "In compliance with PREA Standard 115.13, the Superintendent or his designee shall ensure that CCDOC complies with a staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring, to protect inmates against sexual abuse." The annual review analysis is completed for the Superintendent, Major, Captain who is the PREA Coordinator and the Lieutenant who is the investigator and classification supervisor. The Auditor reviewed with the Superintendent the items he considers as part of this process, including looking at past PREA incidents or other safety issues that have arisen in the year. Carroll County Department of Corrections is not reportedly under any judgement of inadequacy related to staffing. Superintendent also discussed how monitoring technology and cameras accent the staffing plan. The Superintendent confirmed there were no judicial, federal, or oversight bodies' findings of inadequacies. He also confirmed the</p>

facility has not operated under the minimal staffing level, and there is a daily report which he receives that tracks staffing allotment. The facility is able to adjust post assignments to ensure required posts are maintained.

The staffing plan is based on 132 maximum, minimum, and medium inmates. In the last year, with the pandemic, the facility has reportedly averaged just over 59 inmates in the past 12 months. The CCDOC provided the Auditor with many elements in advance that supported compliance with many of the items but did not have a narrative document covering all the elements described in this indicator. The Auditor worked with the PREA Coordinator to come up with a document that describes the elements used in determining staffing need and a process for annual review. Discussions with the Superintendent described how he presents his budget and staffing needs to the county annually. The PREA Coordinator with the entire CCDOC management team developed a informative 17 page document which answers the various parts of this indicator.

Indicator (b). The indicator is N/A as CCDOC has not failed to comply with the staffing plan in the past three years reportedly. The staffing plan for the Carroll County Department of Corrections allows the management to adjust the deployment of staff as needed and in response to critical positions. When staff call out, there is an ability to mandate staff to ensure the overall safety of inmates. Interviews support the Superintendent, Major or Captain would be notified of all critical events, including any situation impacting staffing minimums. The Sergeants who oversee operations are responsible for finding coverage and documenting the changes and any justification for why minimums were not met. Inmates' support staff are available to them and did not voice a concern about a lack of staffing at any time. All fixed post positions must be filled and documented in the facility logs. The staffing plan defines the minimum post for each shift Policy 4-D-200 addresses the expectation of this indicator, "When the Facility does not comply with its staffing plan, the Superintendent, or his/her designee will document and delineate the reasons for non-compliance."

Indicator (c) In Policy 4-D-200 the Carroll County Department of Corrections has set forth an annual review of the staffing of the Jail. "Whenever the Superintendent deems it necessary, but no less frequency then annually, he/she - in consultation with the PREA Coordinator - will assess, determine if necessary, and document whether adjustments in the Facility's staffing plan, the effectiveness of its video monitoring systems. If the Superintendent determines that a substantial modification of the Facility's infrastructure is necessary, or that the Facility's video monitoring technology needs updating or enhanced, he/she - in consultation with the PREA Coordinator - will consider how such modifications might enhance the Department's ability to protect inmates from sexual abuse.."

Since this is the first PREA Audit and the agency had no formal narrative, the Auditor relied on the Superintendent interview which supports there has been a process of reviewing needs of staffing and monitoring technology. The Superintendent came from a larger county jail elsewhere in New Hampshire and he described the steps he took in making his initial assessments and how he has spent dollars to improve the safety of the environment for staff and detainees. He was able to point out camera

and other monitoring elements they have invested in or plan to in future fiscal years. He confirmed the consultation with the PREA Coordinator and the entire management team meet almost daily to address needs. The PREA Coordinator has a plan on how to document future reviews of the staffing plan they developed. Compliance is based on interviews and stated plans moving forward.

Indicator (d) CCDOC has policy language and current practice that supports this indicator. The Policy states, "In further compliance with PREA 115.13, supervisory staff shall conduct and document unannounced rounds on all shifts. (See CCDOC Policy and Procedure 2-A-109). Unless an announcement of supervisory rounds are related to a legitimate operational function of the Facility, staff are prohibited from alerting other staff members that supervisory rounds are occurring." The Auditor was provided with documentation to support routine unannounced rounds are made by supervisory staff. The Auditor requested and was provided documentation from both the electronic logs and the video system supporting that, Sergeants, perform unannounced rounds of the facility. Supervisors spoken with formally and informally report they stagger their tours and change orders of units they visit to further ensure both staff and residents are unaware of when they will return. The rounds are recorded into the PIPE an electronic rounds tracker. The Auditor reviewed video on site and asked for and was provided video stills to support the rounds documentation. The Auditor also asked the Control Officer if he informs individuals when the Supervisors are making tours. This staff reported he is prohibited from alerting other staff members that these supervisory rounds are occurring unless such announcement is related to needs of the facility. Line staff spoken with during the course of the audit supported random tours are completed. The Auditor also confirmed with inmates that supervisory staff are available for them to speak as they tour the area.

Compliance Determination

The Carroll County Department of Corrections has policies and practices in place that address the requirements of the four indicators in this standard. The CCDOC has developed a narrative plan during the post audit period in a narrative format that addresses the various considerations in indicator (a). The plan is reflective of information provided in other written forms and information obtained in interviews. The facility utilizes cameras and the PIPE in addition to the active supervision of inmates through frequent tours. Sergeants' complete tours of the entire complex at a minimum of two times per shift unannounced. The standard is found to be compliant based on the information provided and observations made while at the facility. Interviews with the Superintendent, Captain and Sergeants support an understanding of the standards elements and a consistent practice within their policies. Formal and informal interviews with inmates' support there is always staff, including supervisors, available. The Auditor also took into consideration the staffing plan that was developed is in line with the stated practices in place and the commitment of the management team (Superintendent, Major, Captain and Lieutenant).

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>New Hampshire Department of Health and Human Services Website</p> <p>New Hampshire statutes 169-B2</p> <p>Individuals interviewed/ observations made.</p> <p>Interview with PREA Coordinator</p> <p>Interview with Intake staff</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections would not detain juveniles arrested under the age of 18. The state of New Hampshire requires juveniles to be held in a state facility under the direction of Department of Health and Human Services.</p> <p>Indicator (b) The Carroll County Department of Corrections would not detain juveniles arrested under the age of 18. The state of New Hampshire requires juveniles to be held in a state facility under the direction of Department of Health and Human Services.</p> <p>Indicator (c) The Carroll County Department of Corrections would not detain juveniles arrested under the age of 18. The state of New Hampshire requires juveniles to be held in a state facility under the direction of Department of Health and Human Services.</p> <p>Compliance Determination</p> <p>The standard is compliant. None of the indicators currently apply. As stated, the Carroll County Department of Corrections does not house youthful inmates (individuals under 18). In New Hampshire, all youth under 18 needing secure detention would be housed at a Department of Health and Human Services facility in Manchester NH. As such, there were no individuals with whom the Auditor could interview about sight and sound separation issues or housing or programming issues. The Auditor confirmed the lack of juveniles through direct observation on the tour, the client population sheet, and through interviews with the PREA Coordinator and Intake</p>

	staff. The Auditor also reviewed the New Hampshire DHHS website for information on confinement facility for individuals under 18.
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Policy 2-C-100 Searches</p> <p>Search training materials</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Superintendent</p> <p>random Staff</p> <p>random Inmates</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Correction Search Policy 2-C-100 Searches prohibits cross-gender strip searches, or as the policy calls the unclothed searches, of inmates except in emergency situations. The policy states, “the Facility policy requires that all cross-gender strip searches (referenced in this Facility policy as Unclothed Searches) be documented. As in the Clothed Search of all other inmates, an Unclothed Search of opposite gender inmates will only be conducted in exigent circumstances.” Agency policy further clarifies the prohibitions on body cavity searches except in exigent circumstances. It states, ““The Facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances. Such searches must be performed by medical practitioners.” Policy language is very specific on the required conditions to have an inmate undergo a body cavity search. “1. Manual or instrument inspection of body cavities, other than searches of the mouth, nose, and ears, will be conducted as follows:</p> <ol style="list-style-type: none"> a. when authorized by the Superintendent or his designee, when there is reasonable suspicion to believe an inmate is concealing contraband or evidence of a crime inside their body cavity; b. pursuant to a warrant issued upon probable cause. The warrant may be dispensed

with, in cases of consent or exigent circumstances. Such exigency must be reasonable and demonstrable;

c. be conducted by a licensed physician or registered nurse of the same sex as the inmate searched, and in the presence of only the number of staff required who are of the same sex as the inmate to be searched and deemed necessary, to witness the removal of contraband and to maintain security.

d. Body cavity searches will be fully documented on the Inmate Unclothed Search Documentation Form, including justification for the search and whether contraband was or was not found.”

The facility reports it has not had any cross-gender strip searches or any body cavity searches in the past year.

Indicator (b) Search policy 2-C-100 prohibit cross-gender pat searches of female inmates and states, in the event of an exigent circumstance requiring opposite gender pat search the staff is required to complete an incident report stating the reason justifying why the action occurred. Page 5 of the Policy includes language consistent with the standard on pat down searches and females access to programming not being contingent on female staffing. “In accordance with PREA, cross-gender pat-down searches of female inmates, absent exigent circumstances, are prohibited. The Facility requires that all cross-gender pat down searches of female inmates be conducted only after exigent circumstances have been established. All such searches will be documented.” Interviews with staff and inmates support that there are no cross-gender pat searches of female inmates. The female inmates interviewed support there is no prohibitions of movement of the unit to programming due to the lack of female staffing. The agency maintains a female staff on each shift and reports no instances where there was cross-gender searches, and inmates and staff spoken with report there were no instances where female inmates were not allowed to attend programming due to lack of female officers available. Policy language at Carroll County also ensures that cross gender pat searches of male inmates are also only completed in exigent circumstances and only with supervisor approval. “In emergency situations, cross gender pat-down searches may be conducted on male inmates if a male officer of the same gender is not available, and only after obtaining permission from the shift supervisor. Furthermore, the pat down search here described must be conducted in the presence of the shift supervisor. An incident report containing the exigent need(s) to conduct such a search will be forwarded to the Superintendent or his designee.”

Indicator (c) Search Policy 2-C-100 as noted in indicators (a) and (b), require the documentation of all exigent circumstances. There was no documentation to review as there has been no cross-gender strip, body cavity searches or pat searches.

Indicator (d) CCDOC PREA Policy 4-D-200 covers the expectation of this indicator and provides operational expectations across the institution. The facility has policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is

incidental to routine cell checks. It's policy states, "Inmates will be allowed 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/housing area checks. Staff of the opposite gender will announce their presence when entering any inmate housing unit at CCDOC."

The Auditor also observed staff announcements on the tour and confirmed with inmates their ability to shower or use restroom facilities without opposite gender staff seeing them. No Inmates reported ever being naked in front of opposite-gender staff. The Auditor spoke with the agency about the privacy in observation cells in intake and medical areas. The Superintendent had the portion of the cell blurred to ensure toileting could occur with a level of privacy. The solution was in place by the second day of the audit. Though most inmate supported cross gender staff announcements occur some inmate reported a less consistent practice of female staff. This was shared with administration who will follow up with the employees.

Indicator (e) The Carroll County Department of Correction has policy language that addresses the expected practices for searching transgender or intersex inmates. Search policy 2-C-100 sets forth the requirement that transgendered individuals are not searched for the purpose of determining genital status. "As indicated in paragraph V. A. 4 above, searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status is prohibited." Intake staff knew that strip searches for the purpose of identifying genital status are inappropriate and that they would find out information through interviews consistent with policy language. Once the Intake staff completes their portion, the inmates are seen by CCDOC Nursing staff. CCDOC reports no cases in which a transgender or intersex inmate was searched to determine genital status. Intake staff interviewed stated that if the client were resistant to discussing the topic, they would be referred to the medical staff with whom the inmate may be more comfortable. All inmates spoken with supported they would not get disciplined for not answering questions during the intake about sexuality or prior abuse history.

Indicator (f) The Carroll County House of Correction trains all staff to be respectful, professional, and in the least intrusive practice possible for searching Inmates. All Jail staff are trained to routinely use the back of their hand instead of the front when completing pat searches. Staff confirmed their training included training on completing cross-gender searches and working with LGBTI Inmates. The training reportedly talks about communication that is professional and supportive of the inmate. CCDOC pre audit questionnaire reports 100 % of the staff have been trained on these procedures. The Auditor was provided with records showing staff training for all. Staff interviews supported the training, including physically performing cross-gender pat searches and the importance of communication before touching the inmate. Staff were aware that transgender or intersex Inmates will have a say in the gender staff who they prefer to complete pat and strip searches.

Compliance Determination

The Carroll County Department of Corrections has a policy in place to address the various elements in this standard. Policy 4-D-200 Prison Rape Elimination Act, and Policy 2-C-100 Searches mirror standard expectation in that cross-gender searches are not allowed except in exigent circumstances. CCDOC goes on to support no cross-gender pat searches of female inmates except in exigent circumstances that are to be documented. The agency extends to male residents the same expectation, that all non exigent searches should be completed by same gender staff. Training documents and policy cover procedures for opposite gender pat search and pat searches of Transgender and intersex inmates as well as the requirement of opposite gender staff announcement. The Auditor reviewed the inmates' level of privacy in toileting and showering while on tour. As noted in indicator (d) the facility corrected the cameras that would have allowed cross gender observation of toilets in observation cells.

Interviews with staff and Inmates were consistent with standard and policy expectations. There is no cross-gender strip or body cavity searches, and inmates can change and perform hygiene without opposite gender observation. The Inmates' report and the Auditor could see during the tour, opposite gender staff do announce their presence or the officer on the housing unit announced the female staff or male staff arrival. The absent and exigent circumstance of cross-gender search compliance was based on policy, interviews with random staff and Inmates, records of cross-gender announcements consistent with policy, training materials, and staff training records. Interviews with female Inmates confirm that they are not restricted from program participation by the lack of female staff to perform pat searches. Interviews with staff also support that they have received information on how to complete a respectful pat search of transgender or intersex inmates. The facility did not have any current or recent transgender inmates.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Language Service Associates Website</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Video in English/Spanish observed on tablet and Kiosk</p> <p>Inmate tablets with PREA Information</p> <p>Superintendent</p> <p>Inmates with Disabilities</p> <p>Random Staff</p> <p>Intake Staff</p> <p>PREA Coordinator</p> <p>PREA Signage in English and Spanish</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections takes appropriate steps to ensure inmates in its jail with disabilities or limited English proficiency have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to provide a PREA safe environment. Policy 4-D-200 Prison Rape Elimination Act addresses the concerns of this indicator. The policy states, "In accordance with PREA 115.16, the Superintendent or designee will ensure that inmates with disabilities, including for example, inmates with hearing, vision, intellectual, psychiatric or speech impairments, have an equal opportunity to participate in, or benefit from, all aspects of the Facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment." As a county jail, the facility must be able to provide services to individuals with a wide variety of medical disabilities, including vision, hearing impairments, cognitive disabilities, and psychiatric impairments, along with those with limited English proficiency. CCDOC provides informative support to those</p>

individuals with significant developmental delays or significant mental illness that might make them a target for abuse. The facility has a medical department and residents support staff provide and will assist individuals with disabilities or cognitive challenges in understanding the Prison Rape Elimination Act and their rights under it. The Auditor spoke with individuals with hearing loss but he did not need aids for communication. The agency, with the addition of tablets, can provide video and audio information on PREA. The Intake officer describes how individuals who cannot read, are hearing or sight impaired or had cognitive challenges could be identified. The Carroll County House of Corrections has resources in place to aid these populations including tablets for the inmates for which PREA information has been loaded and can be used to magnify information or replay audio or visual information. Intake staff confirmed that barriers to comprehension from disabilities or language would be documented in the electronic case management system so others in the facility working with the client can be informed. The facility has limited experience with inmates who are limited English proficient. The facility reports two resources for staff to access professional interpretive services. One is the number provided by the US Marshal services and the other is through the Medical contract service.

Indicator (b) The Carroll County Department of Corrections, as noted above, has limited experience working with individuals with whom English is not the primary language. The facility can hold federal prisoners for the US Marshals Services but does not hold inmates for Immigration and Customs Enforcement. The CCDOC has policy language on working with persons who are Limited English Proficient, the policy direct staff on the use of interpretive services and providing materials in the individual's native language. It states, "Whenever possible, only CCDOC trained and experienced staff and/or other designated community members shall be used as interpreters. Facility staff will not rely on inmate interpreters, readers or other types of inmate assistants, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first response duties, or the investigation of the inmate's allegations." The CCDOC medical contractor has had an interpretive contract with Language Services Associates. The company's website supports they provide video and phone translation in some 240 languages. Due to the limited experience random staff were less certain on how to access interpretive services and often report they would ask their superior for assistance. The Auditor encouraged a training be provided to ensure all staff knew where to go to access such services. Management staff and medical staff have provided sufficient documentation of the LSA contract and access code. The Auditor was able to see on the tour information in English and in Spanish about how to report a PREA concern. This information was available in postings on the unit walls, on the inmate tablets, and on the video visit phone system on each unit.

Indicator (c) Staff were aware in their random interviews that it was not appropriate to use inmates to interpret for each other except in extreme emergencies. This prohibition is also addressed in policy 4-D-200 as stated in indicator (b). The Auditor did not need to use interpretive services to interview random or targeted inmates. The Auditor purposefully added individuals with Hispanic names to ensure if any Limited English Proficient inmates were in the facility unidentified. No individual

spoke with reported knowing inmates who were LEP.

Compliance Determination

As described in the indicators above, the Carroll County Department of Corrections has policy and resources to work with individuals with disabilities or who are LEP. Their efforts ensure an understanding of how the various aspect the agency's effort to protect, detect and respond to victims of abuse and harassment. The Auditor was able to speak with multiple Inmates with disabilities but none who were LEP. The inmates reported knowing their rights, how to report PREA concerns, and how to get help if they had difficulty understanding information.

CCDOC video phone system, postings on the walls and tablets provided PREA information, including the PREA video in English and Spanish (the two most common language spoken at the facility), provide inmates with continual access to PREA Information. Staff interviewed were aware that it was not appropriate to use Inmates to interpret for each other except in extreme emergencies. Line staff knew to contact a supervisor if they needed to access an outside interpreter. Compliance was based on interviews with staff and Inmates and administration as well as the hard materials (posters, pamphlet, handbooks, video, interpretive aids) and policies that support equal access to all services. The educational materials in the variety of languages on the tour support ongoing access to information exists.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Policy 7-B-100 Hiring and Employment Qualifications</p> <p>Employee background checks</p> <p>Contractor Background Checks</p> <p>volunteer Background Check</p> <p>Individuals interviewed/ observations made.</p> <p>Administrative Assistant</p> <p>Facility Investigator (runs background checks)</p> <p>PREA Coordinator</p> <p>Superintendent</p> <p>Summary Determination</p> <p>Indicator (a). Carroll County Department of Corrections has multiple policies that address their hiring efforts, including the PREA policy 4-D-200 and the employment policy 7-B-100. Policy 4-D-200 requires that all employee or contracts have a criminal background check to determine if the individual engaged in any sexual abuse or other conduct that may suggest a likeliness to act in appropriately. The Auditor review the Online Application process for the Carroll County Department of Corrections and the job description. The agency PREA policy 4-D-200 states, "To ensure compliance with PREA 115:17, CCDOC will neither hire nor promote anyone who may have contact with inmates, or enlist the services of any contractor who:</p> <ul style="list-style-type: none"> a. has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or any other institution as defined in 42 USC, 1997; b. 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 c. has been civilly or administratively adjudicated to have engaged in the activity

described in paragraph 22.b. above.”

The CCDOC has added in the past year a questionnaire to capture the above-described information as part of all new employment applications. The agency also went back and had all existing employees at the facility also sign the acknowledgement form confirming they have never engaged in such behaviors. The Auditor interviewed the individual responsible for screening candidate and confirmed that they would not be hired or promoted if any information is found supporting an individual engaged or attempted to engage in any of the behaviors listed in indicator (a). It was also confirmed that any contractor would also be screened and asked similar questions. The Auditor was provided documentation of a random sample of staff confirming the Applicant Verification: PREA Hiring and Promotion Prohibitions form was signed.

Indicator (b). Interview with the hiring Lieutenant, the Captain and the Administrative Assistant support that all new hires, contractors or promotions require that they confirm they have not engaged in the items described in indicator (a). Prior employers would be spoken with to determine any history of sexual misconduct or discipline. Any current employee who is up for a promotion would have a file review before there is an offer made. Individuals with any non-criminal but disciplinary acts would be brought to the attention of the Superintendent before a job offer is made. Any applicant or internal candidate must sign the job description for the position they are applying including the PREA acknowledgment s that they have not engaged in the activities described in indicator (a). Agency PREA policy (page12) states, “In further compliance with PREA 115.17, CCDOC will consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any volunteer, or contractor who may have contact with inmates.”

Indicator (c). The Carroll County Department of Corrections completes criminal background checks on all its employees and contractors. According to the Lieutenant, the background check includes both state and federal databases, sexual offense databases, motor vehicle checks, and fingerprinting of applicants. Agency employment policy 7-B-100 defines the required parts of a background check.

“All applicants, regardless of the position applied for, who have been given a conditional offer of employment, will be required to sign a waiver allowing the Department to conduct an in-depth background investigation to determine their suitability to work in a correctional environment and test their ability and commitment to maintaining a position of trust. This investigation will include at a minimum: a. Criminal record check. b. Motor vehicle conviction check. c. NCIC/Triple III check. d. Local warrant check. e. FBI Fingerprint check. f. Personal history questionnaire. g. Primary and secondary reference interviews. NOTE: During the course of the investigation, the Department will comply with The Prison Rape Elimination Act, specifically Standard 115.17.” The Auditor confirmed that criminal background checks were completed but by state law once the report is run and reviewed it must be destroyed. The Agency has forms in place to track when the initial and the 5-year record checks are done. These items were all found in place during the site visit review of HR files. The facility has run 24 checks in the past year.

Indicator (d). CCDOC completes criminal background checks on all contracted employees and any approved volunteers. In interviews contracted staff support they must pass a background check before being allowed into the facility. There were two contractor hired employees allowed access to the facility, both of whom had criminal background checks.

Indicator (e). CCDOC provided the Auditor with information on five-year criminal background checks. 5 of the 9 random employees selected were employed over 5-years. The file reviews supported the process is being completed. Both the Lieutenant and the Captain confirm there is a system in place to routinely capture criminal background checks on employees at the point of hire and every five years there after. As noted in indicator (c) the agency has a form documenting when the criminal background checks are completed. CCDOC policy also sets forth this requirement. "The agency will conduct criminal background checks every 5 years of current employees and contractors who may have contact with inmates."

Indicator (f). The Carroll County Department of Corrections has all employees sign at time of hire and promotion that they have not committed any of the acts described in indicator (a). All employees interviewed understand the continued responsibility to report any sexual misconduct by themselves or anyone else to their supervisor. The PREA Hiring and Promotion Prohibition form in addition to having the applicant confirm they have never engaged in the acts described in indicator (a) it states the following: "I acknowledge and understand that, should I become the subject to these prohibitions in my current position or any other subsequent departmental position I may hold contact with persons in confinement or under supervision. I will notify departmental management within 24 hours of my involvement in any of the above. I understand the CCDOC has the authority to conduct random criminal background checks under previous standard 115.17 section (e) to ensure compliance with these federal standards in relation to the CCDOC employment practices. Further, I understand that if I am the subject of these prohibitions, I may be subject to termination on employment. In addition, if I falsely certify my eligibility for employment and it is subsequently discovered that I have involvement in any of the above, I will be subject to termination or disqualification for employment for these falsifications."

Indicator (g). The CCDOC address the indicator's concern with accurate information provided at employment. As noted in indicator (f) the form has language requiring truthful and accurate information. Similar information appears on the agency's application for employment which states, "I certify the given answers herein are true and complete to the best of my knowledge." "In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer." The PREA Coordinator confirmed that staff members who provide false information or purposefully omit information would be terminated. There have been no individual employees or contractors who were fired for inaccuracies related to PREA related topics.

Indicator (h). With proper releases of information, the CCDOC allows for the agency to

disclose to other institutions any PREA related concerns. Interviews confirm they may receive requests from outside employers when hiring. The Lieutenant or Captain will speak to prior employers who will include both prior institutional and non-institutional employers. There were zero requests of a former staff member seeking employment at another correctional facility in the last year. The CCDOC has all perspective employees sign a release of personal information which is forwarded to any prior employer. The application online informs applicants that the facility may ask questions about the job's suitability as part of the agency's efforts toward zero tolerance.

Compliance Determination

The Carroll County Department of Corrections has policies and procedures in place' related to hiring that are in compliance with the standards. The agency's PREA policy 4-D-200 selection addressed various aspects of the standard's indicators. The CCDOC has implemented and had all existing staff sign the PREA Hiring and Promotion Prohibitions form in the past year. The Auditor interviewed the Lieutenant, whose staff completed a background investigation on all employees. The agency has all staff and contractors undergo criminal background checks, including AFIS, NIC, Motor Vehicle, and sexual offender registries. The Auditor was also able to review appropriate personnel forms and criminal background checks for both employees and contractors. Record reviews support those employees and contractors at the Carroll County Department of Correction undergoing prior institutional employer checks, pre-employment criminal background checks, and subsequent checks every five years. The Auditor also reviewed the online application and policies on hiring. Compliance for this standard is based on Policies, the documentation provided in advance and confirmed during the onsite visit, and the interviews with the Lieutenant, the PREA Coordinator, the Administrative Assistant and the Superintendent.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>POLICY 4-D-200 Prison Rape Elimination Act</p> <p>Information on Jail Camera upgrades</p> <p>Photo of staff tours</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Superintendent</p> <p>Camera Locations</p> <p>Physical plant layout</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections has not undertaken any major modification in the past three years,</p> <p>Indicator (b) The Carroll County Department of reportedly has added cameras in the previous three years. The facility PREA Coordinator and the Superintendent confirm that all significant incidents in the facility are reviewed to determine if monitoring technology can augment supervision to prevent further incidents. The Superintendent reported that having come from a facility that had undergone a PREA Audit one of his early activities was identifying blind spots. The facility has added 18 new cameras in the past two years and has future plans to upgrade the storage capacity. During the tour, the PREA Coordinator pointed out where new cameras had been added to improve facility supervision of clients and reduce blind spots. As a facility where there is not always direct supervision on all the pods in units, cameras provide the ability to monitor inmate interactions remotely.</p> <p>Compliance Determination</p> <p>The Carroll County Department of Corrections has not done any major renovation to its physical plant in the last three years. The PREA Coordinator confirmed the ongoing efforts to safety needs happen at all levels of the institution. The facility has made other monitoring investments including the use of ‘the Pipe’ which records all tour by</p>

	<p>staff. Interviews with the Superintendent and PREA Coordinator further support the organization's commitment to using technology to improve safety and an understanding of the need to consider sexual safety in any future physical plant modifications. Compliance is based on information provided, observations on the tour, and the knowledge of staff and supervisors about blind spots and efforts made to reduce them as potential points of assault. The Auditor also considered the stated interviews with the agency's leadership and the information provided by the PREA Coordinator on tour, which supported a practice that puts into action investments to improve resident and staff safety. Finally, the Auditor considered the PREA policy which includes language addressing the standard. "CCDOC will ensure compliance with PREA 115.18 which requires that any Facility planning expansion or modification will include consideration of the effect upon the Facility's ability to protect inmates from sexual abuse and requires consideration of how new or updated video monitoring systems, electronic surveillance systems, or other monitoring technology may enhance CCDOC's ability to protect inmates from sexual abuse."</p>
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Prime Care Policy- Response to Sexual Abuse</p> <p>State of New Hampshire Guideline for Forensic Sexual Assault cases</p> <p>Starting Point Website</p> <p>Huggins Hospital website (SANE nursing)</p> <p>MOU with Starting Point (local Rape Crisis Agency)</p> <p>New Hampshire Attorney General website (victim compensations program)</p> <p>State Justice Academy Website</p> <p>Individuals interviewed/ observations made.</p> <p>random staff</p> <p>Prime Care Medical staff</p> <p>Sexual assault trained Investigator.</p> <p>Starting Point representative</p> <p>Huggins Hospital representative (forensic exam access and services)</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections is responsible for the completion of administrative investigations at the jail. The Carroll County Sheriff's Office would complete criminal Investigations. Agency Policy states, "All reports of sexual assault, sexual solicitation or sexual coercion will be investigated by the Deputy Superintendent or by his/her designee and by the Carroll County Sheriff. Immediately reporting sexual assault, sexual solicitation, or sexual coercion is critical, and allows for the timely delivery of support services to offender victims, and to holding perpetrators accountable for their behavior." The Agency policy provides the investigators with a uniform standard of evidence collection on-site.</p>

"A. The Attorney General's fourth edition Sexual Assault Manual (2018) lists the protocols for collecting and packaging evidence. Supervisors will ensure that they familiarize themselves with said protocols.

B. The examiner should always wear powder-free gloves when collecting and packaging evidence. The examiner should always change gloves between specimen collections.

C. Clothing and other evidence specimens must be sealed in paper or cardboard containers.

D. All wet evidence should be dried prior to packaging whenever possible.

E. In the event that the evidence is wet, the items may be first placed in paper bags, then into plastic bags, provided that holes for ventilation are made in the plastic bag.

F. Urine specimens obtained should be sealed in a bio-hazard bag, then in a paper bag and never placed inside the evidence kit.

G. All hospital Occupational Health and Safety regulations should be followed, per Institutional policy.

H. Envelopes containing evidence should never be sealed with the examiner's saliva. Self-adhesive envelopes or tape should be used.

I. Paper bags should be sealed with tape, never staples.

J. A chain of custody with each piece of evidence collected should always be maintained. 23

K. The Attorney General's 2018 edition, Best Practices for Medical Providers, page 43 states: "...if the sexual assault occurred within 5 days of the examination, a Sexual Assault Evidence Kit is to be used."

As noted above state of New Hampshire has a protocol specifically for forensic examination and collection of evidence in sexual assault cases. The protocol was developed through the Attorney General's office with the assistance of medical, legal, and sexual assault advocates to ensure uniform practice. Neither CCDOC medical staff nor Prime Care physicians would complete the forensic exam. Instead, the inmate victim would be sent to a local hospital in the region with for a forensic exam. Interviews with random staff confirmed they understand the importance of preserving evidence. They were able to identify steps needed to secure crime scenes and encourage the preservation of evidence on the reported victim and accused. The CCDOC's Investigator has received training on crime scene investigation as he worked previously for the sheriff's office which also required investigating criminal acts as the jail.

Indicator (b) The New Hampshire protocol, as noted in Indicator (a) developed through the Attorney General's office, covers procedures for youth, but the Carroll County Department of Correction does not serve that population. The Protocol has a

committee that reviews current practices and adjusts consistent with national trends for best practices. The New Hampshire Protocol has been updated several times to the current edition which was completed in 2018. The Auditor reviewed the protocol and compared it to the U.S. Department of Justice document cited and found the topics similar. The person committee includes a representative from the Attorney General's office, Law enforcement, Rape Crisis Advocates, Prosecutors, Medical staff, SANE-trained individuals, and Forensic experts.

Indicator (c) The Carroll County Department of Corrections will offer victims of sexual assault the ability to have a forensic exam without cost. The facility would not complete a forensic exam. They would transport to Huggins Hospital which is 8 miles from the prison. The PREA policy 4-D-200 (page 16) states, "treatment services will be provided to every victim without financial cost, and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident." Policy 2.18 Sexual Assault of an Inmate provides further direction, including the victims would be sent to the hospital for forensic exams. The Auditor confirmed with the Huggins Hospital that though the nurses have not all completed the state certified class, the routine nursing competencies have prepared them to complete sexual assault exams. Some of the current staff have gone through SANE training programs in the past reportedly. The Attorney General's Office has an advisory committee that sets the training requirements for the certification of nurses which is overseen by the state umbrella rape crisis agency, the New Hampshire Coalition against Domestic and Sexual Violence. The Hospital's nurse also confirmed that they would routinely offer victims of sexual assault to have a victim's advocate to support them during the lengthy exam process. Starting point representative also commented that hospitals in the region will bring in SANE-certified nurses if available.

Indicator (d) The Carroll County Department of Corrections has entered into agreements with the local rape crisis agency to provide support services to victims of sexual assault. Starting Point is part of a 13-agency coalition against domestic and sexual assault in New Hampshire. The Auditor had to request an updated MOU as the previous one had expired during the pandemic though it was clearly renewable in two-year increments from the original language. A new version of the MOU was signed in January and forwarded to the Auditor. The MOU clearly states that they will provide accompaniment services to victims taken to the hospital for forensic exams. The hospital representative also confirmed it is their protocol to also offer the services of an advocate to all victims of sexual assaults.

Indicator (e) Both hospital and PREA Coordinator staff confirm that a rape crisis staff would be available to help a victim through a forensic exam, criminal justice interview and provide ongoing support and referral to the victim. The Memorandum of Understanding with Starting Point was provided to the Auditor stating this was possible. The Starting Point representative confirmed that they would respond to a hospital and provide emotional support through professional visits during criminal investigator interviews. They also can make referrals to other agencies if an individual is released from prison to another part of the state.

Indicator (f) The Carroll County Sheriff's Office is responsible for completing

investigations at the Carroll County Department of Corrections. The CCDOC Captain supports a working relationship with the Sheriff's Office. The Lieutenant, the facility's administrative investigator, was the criminal investigator for the Sheriff's Office. He reports he had previously completed criminal investigations at the jail and confirmed the ongoing relationship between agencies. The Lieutenant explained how they would keep in contact to ensure there is an open door of communication and that they would share with the investigators the Prison Rape Elimination Act requirements. The MOU between the facility and the Sheriff's office confirms the responsibility to investigate sexual assaults at the facility utilizing the state's protocols.

Indicator (g) The Auditor is not required to review this indicator.

Indicator (h) The Auditor is not required to review this indicator as the CCDOC has a history of providing access to victim advocates from a local Rape Crisis Agency.

Compliance Determination

The Carroll County Department of Corrections has several policies addressing this standard's concerns. The State of New Hampshire Attorney General's Office, along with state experts, has developed a process for forensic exams consistent with the National Protocol for Sexual Assault Forensic Exams. Investigative procedures are in place to ensure evidence is preserved, and staff are trained to preserve evidence in a sexual abuse case. A Detective from Carroll County Sheriff's Office would conduct the criminal investigation, and the agency has policies describing communication levels. The area also has a Hospital confirmed procedures for forensic. The Auditor spoke with hospital staff who confirmed the hospital would call a local rape crisis agency in addition to the protocol set up by CCDOC to offer supportive services. Starting Point is the regional rape crisis agency who the Auditor confirmed would send a victim advocate to support the inmate through the forensic exam and any interviews as part of the investigative process. Compliance is determined based on the availability of resources to effectively investigate, secure and process evidence. The Auditor reviewed the MOU with Starting Point and discussed the availability of trained nurses at local hospitals. In addition to trained sexual assault investigators, the Auditor also considered that CCDOC staff knew the importance of protecting evidence, including advising inmates not to do anything that would degrade the evidence on their person.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Policy 7-A-102 Administrative Investigations</p> <p>Policy 7-A-103 Criminal Investigations</p> <p>Policy 2-C-103 Crime Scene Search and Evidence and Crime Scene Preservation</p> <p>MOU between the facility and County Sheriff</p> <p>PREA Investigations</p> <p>Individuals interviewed/ observations made.</p> <p>Interview with Superintendent</p> <p>Interview with PREA Coordinator</p> <p>Interview with facility Investigator</p> <p>Observations on the Tour</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections has systems in place to ensure criminal and administrative investigations occur in a timely fashion at their facility. The PREA policy set forth the requirements consistent with standard language stating that all investigations. "All reports of sexual assault, sexual solicitation or sexual coercion will be investigated by the Deputy Superintendent or by his/her designee and by the Carroll County Sheriff. Immediately reporting sexual assault, sexual solicitation, or sexual coercion is critical and allows for the timely delivery of support services to offender victims, and to holding perpetrators accountable for their behavior." The Carroll County Department of Correction has all allegations of sexual abuse or sexual harassment reported to the PREA Coordinator who will notify the Lieutenant, the Deputy Superintendent and the Superintendent. If the allegation is not criminal in nature or involves an allegation of staff misconduct, then the trained Jail staff will complete a non-criminal, administrative investigation. The facility has investigation policies that direct the process if the investigation is being done</p>

internally or externally. The CCDOC had 8 investigations related to claims or sexual abuse or sexual harassment. All eight resulted in administrative investigations but none were found to be criminal in nature.

Indicator (b) The Carroll County Department of Corrections has three policies and an MOU that address the requirement, s of this standard, Policy 4-D-200 Prison Rape Elimination Act, Policy 7-A-102 Administrative Investigations, Policy 7-A-103 Criminal Investigations and the MOU with the county Sheriff. Define the relationship and ensure documentation of the communication between agencies. As noted previously, the Lieutenant was employed by the Sheriff's Office and completed investigations at the jail.

Indicator (c) The MOU reviewed discussed the responsibility of both the Sheriff's Office and the Department of Correction in the event of a crime at the facility. Policy 7-A-103 Criminal Investigations also speaks to the process of coordinating with the Carroll County Sheriff's Office if the facility becomes aware of a criminal act. The policy sets forth the requirement of the preservation of evidence and written staff statements. The policy also informs when incidents involve other law enforcement agencies. In allegations against staff, the State's Attorney General's Office would be notified. In cases of death, the New Hampshire State police would also be involved. The PREA Coordinator and the Lieutenant both confirmed that there would be ongoing communication between the agencies.

Indicator (d) Auditor is not required to audit this provision.

Indicator (e) Auditor is not required to audit this provision.

Compliance Determination

The Carroll County Department of Correction has the policy and trained investigative staff in place to ensure all allegations of sexual assault and sexual harassment are investigated. The DOC has access through the Sheriff's Office to trained law enforcement staff persons who will ensure all crimes, including sexual assaults, are investigated. The Carroll County Department of Corrections has investigated all incidents of sexual contact by inmates. Compliance is determined utilizing the above-stated information that meets Indicators' requirements (a) and (b) and the documents and interviews supporting the relationship between the DOC and the Sheriff's Office. Interviews further supported compliance in that the agency takes seriously all allegations, including those received through third-party sources, and ensures the impartiality of the investigation of staff-involved incidents.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>POLICY 4 D 200 Sexual Assault Prison Rape Elimination Act</p> <p>Carroll County Department of Correction PREA Training materials</p> <p>CCDOC training records</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Random staff</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Correction ensures all staff are trained in the agency's Zero Tolerance for Sexual Misconduct and the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment allegations. In policy 34 D 200 Sexual Assault Prison Rape Elimination Act, the policy set forth training requirements, including a description of all the elements listed in Indicator (a). The policy states, "CCDOC will train all employees who may have contact with inmates on:</p> <ul style="list-style-type: none"> i. CCDOC's zero tolerance policy for sexual abuse and sexual harassment; ii. how CCDOC staff are expected to fulfill their responsibilities under the Facility's sexual abuse and sexual harassment prevention, detection, reporting and response policy; iii. an inmate's right to be free from sexual abuse and sexual harassment; iv. the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; v. the dynamics of sexual abuse and sexual harassment in confinement; vi. the common reactions of sexual abuse and sexual harassment victims; vii. how to detect and respond to signs of threatened and actual sexual abuse;

<p>viii. how to avoid inappropriate relationships with inmates;</p> <p>ix. how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, queer, intersex, or gender non-conforming inmates; and</p> <p>x. how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</p> <p>xi. All training that relates to PREA will be tailored to the genders of the inmates at the Facility.”</p> <p>The Policy goes on to state, ‘In compliance with PREA 115.31 and 115.32, CCDOC shall ensure that all staff, volunteers and contractors who have contact with inmates and who receive PREA training understand the training that they have received through employee signature or electronic verification.”</p> <p>The Auditor reviewed the training materials from the Carroll County Department of Corrections and to confirm the elements described in this indicator were addressed. The 107-page PowerPoint covers the requirements of this indicator. The PREA Coordinator confirmed that no matter what role in the institution, all employees are aware of their role in preventing, detecting, and responding to sexual assault and sexual harassment of inmates. In interviews, random staff described things they do daily to keep inmates' PREA safe. The staff members knew the signs and symptoms of someone who may be victimized, the rights of inmates related to PREA, and were able to give examples of why sexual assaults may occur. Staff persons confirmed they get training on how to avoid getting into inappropriate situations with an inmate, their first responder duties, the right of both staff and inmates to report without fear of retaliation and how to work with LGBTI Inmates respectfully. The staff knew to use the transgendered or intersex inmate’s preferred name and pronouns. They were aware that a multidisciplinary committee reviewed the transgender inmate’s case individually to determine housing, canteen items, search procedures, and other accommodations for safety.</p> <p>Indicator (b) The Carroll County Department of Correction is a co-correctional environment. All employees are trained in working with both male and female inmates, including how males and females may differ in their reactions to abuse. Staff provided examples of how women and men might be targeted for sexual abuse or how their reactions might differ as victims. Since there is only one facility in the county all staff are trained using the same information and there is not transfers. The Auditor confirmed that new staff who worked in prior correctional setting would still get the full training at time of on PREA at Carroll County Department of Corrections.</p> <p>Indicator (c) The CCDOC employees and contractors report they receive training on PREA annually. This is the facilities first PREA Audit and they have been working over the past three years to get into compliance with the standards including development of an effective training program. All new staff get an education at CCDOC on PREA upon hire and then annually either receive refresher training along with any related policy updates. Staff records and their knowledge of the training information indicators support that all staff have received training. Staff report they get a full</p>

PREA specific training annually and will get updates to policies or other information at shift briefings. The Auditor requested the training records of the HR files selected, which included employees in their first year as well as senior staff who's record support PREA as an agency topic as far back as 2013. In addition, the facility provided all staff training records for the past year.

Indicator (d) The PREA Coordinator reports that staff sign into training to get credited for the annual training hours. The Auditor reviewed the training records that support all staff completing the mandatory class, not just correctional officers. The training material Inmate/Staff boundaries and other elements staff can due to support the zero-tolerance culture and avoid allegations by resident against staff through maintaining professional demeanor at all times. The Agency policy states, "CCDOC shall ensure that all staff, volunteers and contractors who have contact with inmates and who receive PREA training understand the training that they have received through employee signature or electronic verification." The Auditor made suggestions on adding an acknowledgement statement for staff to sign when completing the class. The PREA Coordinator agreed to make these added changes to the training roster form. The Auditor based compliance with this indicator on the staff apparent retention of the training materials, through the random staff interview questions, the documentation provided and the PREA Coordinators agreed changes moving forward.

Compliance Determination

All staff are trained in Carroll County Department of Corrections Zero Tolerance policies toward sexual assault and sexual harassment. The employees confirmed they have been trained on PREA and understand their duties related to policy 4 D 200 Sexual Assault Prison Rape Elimination Act, including how to protect, detect and respond to incidents of sexual harassment or sexual abuse. The Auditor requested the training records of random staff persons, which further supported annual training when reviewed. In addition to reviewing the training materials in indicator (a), the Auditor considered the staff's ability to describe these elements in their interviews, which supported the retention of the information. Compliance determination was based on training records, the materials used in presentations, and random staff ability to share examples of the content they had learned as part of PREA training consistent with standard requirements.

115.32	Volunteer and contractor training
	<p data-bbox="256 185 983 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 342 1050 376">Policies and written/electronic documentation reviewed.</p> <p data-bbox="256 409 1189 443">Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p data-bbox="256 488 1091 521">POLICY 4 D 200 Sexual Assault Prison Rape Elimination Act</p> <p data-bbox="256 555 1174 589">Carroll County Department of Correction PREA Training materials</p> <p data-bbox="256 633 1035 667">CCDOC training records for Contractors and Volunteers</p> <p data-bbox="256 768 882 801">Individuals interviewed/ observations made.</p> <p data-bbox="256 846 509 880">PREA Coordinator</p> <p data-bbox="256 913 488 947">Contracted staff</p> <p data-bbox="256 992 544 1025">Observation on tour</p> <p data-bbox="256 1126 608 1160">Summary Determination</p> <p data-bbox="256 1205 1477 1865">Indicator (a) There are limited contractors and volunteers providing direct service to inmates at the Carroll County Department of Correction. Physicians at CCDOC are employed by PrimeCare a Medical treatment provider and the Mental Health Contractor is employed through a local mental health clinic. All contractors or volunteers who have routine access to the facility are required to undergo the PREA education program. As part of that program, the individuals are trained on PREA consistent with the agency policy, which requires training on the zero-tolerance culture toward sexual assault or harassment and knowing when and how to report concerns. Due to the recent pandemic many outside voluntary services were interrupted. CCDOC policy sets forth the requirement when it states, "all volunteers and contractors who have contact with inmates shall be notified of the Agency's zero-tolerance policy regarding sexual abuse and sexual harassment; and will be informed of CCDOC's requirements and procedures for reporting such incidents." As most contracted staff work fulltime, they receive the whole PREA education class given to staff. Contractor will be educated about PREA by the Lieutenant who serves as the PREA investigator.</p> <p data-bbox="256 1910 1477 2067">Indicator (b) The CCDOC policy speaks to training program when it states, "Volunteer and Contract Training, all volunteers and contractors who have contact with inmates shall receive training on their responsibilities under CCDOC's policies and procedures regarding sexual abuse/harassment prevention, detection and response." The level</p>

and type of training provided to infrequent contractors, and volunteers is based on the services they provide and level of contact they have with inmates. The Lieutenant determines the level of education the contractor or volunteer needs. All contractors, interns and volunteers who have contact with inmates are notified of the CCDOC's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. The Auditor confirmed with health care staff that individual providing direct services to inmates undergo CCDOC training annually. Individuals who have routine visits (religious staff, AA/NA, educational volunteers, etc.) get an abbreviated educational program. The Auditor was provided examples of orientation training materials for any new contractors/volunteers.

Indicator (c) The policy requires individuals to sign for the information they receive. "CCDOC shall ensure that all staff, volunteers and contractors who have contact with inmates and who receive PREA training understand the training that they have received through employee signature or electronic verification." The form states, "I have received training on the quote standards of ethics for volunteers and contractors " and for PREA. I have also had an opportunity to ask questions or get clarification on any issues regarding my volunteer activities or contract services with the Carroll County Department of Corrections." The Auditor was provide documents for all 9 contractors or volunteers approved to enter the jail. The Auditor was also able to speak to contractors as part of the audit process to confirm they were educated on PREA.

Compliance Determination

CCDOC is compliant with the standard expectations. The facility ensures all contractors and volunteers receive training in the agency's efforts to prevent, detect and respond to sexual assault and sexual harassment. Training records, interviews with contractors on the tour, and formal interviews support they have received comprehensive training on the zero-tolerance policy and how to report a concern. Training records and interaction with contractors as part of the tour clearly support understanding the agency's Zero Tolerance to PREA related issues. Compliance was determined through supporting documents, random contractors, and interviews with the contracted staff persons who were able to identify training elements. The Auditor was able to use the volunteer training materials and past documentation of training for this group to support compliance. The Auditor also considered the information provided to all individuals who enter the facility are educated on PREA and how to report a concern.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>POLICY 4 D 200 Sexual Assault Prison Rape Elimination Act</p> <p>Inmate phone system</p> <p>Inmate Handbook</p> <p>Inmate Tablet</p> <p>Inmate Sign-off documentation</p> <p>Individuals interviewed/ observations made.</p> <p>Intake Staff Person</p> <p>Classification staff</p> <p>Inmates</p> <p>Observation on tour of PREA Signage in three languages</p> <p>Observation of the PREA Video.</p> <p>Summary Determination</p> <p>Indicator (a) Not all inmates were not being provided information immediately upon admission as it was discovered on the tour of the facility. Sixty percent of the population is released in less than three days and the facility was providing PREA to all who stayed for 72 hours in custody. To resolve this, the PREA Coordinator developed a training script for all trained intake staff to provide basic information about the inmates' PREA rights, the zero tolerance toward sexual abuse or sexual harassment, how to report a concern, how to access more information about PREA. (handbook, tablets, unit kiosks, postings, and PREA brochure now being provided at intake) They are also informed that more information will be provided in the next few days by during the classification process. Photos of the new script posted in the intake area were provided to the Auditor to support implementation. The Auditor determined the resolution provided the appropriate information to all inmates moving forward.</p>

Indicator (b) All Inmates at CCDOC are provided with the facility-specific PREA information within 30 days in the facility entering the facility. As a pretrial facility, many inmates are released before the 30-day period. Data provided showed only 182 individuals in the previous 12 months or about 20% of the population, stayed over 30 days. The facility reports show that all inmates who remained in the facility for 72 hours were provided and enhanced education on PREA (372 had received education)

All inmates have access to the PREA materials on the unit, in their handbook or on tablets they can use. The materials explain the facility's steps to investigate and support individuals if an incident occurs. The inmates can see written PREA materials, the PREA Education Video, and the inmate handbook. Random inmates confirmed education into PREA though many reports they have not accessed the materials. During the tour, some units had difficulty with Wi-Fi but inmates could still access the PREA video through the kiosk used for video visits. The Auditor observed materials posted on the units about reporting and confirmed with inmates through formal and informal conversations that they knew about PREA, how to report a concern, that reports can be made without fear of reprisal and that the facility will investigate all allegations. The agency policy covers new admissions' education when it states, "The Inmate Orientation and intake process for newly admitted inmates will include offender education, consisting of verbal and written information about preventing and reporting sexual assault. CCHOC's Inmate handbook shall also include the same information."

Indicator (c) All Inmates at the Carroll County Department of Correction have received an education into PREA and how to report any concern, as noted in indicator (b). The Agency does not treat individuals transferred from other county jails any differently than those directly admitted to the Carroll County Jail. The Superintendent confirmed that there are limited reasons for inmates to be moved between county jails but it does happen at times. The Auditor did speak with Inmates from other counties who reported they were educated about PREA. CCDOC policy addresses the indicator when it states, "all inmates transferred into CCDOC from other facilities, as well as all newly admitted inmates, shall receive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents, and on CCDOC's policy and procedures for responding to such incidents."

Indicator (d) Education is available to inmates at CCDOC in multiple languages and forms from written to video to large print documents. The videos can include closed captions for hearing-impaired inmates on the tablets. Inmates support that they can go to staff if they need assistance in comprehension of written or oral PREA education. The assistance is available to any individual who needs assistance, including those with physical disabilities, cognitive limitations, or not reading. Many inmates stated that PREA was not a concern, but they knew the information was available and stated there were people who could help, including line officers. During the tour, the Auditor saw PREA Information in two languages and had an inmate show me how to find PREA information and the detainee handbook on the tablet system and a kiosk. The PREA Coordinator reports that the CCDOC will provide inmate education in formats accessible to all inmates, including LEP, disabled, and inmates with limited reading skills. The Auditor confirmed this in interviews with inmates and

observations while moving about the facility. The Auditor was provided with a handbook in Spanish, the second most common language spoken. The CCDOC reports having limited experience with individuals who do not speak English. Inmates support staff would be able to aid those who have difficulty with reading comprehension. Tablets allow individuals to increase written materials' size, and the video allows for repetitive playback.

Indicator (e) The Auditor reviewed documentation inmates signed at admission, including the handbook. The Auditor recommended specific language be added to the form to ensure the inmate acknowledges the PREA education. During the post-audit period, the Auditor received the modification of the form.

Indicator (f) CCDOC ensures that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats. The PREA video are on the tablet as it the handbook and PREA Brochure information. The Video is also available on the video visit kiosk. Observations throughout the tour support there is materials available to inmates continuously. The information viewed included electronic handbooks, posters, and other signage about PREA, the local rape crisis agency and reporting resources. Inmates have access to tablets that provide the same information found on the unit, including PREA-specific information and institutional information such as the inmate handbook.

Compliance Determination

The Carroll County Department of Corrections expects inmates to be educated upon admission. The agency expects all individuals have been informed no matter their disability or language barrier. Inmates at CCDOC confirm they are educated on PREA and zero-tolerance expectations. PREA information is now reviewed with the inmate by the Intake Officer. They are provided a PREA brochure and informed about other sources of PREA information and upcoming additional education. The information reviewed is signed by the inmates and placed in their case records. The facility addressed concerns with some of the initial education process and documentation. The inmates have access to handbooks that inform them about the consequences for negative behavior, including sexual misconduct. It also informs the reader about PREA and the importance of reporting and seeking help. Information, available in multiple languages, includes contact information to external agencies, and the local rape crisis agency.

CCDOC has provided multiple ways to inmates to access PREA information at intake and throughout their stay. Compliance determination considered the supporting educational documents, the inmates' answers about training, and their knowledge about facility-specific steps for reporting a concern. Further supporting compliance is the Auditor's review of the materials the facility implemented to better educate and document inmates about their rights related to the Prison Rape Elimination Act.

115.34	Specialized training: Investigations
	<p data-bbox="256 185 983 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 342 1050 376">Policies and written/electronic documentation reviewed.</p> <p data-bbox="256 409 1189 443">Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p data-bbox="256 477 1091 510">POLICY 4 D 200 Sexual Assault Prison Rape Elimination Act</p> <p data-bbox="256 544 767 577">Training information for investigator</p> <p data-bbox="256 611 603 645">MOU with county Sheriff</p> <p data-bbox="256 678 1230 712">Website of the New Hampshire Police Standards and Training Council</p> <p data-bbox="256 835 882 869">Individuals interviewed/ observations made.</p> <p data-bbox="256 902 509 936">PREA Coordinator</p> <p data-bbox="256 969 762 1003">Interview with trained Investigators</p> <p data-bbox="256 1037 509 1070">Investigative files</p> <p data-bbox="256 1193 608 1227">Summary Determination</p> <p data-bbox="256 1261 1476 1720">Indicator (a) The Carroll County Department of Corrections (CCDOC) investigates only non-criminal administrative cases of sexual harassment. If the allegation is of a sexual assault or appears to be criminal in nature the case would be investigated by the Carroll County Sheriff's Office (CCSO). The CCSO staff are law enforcement officials certified by the State of New Hampshire and empowered to investigate and arrest. The PREA Coordinator confirmed that staff at CCDOC and CCSO have been trained in investigation allegations of sexual misconduct in a correctional center. The Lieutenant at CCDOC who is responsible for completing administrative investigations previously worked for the CCSO and completed criminal investigations at CCDOC. The Auditor reviewed the training materials provided and the state's Police Standards and Training Council's website.</p> <p data-bbox="256 1753 1476 2089">Indicator (b) The Auditor reviewed the training to ensure the content was consistent with the standards required by the standard. The 140 slide training reviewed and the interview with a trained investigator confirmed the training covered how to communicate with a victim of sexual assault, the use of Miranda and Garrity Warnings, proper steps in the collection and preservation of evidence, and the factors in making a determination of substantiation for administrative action or prosecutorial referral. The Auditor also spoke with the investigator on how they would implement the elements of the training in the course of an investigation. Agency policy states</p>

	<p>“Staff conducting investigations into sexual abuse and sexual harassment of inmates will receive specialized training in the techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecution referral..” The CCDOC also trains all staff on how to preserve a crime scene and protect evidence for contamination.</p> <p>Indicator (c) Training records and a copy of the certificate was provided for Lieutenant who complete investigations. The facility also provided related trainings the Lieutenant took in working with victims of abuse. He has taken courses sponsored by the Attorney General’s office and others sponsored by advocacy agencies. The trainings certificates also included a training on working with individuals with Problem Sexual behaviors. The Lieutenant was able to provide some background on the training he has undertaken in both his police officer days and as well as his time in corrections. The CCDOC Superintendent is also been trained as an investigator when he was in charge of PREA compliance in his prior employment in another county.</p> <p>Indicator (d) The Auditor is not required to review this indicator.</p> <p>Compliance Determination</p> <p>The Carroll County Department of Corrections ensures that staff who complete investigations have received appropriate training on investigating sexual assault in a correctional setting. Documents and interviews support that the facility’s investigators are trained in the requirements of a PREA related investigation. Examples of investigations completed and the supporting training documents also supported the Auditor’s findings.</p>
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>POLICY 4 D 200 Sexual Assault Prison Rape Elimination ActPrimeCare Policy: Response to Sexual Abuse</p> <p>Training slides for Med/MH Staff</p> <p>Individuals interviewed/ observations made.</p> <p>Medical Staff</p> <p>Mental Health</p> <p>Interview with Hospital staff</p> <p>Summary Determination</p> <p>Indicator (a) Carroll County Department of Corrections PREA policy requires specialized training for medical and mental health staff. "The Department requires that full and part-time medical and mental health care providers for inmates are trained to detect and assess signs of sexual abuse and sexual harassment, to preserve physical evidence of sexual abuse; 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 CCDOC ensures that all full and part-time healthcare practitioners in its facilities have been trained in the detection of signs of sexual abuse and sexual harassment. The training also includes how to preserve physical evidence of sexual abuse, effective communication skills for communication with victims and how to report a concern. PrimeCare, the employer of the healthcare staff, uses Relias and its own policies to ensure staff are properly trained on what to do with a potential victim of sexual abuse.</p> <p>The Health Services Administrator reports staff are trained on key elements in indicator (a). The Auditor's formal and informal conversations support medical staff knows how to protect DNA evidence and whom to notify in the correctional staff upon becoming aware of a sexual assault.</p> <p>Indicator (b) The staff does not complete a forensic exam. Discussions with the local hospital confirmed the availability of trained nurses performing sexual assault exams.</p>

Indicator (c) Documentation was provided to the Auditor for the staff confirming the specialized training was completed. The Auditor reviewed the training materials from the Relias course and the PrimeCare Policy REA 201 for medical and mental health professionals and considered the materials' staff knowledge. Individuals in both the medical and mental health staff confirmed they had completed the specialized training as well as the CCDOC training on PREA.

Indicator (d) A review of the training record and the interview with staff confirms that all Medical and Mental Health Staff received the same training as the CCDOC employees annually and the training described in 115.32. CCDOC training records reviewed by the Auditor further support compliance.

Compliance Determination

Medical and Mental Health Staff at CCDOC has completed appropriate PREA training provided with a medical and mental health focus. The Auditor met formally with staff as well as asked questions on the tour and subsequent movements in the facility. Medical and Mental Health staff knew to whom to report allegations and suspicions of sexual abuse or sexual harassment. They were able to explain the reporting would be up their agency chain of command while also notifying the chain of command of the prison. Medical and Mental Health staff knew to also report any concerns to the PREA Coordinator, Investigator, Major or Superintendent. Medical staff will not do forensic medical examinations but are aware of how to protect evidence and what facilities they would refer inmates to for an exam by a SAFE or SANE if needed. Compliance is based on the medical and mental health staff's knowledge of how to protect the inmate victim and evidence and how to provide ongoing support. As noted, Indicator (b) is NA, but the auditor confirmed the availability of the forensic exam exists in the community.

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4 D 200 Prison Rape Elimination Act</p> <p>Policy 2 A 118 Inmate screening and referrals</p> <p>Policy 2 A 121 Classification Plans</p> <p>Sample Screening tool</p> <p>Auditor Selected files for review</p> <p>Additional screenings provided through the corrective action period</p> <p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>PREA Coordinator</p> <p>Health staff.</p> <p>Classification Officer</p> <p>Random Inmate</p> <p>Intake staff</p> <p>Observations on tour</p> <p>Summary Determination</p> <p>Indicator (a). All inmates, including transfers admitted to Carroll County Department of Corrections, are screened for potential victimization no matter how often or how recent they have been in custody. PREA Policy 4 D 200 sets forth this requirement, the policy states, "Upon arrival, all inmates will be screened, using an objective screening instrument, to determine potential vulnerabilities to sexual abuse. These vulnerabilities include age; physical build; whether the inmate has been previously incarcerated; identifying or presenting as LGBTQIA, (lesbian, gay, bisexual, transgender, queer, intersex, asexual) or as gender-nonconforming; having mental, physical or developmental disabilities; limited English speaking skills; having experienced previous sexual victimization; being physically weak or impaired; recovering from injury or intoxicated; accused or convicted of certain crimes including</p>

sex offenses against an adult or child (4-ALDF-4D-22-1) or whose criminal history is exclusively nonviolent; the inmate's own perception of vulnerability; and whether the inmate is detained solely for civil immigration purposes." The agency's Classification policy also sets forth a requirement for all detainees to be screened upon admission for risk of being abused or being a perpetrator of abuse. The facility utilizes information provided in both interviews and review of records to ensure accuracy. The Auditor was provided examples of records of admissions and reviewed onsite a random sample of the current population to review. Inmates spoken with all confirmed they were asked questions consistent with the PREA screening tool. The interview with the Lieutenant who oversees admissions confirmed detainees being transferred into the County Jail are processed in the same way as direct admissions.

Indicator (b) The CCDOC policy requires intake screening to occur in the first day. "Inmates housed at this Facility will be screened within 24 hours of arrival for potential vulnerabilities or tendencies of acting out with sexually aggressive behavior. The Inmate Services Coordinator will house these individuals accordingly." The Auditor reviewed files of current and former inmates for compliance with the timeliness and reviewed the CCDOC pre-audit report confirming inmates are screened for risk of abuse within the first 72 hours. Inmate interviews confirmed they were asked questions consistent with a screening process on the day of admission. Discussions with facility administration confirmed two-thirds of the population held less than 72 hours. The facility confirmed that 98.1 percent of the screenings were completed on time.

Indicator (c) The Carroll County Department of Corrections has developed a tool for screening inmates for potential sexual violence or sexual victimization. The tool utilizes information from the inmate's criminal records, other correctional settings, and self-reported information. The facility did not initially have a scoring matrix though they were asking all the required elements. The screener will ask a series of questions at admissions based on the screening tool. They will also gather information from the criminal record database. During the initial days after the site visit, the PREA Coordinator and the Classification Lieutenant developed a scoring system for the information obtained. They also developed information about how to use the information to inform bed, housing, work, education, and programming assignments. The Auditor discussed with the PREA Coordinator and the Lieutenant that all individuals who complete the screening must be trained in how to score and how to use the information from the tool. Documentation of notice to appropriate staff was provided.

Indicator (d) A review of the objective tool used in the Carroll County Department of Corrections shows that it accounts for all ten elements required in this indicator. Agency policy as noted in Indicator (a) defines elements consistent with the standard. Intake staff, nurses, and inmates confirm the process is done individually away from other detainees to provide the inmate with the opportunity to disclose any concerns. Random inmates interviewed, support the process, including staff asking them about their feeling of safety in the environment. Medical staff asks some sensitive questions again as part of the process developed by Primecare. This practice allows an inmate with past victimization to disclose to a medical professional who may be perceived as

more comforting than a uniformed officer. This also allows to silo sensitive information about past abuse to health record which has limited access. The mental health department will forward information on past victimization or perpetrating behaviors. The PREA scoring results are also limited to classifications and facility management.

Indicator (e) The Carroll County Department of Corrections tool considers the inmate's history of violence or sexual abusiveness in the community and prior institutional settings. The Screening tool includes:

- a. review of convictions for violent offenses
- b. History of sexual abuse outside of an institution
- c. History of sexual abuse in an institutional setting
- d. History of institutional violence

Staff confirmed they consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the CCDOC, in assessing inmates for risk of being sexually abusive. Individuals who screen as known or potential aggressors are kept away from known perpetrators.

Indicator (f) The Initial review of inmate records and interviews did not consistently prove that residents were being reasked about sexuality, victimization, and perception as part of the reassessment nor were all the assessments completed in the 30-day window since admission. During the corrective action period, the PREA Coordinator ensured the process of completing the reassessment in a time period consistent with the standard. Also reviewed was the need to ask required questions to properly reassess an individual's PREA scoring. The facility provided documentation to support these changes. The Auditor was provided a sampling of inmate screening showing the screening being completed in a timely fashion after the issue was addressed.

Indicator (g). The Lieutenant and the PREA Coordinator confirmed an inmate's risk level would be reassessed when needed. The inmate would be reassessed if they were either the victim or the perpetrator of sexual violence if they engaged in consensual sex in violation of facility rules if additional information becomes known that would affect the scoring. The Auditor confirmed these expectations with the PREA Coordinator, the screening staff, and the medical staff. The CCDOC controls access to responses to questions asked during this screening to ensure that sensitive information is used to exploit an inmate. The medical record of Primecare is separate from the CCDOC custodial management system. Disclosures made in the Medical or Mental health record are completely siloed from the custody staff.

Compliance Determination

All inmates have been screened for risk of abuse. The tool covers the elements of indicators (d) and (e). The facility's staff showed the auditor the process by which all inmates are initially scored upon admission. Staff and inmate support this process

begins within the first hours on site. The tool uses information from the inmate's current arrest, prior information in the agency records system, and direct interview questions by both custody and medical staff. The auditor determined that residents were not being reassessed and the tool lacked a scoring matrix to ensure objective practice. The agency worked with the Auditor to modify the process, provided training on screening instrument expectations, and track compliance. During the corrective action period, the Auditor was provided information supporting the changes that were made and the reassessments were happening in a timely fashion.

The Carroll County Department of Corrections has a policy language in place consistent with the standard. Though some aspects were not in place initially the correct questions were being asked. Compliance is based on policy, staff and inmate interviews, and the documentation provided. The documentation included additional screening supporting the institutionalization of the agreed changes.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4 D 200 Prison Rape Elimination Act</p> <p>Policy 2 A 118 Inmate screening and referrals</p> <p>Policy 2 A 121 Classification Plans</p> <p>Memo describing the use of screening information</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Intake Officer</p> <p>Classification</p> <p>Housing Officers</p> <p>Random Staff</p> <p>Random inmates</p> <p>Observation on tour</p> <p>Summary Determination</p> <p>Indicator (a) The CCDOC makes individualized determinations about how to ensure the safety of each inmate. The PREA screen used at CCDOC provides immediate assistance in determining the appropriate housing unit for any new inmate. If an individual is a known perpetrator of sexual offenses, they would be prohibited from being placed in the same cell as an individual with a known victim history. During Covid 19 all individuals are initially housed by themselves for the health and safety of the institution. The Classification Lieutenant will review all screenings. During the site visit, the Auditor was able to learn from the Lieutenant, Superintendent, and PREA Coordinator how informed decisions are to be made regarding housing. The Auditor required the development of some documentation describing the decision process for placing individuals in beds, units, work, education, and programming assignments. As a county jail with limited units housing both male and female detainees the Auditor wanted to ensure housing considerations included steps to protect known victim history individuals from potential aggressors. The PREA Coordinator and the</p>

Classification Lieutenant developed documentation of a plan to best protect individuals if housing on different units is not immediately available. The Superintendent was clear the any imminent risk would be resolved by moving an individual to another county jail if separation at CCDOC was not a possibility in the current population. Agency Policy 2 A 121 defines the classification purpose consistent with the standard. "The Facility's Classification protocols are used to promote public safety and institutional order. They provide guidelines to place inmates in the least restrictive level of supervision required based upon their assessed level of risk an is designed to provide a manageable, fair, and consistent process for classifying inmates according to their individual, custodial and program needs. The procedures herein are intended to create Classification protocols that assesses each inmate relative to the risk they present to themselves, to other inmates, to staff and/or to the community. It is based upon a standard set of objective criteria in accordance with all applicable laws and standards."

As a pretrial facility, there are no required therapeutic programs, but individuals can be referred to treatment with mental health staff or can be referred to STARTING POINT, the local rape crisis agency. As a jail, there are limited work positions for inmates, but PREA scores could impact employment opportunities for inmates. The CCDOC has provided in the documentation described above cell, housing, work, programming, and education assignments. The PREA Coordinator is hoping to expand programming and educational opportunities as Covid restrictions are diminished.

Indicator (b) The Superintendent, Classification Lieutenant, and the PREA Coordinator discussed how the facility looks at the safety need of all individuals at intake and throughout the inmate's stay. Line supervisors support they monitor individuals who peers may target or those they perceive could be easily manipulated. Staff Random staff repeatedly stated in interviews the importance of learning the inmate's routine so they can identify when the behaviors change. The random inmates interviewed supported that staff are approachable, take any threat seriously, and confront negative behaviors though they don't see much sexual harassment at CCDOC. Interviews with staff also confirm they would act if the inmate voiced concerns. During the initial screening process, inmates are asked about their perception of safety by medical staff. Transgender or intersex inmates are also asked about housing and safety needs. Agency policy addresses the concern when it states, "In making housing and program assignments for transgender or intersex inmates, Intake staff will ensure the person's health and safety and determine whether their placement would present management or security problems. The inmate's own views with respect to his or her own safety shall be given serious consideration."

Indicator (c). The Carroll County Department of Corrections has a policy language on working with Transgender and Intersex individuals. Policy 4 D 200 defines the goals of the CCDOC to ensure a safe and nondiscriminatory environment. "In making housing and program assignments for transgender or intersex inmates, Intake staff will ensure the person's health and safety and determine whether their placement would present management or security problems. The inmate's own views with respect to his or her own safety shall be given serious consideration. 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. Inmates identified as LGBTQIA shall not be placed in housing units solely on the basis of such identification or status.” There were no intersex or transgender individuals available to speak with during the site visit.

Indicator (d) Carroll County would have a multidisciplinary committee meet with Transgender or Intersex inmates upon admission, at six months or at any significant point between. Since there was no current or recent cases to review the Auditor spoke with various staff and administration about the process. Policy language covers the expectations consistent with the standard. “Each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.”

Indicator (e) Absent a case the Auditor had to confirm with the administration the case-by-case review about the potential housing of transgender individuals at CCDOC. As noted in indicator (b) the policy language supports this process as did the interviews with the PREA Coordinator and the Lieutenant.

Indicator (f) All staff interviewed randomly knew transgender individuals should shower separately from other residents. Showers are individual use in the facility and policy addresses this expectation. “Transgender and intersex inmates will be given the opportunity to shower separately from other persons.”

Indicator (g) The Carroll County Department of Correction does not, by policy, practice, or legal requirement, house all LGBT inmates in one housing unit. There is no legal judgment requiring such a condition to exist. This was confirmed with interviews with the PREA Coordinator, random staff, and LGBTQI inmates. The Auditor reviewed the population report to further ensure this was not the practice at CCDOC. Policy language states, “Inmates identified as LGBTQIA shall not be placed in housing units solely on the basis of such identification or status.”

Compliance Determination

The Carroll County Department of Correction utilizes the information from inmate screening to protect their safety and limit the likelihood of assaults. The agency has demonstrated how the information obtained at intake is used in the facility at multiple levels. The documentation and Interviews completed support systems are in place to work with all LGBTQI detainees. The Auditor required the development of a plan that documents the in-place practice. Compliance is based on information provided in interviews with the PREA Coordinator, Classification Lieutenant, Superintendent and intake staff person, and the agency policy. During the Corrective action period, the facility provided the necessary documentation on screening and how to use the information.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4 D 20 Sexual Assault Prison Rape Elimination Act</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Correction has not housed any individual in involuntary segregation for being an actual or potential victim of sexual assault in the past year. PREA policy 4 D 20 states,“ CCDOC’S policy prohibits placing inmates at high risk for sexual victimization in involuntary, segregated housing, unless an assessment of all available alternatives has been made, and it has been determined that there is no available alternative means of separation from likely abusers.” Discussions with the Superintendent and the PREA Coordinator confirm that inmates’ safety is a daily consideration. The facility has multiple units and wings which can be utilized to keep individuals apart without having to go as far as protective custody.</p> <p>Indicator (b) Discussions with facility administration support Inmates who are victims or at risk of being victimized would have shall have access to programs, privileges, education, and work opportunities. The CCDOC restricts access to programs, privileges, education, or work opportunities, the CCDOC the agency requires documentation of why and a regular review including at a minimum every 30 days. The Superintendent reports his relationships with other county jail administrators would allow them to move individual to further lessen the likelihood of using protective custody measures. Discussion with staff working disciplinary unit confirmed there have been no cases of individuals being housed for involuntary non-disciplinary protective custody. The Superintendent supported they would consider many other options before placing the victim in any form of restrictive housing.</p> <p>Indicator (c). As noted in indicator (b) the Superintendent stated the facility would not want to place any further restrictions on an inmate victim that what is necessary to ensure safety. The preaudit tool stated there was one case but under further review it was determined it was a voluntary request of the inmate. Agency policy languages in 4 D 200 sets forth the requirement if protective custody was to be used it must be evaluated at a minimum every 30 days. Policy requires “If an involuntary segregated housing assignment is made, CCDOC shall afford the inmate a review every 30 days</p>

to determine whether there is a continuing need for separation from the general population.”

Indicator (d) As noted in indicator (c) the agency policy covers the requirements. Absent a case to review the Auditor can only consider the policy statement and administration descriptions on how they would handle such situations.

Indicator (e). Agency Policy addresses the fact that if someone was housed involuntarily in a form of segregation, the case would be reviewed regularly. Every 30 days, the CCDOC will afford each inmate a review to determine whether there is a continuing need for separation from the general population. The PREA Coordinator confirmed that he would be involved in this process if it was to occur.

Compliance Determination

Absent a case of involuntary segregation at the Carroll County Department of Corrections; the Auditor must base compliance on policy, an understanding of general segregation/protective custody rules, and interviews with staff working the units, the PREA Coordinator and the Superintendent.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>PREA Brochure</p> <p>Inmate Handbook</p> <p>PREA Posters</p> <p>Individuals interviewed/ observations made.</p> <p>Random Inmates</p> <p>Observations on tour</p> <p>Inmate tablets</p> <p>PREA Coordinator</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections provides inmates with multiple ways of reporting PREA concerns of sexual assault, retaliation or staff negligence that leads to abuse. The facility encourages inmates to feel comfortable reporting to any staff member, contractor or volunteer, or communicating with outside agencies. The facility provides this information in brochures, posters, handbooks, and an orientation video emphasizing the importance of reporting. All residents receive a brochure on Sexual Assault Awareness. The Brochure includes information on both internal and external reporting methods. The document mentions a trusted staff member submitting a medical slip or an inmate request, calling the County prosecutor's office, or writing the Superintendent or the N.H. Attorney General. Random inmate interviews confirmed that they know there are multiple ways to report a concern within the facility. Inmates who could not provide specifics stall acknowledge they knew of the postings and information in the inmate handbook that describes options to report a concern. Inmates report they can tell or write any staff, or administration or file a request form or a formal grievance. Some inmates were aware of outside reporting through the New Hampshire Attorney General's and the County Offices. The posters also informed inmates on the option of reporting. Inmates have access to tablets at the CCDOC. The tablets provide a more confidential</p>

conversation using the unit phones. The PREA Policy 4.D.200 addresses both internal and external reporting methods. "Inmates may report sexual abuse to any staff member or on-duty personnel, or by use of a PREA hotline. Members will accept all reports of staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse." The policy goes on to state, "Persons under CCDOC custody should report any sexual victimization to:

- a. any staff member;
- b. or through the inmate telephone system, by choosing the hotline option available from Securus;
- c. or to medical and/or mental health services;
- d. or by privileged mail to the Superintendent or the Office of the N.H. Attorney General;
- e. or by privileged mail to the office of the Governor and/or Carroll County Commissioners."

Inmates confirm they have access to writing materials and can mail internally or externally. A review of the inmate handbook provides internal and external addresses and phone numbers to file a complaint.

Indicator (b) The Carroll County Department of Corrections provides information on how to contact the Attorney General's Office and the County Prosecutor's office if they any concerns reporting to staff internally. As a jail all inmates can also report any concerns to their respective attorneys. Inmates at CCDOC are not detained solely for civil immigration purposes. The Auditor found on the tour information posted on the housing units, Inmates were aware of these options and stated they could also call attorneys or family members to report a concern. The inmates were also confident that if a family member called to report a concern, the staff would take it seriously and investigate it.

The phone number and contact information for the local rape crisis agency are posted prominently in each housing unit. Inmate Handbook support legal and confidential mail to privileged outside agencies will not be read and must be opened in front of the inmate. "Staff members shall not read for content any privileged or non-privileged mail except when authorized by the Superintendent, and only when reasonable suspicion exists that the mail contains information relating to criminal activity or activity which threatens the safety, security, and the safe operation of the Department. Privileged mail is opened in the presence of the inmate for the detection of contraband." Interviews with inmates confirmed they are aware of outside options to report a concern, including the identified process above, or to their attorneys or family. During the tour, the Auditor had some difficulty accessing the phone to call outside hotline numbers. The facility reposted new information with clearer information to facilitate a call, and the PREA Coordinator provided photo evidence of

the stated changes posted on the housing units.

Indicator (c) Interviews confirmed, consistent with agency policy 4-D-200, that all staff take any report of a PREA related incident seriously and report the concern to a superior or to the facility investigator. Random staff knew that they had to report the claim no matter the source of information, including anonymous notes. The staff reported that any claim, even if they thought it did not occur, needed to be reported. The staff also confirmed that they were required to file a written report on the claim after giving notice to a supervisor. Finally, the staff also confirmed they had to report on a fellow employee's actions or failure to act, leading to a sexual assault. A review of the various investigative reports completed supported sources which included verbal notifications, as well as allegations from third-party and anonymous individuals. Policy language addresses the staff expected response. "All reports of sexual abuse shall be accepted from inmates in a private, secure manner. Inmates may report sexual abuse to any staff member or on-duty personnel (4-ALDF-4D-22-7), or by use of a PREA hotline. Members will accept all reports of staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse. All forms of reporting: i.e., verbal, written, anonymous, or from third parties, will be documented immediately on an incident report form. All information related to a sexual abuse report shall be kept confidential."

Indicator (d) The Carroll County Department of Corrections provides inmates at the county jail with several avenues for staff to report a concern of sexual assault or sexual harassment. CCDOC staff interview reported that if they had a concern about the supervisor or another staff being involved with a client, they could report to another supervisor or a higher-ranking individual. The staff reported they can make a report using either the posted phone numbers to a higher-level supervisor or the county hotline number. Staff confirmed there is no concerns of discipline or retaliation if they have to go outside the chain of command to make a report in good faith. Staff interviews confirmed they were aware of multiple avenues to report a concern.

Compliance Determination

The Carroll County Department of Corrections staff and inmate interviewed supported that there are mechanisms to ensure an investigation occurs in all allegations of sexual abuse or sexual harassment. Most inmates expressed they would tell staff and knew they could report on behalf of another inmate or how to file a concern anonymously. Some inmates stated they could have families, while others reported their attorney as an option to report concerns. Interviews with random staff support, they know they have to report immediately all concerns related to sexual abuse or sexual harassment no matter the source of the information or the format it is received. Staff reported no concerns in making reports up the chain of command and felt they could go through other channels if necessary, without consequences if appropriate. A review of the Inmate Handbook and posting further supports

	<p>appropriate information on how to report a concern is readily available to the inmate population. Observations by the Auditor support that signage and resource material in kiosks and tablets support information on reporting is readily available. The Auditor tested the phone system and had clarifying information posted to ensure inmates understood exactly how to use the phone to report a concern. Inmates confirmed the mail process, and the Auditor reviewed processes and record management to ensure confidentiality safeguards. Compliance is based on the strong understanding of the staff and inmates on how to report PREA concerns and the importance of acting promptly. Compliance is also based on the multiple options posted in the facility on how to report and staff and inmates' understanding of multiple options. The Auditor also considered the efforts onsite to provide clarifying information to inmates to ensure access to reporting methods.</p>
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Policy 6-B-100 Grievance Process</p> <p>inmate handbook</p> <p>Investigation files</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Inmates</p> <p>Observation on tour</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections is not exempt from the standard; inmates can file a grievance on conditions that violate their rights or prison rules. Sexual misconduct is an acceptable reason for which an inmate can file a grievance. The agency has language on grievances related to sexual harassment and sexual abuse claims. In the inmate handbook. The Auditor spoke to the Investigator and the PREA Coordinator to confirm the numbers as individuals had filed documents that resulted in an investigation. The Inmate Handbook defines what a grievable offense is. "A grievance is defined as a complaint by an inmate of an alleged violation of policy, Constitutional or Statutory Right, or an alleged criminal or prohibited act by a staff member. Grievances may also be used to resolve a condition that exists in the Facility that creates an unsafe or unsanitary living environment."</p> <p>Indicator (b) CCDOC policy specifies that time limits for normal grievances do not apply in cases of sexual misconduct. "Time limitations for filing grievances are mandatory, except in cases of sexual abuse or sexual harassment, which grievances - in accordance with 115.52 (b)-1 - will be allowed to be filed at any time, regardless of when the incident is alleged to have occurred." The policy does not require an attempted informal resolution of the complaint if it is against a staff person.</p>

Indicator (c). Agency policy and Inmate handbooks support the inmate can file a grievance to a person who is not the subject of the grievance. Policy 6-B-100 states, "The Department's policy allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint.; The Department requires that an inmate grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint." The PREA Coordinator confirmed the facility will not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. The Lieutenant who receives all institutional grievances also confirmed there is no requirement for inmates to use any informal grievance process or to attempt to resolve an alleged incident of sexual abuse with staff. The Auditor reviewed the language in the inmate handbook supporting this indicator.

Indicator (d) The Inmate handbook sets forth the requirements for response and appeal consistent with the standard. The CCDOC sets a timeline for resolving inmate grievances consistent with the standard. The PREA Coordinator confirmed that all PREA-related complaints are handled immediately, and if the inmate believes they are at substantial risk of sexual abuse, the shift commander must notify the administration immediately.

Indicator (e) Inmates spoken to by the Auditor confirmed that there is no prohibition on assisting or filing a grievance for another inmate. Staff was also aware they needed to accept all complaints or grievances from third-party individuals. This is also addressed in policy 6-B-100, which states, "The Department permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing grievances. If an inmate declines to have third parties to assist in filing his/her grievance, the Department will document the decision by recording the declination as part of the grievance."

Indicator (f) CCDOC has an expedited response process for all grievances where an inmate believes they are at substantial risk of being a victim of sexual abuse. The Auditor confirmed that the PREA Coordinator would immediately be informed on any PREA grievances and that an immediate step would be put in place to protect the inmate and engage in any needed investigations. The Investigator and PREA Coordinator spoke with both confirmed that investigations into PREA allegations of sexual assault or imminent risk would commence immediately. Policy 6-B-100 states, "An inmate will be allowed to file an emergency grievance alleging substantial risk of imminent sexual abuse. The PREA Coordinator will ensure that the inmate filing an emergency grievance receives an initial response within 24 hours of filing the grievance. The Superintendent, or designee, will ensure that a final decision on an inmate's grievance alleging imminent sexual abuse will be issued within 5 days." Staff spoken with describes steps to protect an inmate who comes to them with a safety concern. All staff supported actions must be immediate and involve notification

of a supervisor.

Indicator (g) Inmates can only be disciplined if, through an investigative process, it is substantiated that the grievance was filed in bad faith. This is the same standard for all PREA complaints filed, even if they are not through the grievance process. The PREA Coordinator also oversees the facility's Discipline process. The Auditor did confirm through the review of the inmate handbook that fraudulent statements are considered a major violation of the facility disciplinary code (M-119 Fraud p.35)

Compliance Determination

Carroll County Department of Corrections is not exempt from the exhaustion of administrative remedies. After reviewing policy and discussions with the administration, the Auditor confirmed that inmates can and have used the grievance process to file sexual abuse or sexual harassment complaints. The facility reported PREA-related grievances in the past year which resulted in investigations. The Auditor confirmed with inmates that they could file a PREA-related concern through the grievance process. Inmates reported they can assist other inmates in completing forms if needed. Inmates reported comfort in telling staff directly about concerns, and if they felt it was not addressed, they would go send a request to the Lieutenant or the Superintendent to discuss concerns. Compliance determination relied on the policy and interviews with the PREA Coordinator, random inmates who were aware the grievance process was an avenue to report sexual misconduct concerns. The Auditor also spoke with the investigator and reviewed investigation reports that were initiated as a result of grievance forms.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>CCDOC Inmate Handbook</p> <p>Inmate Phone system</p> <p>Inmate tablets</p> <p>Inmate PREA Education Video</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Superintendent</p> <p>STARTING POINT Representative</p> <p>Observation on tour</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections Policy 4-D-200 addressed the requirement for individuals to access outside reporting authorities and advocacy groups. The Superintendent will have ahas entered into a memorandum of understanding with a community domestic and sexual violence agency. Statring Point covers DV and SA victim support across all of Carroll County. The CCDOC provides phone numbers and mailing address to Starting Point, County officials, and the State Attorney General's Office. CCDOC does not house individuals for civil immigration issues. The Inmates are told about levels of confidentiality and upon admission. The agency allows for communication through confidential mail or through the agency phone system which is recorded. Inmates can make calls on tablets which increases privacy from peers who may otherwise hear conversations if they used the unit phones. Not ll inmates were able to tel me if the phone calls would be recorded as they stated they never tried to use the phone for that type of call.</p> <p>Indicator (b) All inmates are informed at the inception of services with medical and mental health staff that confidentiality is limited when an individual has been</p>

victimized in the institution. There are notices on the phone system informing them which calls are recorded. The posting contains information on how to call the rape crisis agency. The Auditor requested that clearer information be posted as it was initially declined upon trying to make a call. The Lieutenant and the PREA Coordinator worked to rectify this during the onsite audit period. . The Auditor confirmed with inmates and advocacy organizations that professional visit opportunities would allow for a more open dialog. The facility has tables for the inmate which improves confidential communication by allowing the inmate to go to their cell or an area away from peers to make a call. The Auditor suggested they see if calls to the posted PREA numbers can be identified so the calls are not recorded.

Indicator (c) The Carroll County Department of Corrections has a Memorandum of Understanding with STARTING POINT. The agreement is renewable. STARTING POINT is part of statewide rape and domestic violence coalition (New Hampshire Coalition Against Domestic and Sexual Violence) that works with the Attorney General's office. The MOU with STARTING POINT was signed by the organization's Director, a County Commissioner and the Superintendent. The current 2-year MOU runs until March of 2023. The Auditor was provided information about the renewal process.

Compliance Determination

Inmate victims at CCDOC can access victim advocates for emotional support. The agency has entered into a Memorandum of Understanding with the Starting Point to provide support to victims (Indicator (c)). As part of the audit process, the Auditor spoke by phone to a STARTING POINT representative, who confirmed their ability to provide service at the Carroll County Department of Corrections. The PREA Brochure and signage at the facility included a toll-free number for inmates to access from the phone. The handbook tells inmates they can call or write STARTING POINT who could come to the facility to provide professional visits when the COVID crisis is resolved. Tablets can also aid in a confidential communication to STARTING POINT the in-house reporting line, the individual's attorney, or the County Prosecutor's Office.

In determining compliance, the Auditor also considered policy language, interviews with the STARTING POINT, that inmates could identify how confidential the communication is within the facility, including mail and telephone contacts and the information posted throughout the facility. The inmate PREA education video spends time explaining the role of the rape crisis agency, the types of services provided, and how to access the services. The Auditor also reviewed Policy on communication by mail to privileged individuals.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Agency Website</p> <p>Individuals interviewed/ observations made.</p> <p>Inmates</p> <p>Phone test completed onsite</p> <p>Summary Determination</p> <p>Indicator (a). Carroll County Department of Corrections has developed a mechanism for individuals who want to report PREA concerns as a third party: including fellow Inmates, family, or friends. Information can be done in person, by phone, by U.S. mail, or by contacting the CCDOC PREA Coordinator or Investigator. Discussions with inmates support they have an understanding that the facility will accept a complaint regarding sexual misconduct and investigate no matter the source. Inmates confirmed there are no rules preventing one inmate from reporting a concern for another inmate. The inmates supported if an attorney or family members reported a concern on their behalf, they were confident the facility would investigate the situation. Investigative files reviewed supported investigations were completed from third party reporters of sexual misconduct.</p> <p>The PREA policy set expectations for staff that were confirmed in random interviews with staff. "Staff will accept reports of sexual abuse and sexual harassment verbally, in writing, anonymously, and from third parties, and will promptly document the reports and notify the shift supervisor immediately of same." Postings supporting reporting by all were visible inside the facility. Though staff and inmates were certain third party allegations would be investigated the facility lacked sufficient public information of how to report. Discussions with the Superintendent confirm the expectation and the facilities efforts to get information on to its website. During the Corrective action period the agency was able to publish additional information through its website on how family or other interested parties could file a third-party complaint through the facility PREA Coordinator or the facility Investigator. Are review of the website supports this is now in place.</p>

Compliance Determination

The Auditor finds the Carroll County Department of Correction was not in full compliance with this measure initially but has come into compliance. Though the facility has systems in place to support third-party reporting, there was no signage in the lobby at the time of the audit nor information on the agency website. Inmates were aware they could make a complaint on behalf of another inmate, and staff were trained to accept all allegations no matter the source. Since the facility has not allowed in-person visits in the past two years, the Auditor requires the posting of information on how to report a concern regarding sexual abuse or harassment of an inmate on the website. At the time of the interim report, information has been submitted to county officials to have the website updated. As noted in indicator (a) the agency has resolved the outstanding concerns and is now considered fully compliant with this standard.

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>PREA investigations</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Random staff</p> <p>Medical and Mental Health staff</p> <p>Summary Determination</p> <p>Indicator (a) In several parts of the Agency's PREA policy 4 D 200 Prison Rape Elimination Act, staff are directed to report all knowledge or suspicion related to sexual misconduct against an inmate. Policy states, "When a person reports verbally or in writing to any staff member about sexual abuse sexual harassment, or retaliation, the staff member will immediately contact the shift supervisor who will initiate immediate action to minimize:</p> <p>a. further harm to the victim and/or to the person reporting sexual abuse, (if the reporter is someone other than the victim);</p> <p>b. any damage to potential crime scenes or evidence.</p> <p>NOTE: All staff, volunteers, and contractors have a duty to report immediately, any information regarding sexual abuse or sexual harassment known to them.</p> <p>8. Staff shall immediately report any information related to sexual abuse or sexual assault to the appropriate supervisor or administrator.."</p> <p>Staff understood the expectation around reporting all incidents related to sexual harassment or sexual abuse, as evidenced in random staff questioning. Random staff reported that these notifications would be completed immediately and include when an inmate discloses information about abuse in a prior institution or even if they do not believe the event occurred. The staff were also clear that staff misconduct</p>

through actions or inactions leading to abuse must be reported. Staff reported that all knowledge of retaliation against a staff or inmate who reported or cooperated in an investigation must be reported.

Indicator (b) Staff interviewed were aware of the importance of keeping information disclosed by an inmate to those with a need to know, such as the Supervisor on duty and appropriate medical or mental health staff who may respond. The Auditor asked random staff about the limitations on sharing of information.

Indicator (c) As noted in previous standards, the Medical and Mental Health Staff ensure client confidentiality unless there is a risk that another could impact the safety of individuals. Inmates confirmed that they understand the information shared with medical or mental health is confidential unless someone is in danger. The Auditor reviewed consent forms that inmates sign upon admission. Inmates spoken with also confirmed understanding that Medical or mental health may be required to report information about an individual who has been victimized or at risk of being abused.

Indicator (d) The juvenile aspects of indicator d) does not apply, as they are not housed at CCDOC. Crimes against senior inmates or others with developmental disabilities are reportable to New Hampshire's Department of Health and Human Services. Crimes against these protected populations may result in additional charges. It was reported that the Attorney General's Office would potentially become involved in the case. The Auditor reviewed a series of state websites on mandate reporting of vulnerable adults and children. NH State law, 161-F:46 Reports of Adult Abuse; Investigations, defines the individuals, including law enforcement staff, as mandated reporters.

Indicator (e) All staff are clearly aware that the Superintendent, Major, Investigator, and PREA Coordinator must be called as part of the response plan. Staff reported the Supervisor running the shift would likely make those calls and that the staff would also inform medical staff of the incident. Documentation reviewed in the investigative files supports that staff refers all information on potential sexual offenses in a timely fashion and that the investigative teams are put into action immediately.

Compliance Determination

Carroll County Department of Correction policy directs staff in handling a report of Sexual Assault or Sexual Harassment. Random staff interviews confirmed that staff are aware of the immediate need to report all accusations of Sexual Assault or Sexual Harassment, including third-party and anonymous complaints. The staff interviewed knew they also had to report on a coworker whose actions or inactions led to a sexual assault.

All staff, including the medical and mental health contractors, were aware of mandated reporting, their legal responsibility to report, and the importance of confidentiality except to supervisory and medical to aid in getting access to treatment or allowing investigation. The Carroll County Department of Corrections Investigator confirms that crimes against vulnerable adults or individuals with diminished capacities will be reported to the appropriate state agency. Inmates' interviews supported an understanding of the limits of confidentiality that medical or

	<p>mental health professionals have. Compliance is based on interviews, the policy, and supporting documentation that shows investigations are initiated immediately upon knowledge of the facility of an incident. The Auditor also took into consideration the various investigative files supporting a quick response by staff in the learning of any sexual misconduct allegations.</p>
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>PREA Investigation supporting moving separating accusers</p> <p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>PREA Coordinator</p> <p>Summary Determination</p> <p>Indicator (a) Carroll County Department of Corrections policy 4-D-200 Prison Rape Elimination Act PREA requires the facility staff to take immediate action if someone is at risk. When the CCDOC learns that an inmate is subject to a substantial risk of imminent sexual abuse, staff are trained to take immediate action to protect the inmate. Interviews with Superintendent and discussions with other management staff confirm there is an immediate response to any situation where physical or sexual harm is imminent. Random staff knew the importance of quick responses in situations. The facility provided an example of the movement of inmates when allegations of actual or potential abuse were found. The Superintendent reports that they will assess both parties and determine the best plan of action. They can easily separate individuals with multiple units, including moving a known aggressor to higher security units if needed. The agency has had no incident in the past 12 months where protective measures were needed to be implemented to ensure an inmate's safety from sexual abuse.</p> <p>Compliance Determination</p> <p>Compliance is based on interviews and the examples provided. Interviews with staff supported training slides to ensure inmates' safety immediately. Investigative file reviews also support that the response is immediate and that they separate individuals alleged to have a problem.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Superintendent</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Correction Policy 4 D 200 Prison Rape Elimination Act/ PREA addresses the requirements of reporting to other confinement facilities of incidents of sexual assault that had occurred in those facilities. “When the Carroll County Department of Corrections receives an inmate complaint of sexual abuse that allegedly occurred at another facility, the Superintendent will notify the head of the facility no later than 72 hours where the alleged sexual abuse occurred in writing, (4-ALDF-4D-22-2), and PREA 115.63 (a)-1 and 2. and, the head of the facility shall immediately notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. Such allegations will be investigated in accordance with PREA and Department policies.” The facility had no allegation of abuse that originated from another facility, nor did it have to report abuse allegations to other institutions.</p> <p>Indicator (b). Interviews with the Superintendent and the Lieutenant who is in charge of investigations were aware of responsibilities, including the documentation of notification if they had to notify another facility of the accusation. The Auditor confirmed with the individuals interviewed that they are required to make and document these notifications. The Superintendent stated Emails will be used to follow up on phone notifications.</p> <p>Indicator (c). Consistent with the policy statement above, the Carroll County Department of Corrections leadership reported that all notifications to other institutions will occur within 72 hours of the facility becoming aware of an incident.</p> <p>Indicator (d). CCDOC’s PREA policy requires upon receiving an allegation that an</p>

inmate was sexually abused while confined at the CCDOC the Superintendent shall ensure that the allegation is investigated. The documentation provided showed but the Carroll County Department of Correction has investigated allegations they received from other institutions.

Compliance Determination

Compliance with this standard was based on the agency policy, the Superintendent and the Investigator's knowledge of the requirements and the documentation provided. CCDOC policy addresses the requirements of reporting to other confinement facilities of incidents of sexual assault that had occurred in those facilities.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act Review of Investigative files</p> <p>PREA Training slides</p> <p>Individuals interviewed/ observations made.</p> <p>Random Staff</p> <p>PREA Coordinator</p> <p>Supervisory staff</p> <p>Summary Determination</p> <p>Indicator (a) Policy 3.6.07 Prison Rape Elimination Act (PREA) (page 6) addresses the requirements of the First Responder Standard. "The duties of first responders to a sexual assault are delineated in PREA 115.64 and include the following;</p> <p>Upon learning of an allegation that an inmate was sexually abused, the first responding, security staff member will separate the alleged victim and the abuser and preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.</p> <p>If the abuse occurred within a time period that still allows for the collection of physical evidence, the first responder must request that the alleged victim not take any action that could destroy physical evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.</p> <p>If the abuse occurred within a time period that still allows for the collection of physical evidence as described above, first responding security staff will ensure that the alleged abuser does not take any actions that could destroy physical evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating."</p> <p>Interviews with random staff, supports they know the steps required to ensure quick access to care while protecting potential evidence. Staff were all able to provide</p>

examples of what they had learned about protecting evidence, including closing off the area where the assault happened, and requesting the individuals involved to not eat, drink, brush, use the toilet, shower, or change clothing. The agency has developed a PREA Incident checklist that staff uses to ensure the first responder duties are met. The Auditor spoke to staff to ensure an understanding of the expected duties and confirmed these expectations with the supervisory staff. The Auditor also reviewed the agency's training slides on first responder duties. There were no incidents where staff were responding to a recent sexual abuse allegation. The investigations support the practice of separating individuals even if the inmates claim the misconduct was consensual.

Compliance Determination

The Carroll County Department of Correction has put in place training and resources to ensure all staff knows their responsibilities as first responders to incidents of sexual abuse. The agency's PREA policy outlines the steps to preserve evidence and protect the detainee. Compliance is based on policy, interviews with staff, supervisors, and documentation from previous investigations and training that support first responders act consistently with policy directives.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4 D 200 Prison Rape Elimination Act</p> <p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>PREA Coordinator</p> <p>Investigator</p> <p>Medical and Mental Health Staff</p> <p>correctional officers</p> <p>Summary Determination</p> <p>Indicator (a) CCDOC's PREA policy sets forth the requirement of the development of coordination of resources in response to incidents of sexual misconduct. The Auditor reviewed the policy for the content, which provides direction in attachments A -C on what to do. The plan provides key information to of staff in the facility that need to be contacted. The Auditor has suggested that the documentation include information on the hospital the inmate would be transferred to for a forensic exam and the contact information for Starting Point the local rape crisis agency that would send an advocate. Supervisory staff interviewed knew to transport to a hospital and the value of a rape crisis advocate. The plan provides contact information protecting the victim, providing physical and emotional safety, crime scene preservation and engagement with local law enforcement. The Auditor expressed the need to define what should occur after the inmate returns from the hospital, such as medical and mental health follow-up and the assignment of retaliation monitoring.</p> <p>Compliance Determination</p> <p>A review of the elements of the plan and discussion with facility leadership and staff members in the various identified positions supports compliance. The administration was able to describe expected steps, including what should occur upon the inmate's return from the hospital. Random staff interviews showed a consistent understanding of their role in the plan, as did discussions with medical, mental health, supervisory staff, and facility leadership. Compliance is based on these interviews, the new written plan, the agency's policy, and the evidence in the investigation file supporting coordinated actions. Since the agency has not had to implement the plan since it was</p>

	created, the auditor suggested steps to provide some clarifying information.
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire.</p> <p>Policy 4 D 200 Prison Rape Elimination Act</p> <p>Policy 7 A 102 Administration and Management</p> <p>Collective Bargaining Agreement</p> <p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>Investigator</p> <p>Summary Determination</p> <p>Indicator (a) Discussions with the Superintendent confirmed that the contracts with the union representing the Jail employees do not prevent him from removing the staff person during an investigation into a criminal act such as PREA sexual assault. The Auditor found language in the policy Administration and Management (7 A 102) that supports placing staff on leave during an investigation. If the allegation against staff is criminal, the policy also requires notification of the New Hampshire Attorney General's Office. The contract language reviewed by the Auditor did not appear to provide any detrimental language to the ability to remove staff alleged to have committed a sexual assault of an inmate.</p> <p>Compliance Determination</p> <p>The Carroll County Department of Corrections complies with this standard's expectations. The Auditor reviewed documentation in policy, interviews with facility leadership, and union contracts to support the ability of CCDOC to keep victims safe from their accused abusers.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy: 4 D 200 Prison Rape Elimination Act</p> <p>Retaliation Monitoring form</p> <p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>PREA Coordinator</p> <p>Investigative Staff</p> <p>Summary Determination</p> <p>Indicator (a) Carroll County Department of Corrections has information on the expectation to monitor individuals after any PREA claims. The agency PREA policy repeatedly states that alleged victims shall be monitored for retaliation. The information is contained in Policy 4 D 200 states, "Retaliation is prohibited against any person or staff member who reports sexual misconduct or who cooperates with a sexual misconduct investigation. Retaliation is subject to administrative or criminal action. The Superintendent or designee shall investigate all reports of retaliation."</p> <p>Interviews with the Superintendent supported that the Deputy Superintendent or the PREA Coordinator (Captain) would monitor staff and inmates for potential retaliation.</p> <p>Indicator (b) The Superintendent supported the facility is large enough with sufficient housing units to ensure individuals who have been separated post a PREA Incident can be safely managed to ensure no retaliation. Inmates would routinely be offered counseling services, and workers would provide routine check-ins to ensure the client is feeling safe. The Superintendent confirmed that he would prefer to move the potential aggressor. Since the facility Investigator is also in charge of classification and housing assignments, it is clear that CCDOC has procedures to monitor for retaliation and mitigate risk through housing assignments. The Superintendent and the PREA Coordinator described in interviews elements they would look at as potential symptoms of retaliation. The items included changes in assignments and disciplinary actions where there were none.</p> <p>Indicator (c) The agency's policy, as shown in indicator (a) supports all individuals (Inmates and Staff) who report a PREA incident are monitored for changes in</p>

behaviors that might be a symptom of their being retaliated against. The facility was not able to initially provide consistent documentation of how monitoring would be documented. The Superintendent did research and adopted a standardized form to be used moving forward to ensure consistent application of the review process. The form was adopted during the site visit. There had been no substantiated sexual abuse allegation in the prior 12 month to review. The agency is now aware that all unsubstantiated sexual assault allegations must also be monitored.

The individual completing the form must document if they reviewed discipline, if housing moves occur or requested, programmatic or job performance changes, and document if face-to-face communication has occurred or if a mental health follow-up was requested from any of the monitoring concerns. The form provided covers the aspects of the standard indicator. During the Corrective action period the PREA Coordinator forwarded all ongoing monitoring that was completed since the site visit which lasted for at least 90 days unless the individual was released. The elements of this indicator are covered also in policy, "The conduct and treatment of persons who report sexual misconduct or who were reported to have suffered sexual misconduct will be monitored by the Deputy Superintendent and the Carroll County Victim's Advocate assigned to the case for at least 90 days following the report of sexual misconduct, to ensure that they were not the victims of retaliation. The monitoring will continue beyond 90 days if the initial monitoring indicates a continuing need. Such monitoring will include periodic status checks by the PREA Victim Advocate. The PREA Investigator and the PREA victim advocate will document their monitoring responsibilities as part of their investigations and share their findings and observations with the Deputy Superintendent."

Indicator (d) Discussions with the PREA Coordinator supported that check-in would occur with the individual being monitored. The occurrence of status checks can be documented through the newly adopted form. The PREA Coordinator can also consult with mental health if the victim agrees to seek services for support. The PREA Coordinator supported that frequent check-in would occur. In the initial weeks after an incident, he receives regular/weekly contact with the victim. These contact would lessen over time depending on how the individual is doing in the facility. The Auditor believes this will occur as inmates throughout the facility knew the Captain by name who will be the primary monitor of individuals who file or cooperate in an investigation of sexual abuse. Since Carroll County is a pretrial jail, most victims will likely be discharged before the 90-day period is reached.

Indicator (e) As noted in indicator (b) the facility has sufficient means to protect inmates. The facility's Superintendent supported the facility's ability to protect individuals and hold aggressors accountable. Policy 4 D 200 requires support to any individual who cooperates in an investigation. The policy states inmates and staff reporting incidents of sexual abuse will be protected from retaliation from other inmates and staff.

Indicator (f) The Auditor is not required to review this indicator.

Compliance Determination

	<p>The Carroll County Department of Corrections has a policy in place to address the elements of this standard. The facility has adopted a monitoring form to document monitoring efforts that initially raised questions on compliance. Since the facility had not formally monitored an unsubstantiated case the agency has made sufficient changes to ensure compliance moving forward. The standard is compliant based on the information provided, interview statements, the policy and the adoption of a form that improves the documentation of ongoing monitoring.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy: 4 D 200 Prison Rape Elimination Act</p> <p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>PREA Coordinator</p> <p>Summary Determination</p> <p>Indicator (a) As noted in 115.43 the Carroll County Department of Correction does not place a victim of sexual abuse into a segregated housing unit. The PREA Audit questionnaire initially state 1 case but after further review it was determined the inmate requested to be away from others. As noted in previous standards, the facility has multiple options to protect an individual who has been an alleged victim of sexual abuse. Agency policy states that protective custody must be reviewed to determine if it is needed. The Superintendent can also work with other county jails to move inmates to ensure they can remain in as open a setting as possible.</p> <p>Policy states,</p> <p>“A. CCDOC’S policy prohibits placing inmates at high risk for sexual victimization in involuntary, segregated housing, unless an assessment of all available alternatives has been made, and it has been determined that there is no available alternative means of separation from likely abusers.</p> <p>B. If an involuntary segregated housing assignment is made, CCDOC shall afford the inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.”</p> <p>Compliance Determination</p> <p>Compliance, without any incident of segregation use post allegation, is based on policy and discussions with the facility management on their goal of avoiding the use of segregation to keep individuals safe. The facility has multiple housing options to move individuals who cooperate in an investigation to keep them safe. The Auditor was able to see how the facility responds to allegations, including avoiding the use of segregation for prospective victims of abuse in the facility.</p>

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Policy 7-A-102 Administrative Investigations</p> <p>Policy 7-A-103 Criminal Investigations</p> <p>PREA Investigation files</p> <p>State of New Hampshire Guidelines for Forensic Sexual Assault cases</p> <p>Investigation files 2021-2022</p> <p>Individuals interviewed/ observations made.</p> <p>Agency PREA Coordinator</p> <p>Superintendent</p> <p>Agency Investigator</p> <p>An inmate who filed an allegation</p> <p>Summary Determination</p> <p>Indicator (a) Carroll County Department of Corrections has trained staff who will be responsible for administrative investigations. Criminal offenses who be the responsibility of the county's Sheriff's Office, with whom the DOC has entered into an MOU. Policy 4-D-200 defines the investigative individual's responsibilities, including the need for a prompt, thorough investigation of the facts and a complete report outlining the processes undertaken and the reasoning behind the findings. Interviews with line staff confirmed the immediacy of reporting any allegation no matter the source of the allegation or the staff's personal belief to the validity of the allegation. The facility Investigator is on call and will respond to allegations promptly when an inmate alleges sexual abuse. Interview with the facility investigator confirmed the internal investigative process and how the facility works with the local law enforcement on protecting evidence, providing necessary access to staff, inmates,</p>

document and cameras to ensure the criminal investigation can also be prompt, thorough objective and fair.

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Indicator (b) As noted in 115.34, the CCDOC has individuals who have completed a course on Investigations of Sexual Assaults in a Correctional Institution. The facility has a MOU with the Sheriff's Office to complete investigations into criminal cases of sexual abuse or sexual harassment. The Lieutenant, who oversees investigations in the facility, reports he will call the Carroll County Sheriff's Office for any case where the initial facts land between a clear criminal act and a case where the allegation is clearly not criminal. As noted earlier in this report, the Lieutenant has previously worked in a law enforcement role with the Carroll County Sheriff's Office, where he completed investigations of criminal acts at the jail.

Indicator (c) CCDOC has trained its staff to protect evidence. The crime scene work and DNA collection would be the responsibility of the County Sheriff's Detectives, whose office is a half mile away. Line staff at CCDOC are also trained to preserve evidence, including locking potential crime scenes and encouraging the victim not to do anything that would degrade the quality of the DNA evidence. As noted in 115.21, a forensic exam of the victim would not occur at CCDOC but at a local hospital with SANE-trained nurses. The investigation file also confirms the interview of the victim, alleged perpetrator, and witness are done routinely as part of the investigation. The investigative files for both administrative and criminal allegations were reviewed. The investigator interviewed described the process they undergo in completing an investigation, including how they may consider historical information. The expectations for effective collection of evidence are covered in the state protocol for sexual abuse cases. The Lieutenant reports that information on inmates prior behaviors in the institution would be provided to the outside investigator if needed.

Indicator (d) The Investigator supports that compelled interview have not occurred in cases in the past year. Compelled interviews would be completed by the Sheriff's Office. The Investigator was aware that it is important to communicate with the criminal investigator to ensure the two investigations do not negatively impact the criminal investigative process.

Indicator (e) The investigator interviewed confirmed that there is no requirement of a victim to undergo any polygraph or other truth-telling process to proceed with an investigation. The Investigator confirmed the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis. He reports that in an administrative investigation, he looks at the evidence provided and not the status of the individuals involved in determining credibility.

Indicator (f) A review of the investigative materials supports a determination based on the evidence presented. The Auditor was able to see formal statements, formal interviews, and video that were collected and preserved as part of the investigative file. The Investigator confirmed that administrative investigations routinely include a review of staffs action that may have contributed to the incident occurring.

Indicator (g). The local Sheriff's office completes all criminal investigations at Carroll County Jail. The facility would get a copy of the report through the working relationship. The Sheriff's office would keep evidence such as DNA, and other specifics. The facility would also retain copies of staff reports and video evidence in the corresponding administrative investigation.

Indicator (h). The determination of criminal investigation will be the responsibility of the Sheriff's Office who will work with the county prosecutor on determining if the case can move forward for prosecution. The relationship is defined in the MOU between those agencies and CCDOC. As noted previously, the CCDOC Investigator previously investigated crimes at the facility when the Sheriff's Office employed him. There were no cases in the past year that were investigated by the sheriff's office as a criminal complaint.

Indicator (i) The CCDOC has utilized language from this standard indicator in its PREA policy 4-D-200 Prison Rape Elimination Act. The policy states," The Department will retain all written reports pertaining to the administrative or criminal Investigation of an alleged sexual assault, or sexual harassment for as long as an alleged abuser of an inmate in CCDOC custody is incarcerated or employed by the agency, plus five years." This is the first audit for CCDOC and the Auditor confirmed record retention expectations with facility leadership.

Indicator (j) Agency policy and the Investigators interviewed confirmed individuals' departure from the institution would not result in the case being closed. Criminal cases would have to be pursued by the local sheriff's office. The CCDOC Investigator confirmed that he would complete an investigation even if the alleged victim or perpetrator had left the facility.

Indicator (k) Auditor is not required to audit this provision.

Indicator (l) The CCDOC has an agreement with the Carroll County Sheriff's Office

which outlines the relationship, including communication on investigation and the sharing of the final report. The CCDOC Investigator reports he will be the point person for the Sheriff's Office throughout the investigation.

Compliance Determination

There were 9 PREA completed investigations completed in the previous 12 months to the site visit. Carroll County Department of Corrections ensures investigations are completed on all PREA-related allegations at the DOC. The trained investigators from the Carroll County Sheriff's Office will complete any criminal investigation and the Agency will complete administrative investigations. Policy language includes completing all investigations in a prompt, thorough, and objective manner; it sets the standards for evidence collection, interview process, and coordination with the local prosecutorial authority. The Investigative files included the information required in the standard and the reports allow the reader to understand how the final determination was made. An interview with the facility investigator confirmed the standard of proof, determining the credibility of a witness, and that all conduct appearing to be criminal is referred for prosecution. To determine compliance, the Auditor considered the results of the interview with the Investigator and inmates who filed a complaint, the policy in place, and the investigatory files that were reviewed on-site. Finally, the Auditor also considered random inmates who supported they believed the facility would investigate all allegations of sexual misconduct.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Investigators</p> <p>Summary Determination</p> <p>Indicator (a). The Auditor confirmed with the investigators that agency and CCDOC policy, 4-D-200 Prison Rape Elimination Act requires no greater standard than the preponderance of evidence be used in determining whether an allegation of sexual assault or harassment can be substantiated. Policy states, "A preponderance of the evidence shall be the standard for determining whether an allegation is Founded or Substantiated". The Investigator confirmed that preponderance of the evidence is the standard he uses in determining the outcome of his investigations</p> <p>Compliance Determination</p> <p>The Auditor relied on the interviews with investigators, training records and the review of investigation case files in determining the standard is compliant. The agency also has policy language in place to direct the investigator on evidence to substantiate a PREA incident's findings. The Auditor and the Investigator reviewed all 8 allegations of potential Sexual Harassment or Sexual abuse in the past year.</p>

115.73	Reporting to inmates
	<p data-bbox="256 185 983 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 342 1050 376">Policies and written/electronic documentation reviewed.</p> <p data-bbox="256 409 1189 443">Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p data-bbox="256 488 860 521">Policy 4-D-200 Prison Rape Elimination Act</p> <p data-bbox="256 555 879 589">Policy 7-A-102 Administrative Investigations</p> <p data-bbox="256 622 791 656">Policy 7-A-103 Criminal Investigations</p> <p data-bbox="256 689 592 723">PREA Investigation files</p> <p data-bbox="256 846 882 880">Individuals interviewed/ observations made.</p> <p data-bbox="256 913 767 947">Interview with an Investigative Staff</p> <p data-bbox="256 981 716 1014">Interview with PREA Coordinator</p> <p data-bbox="256 1126 608 1160">Summary Determination</p> <p data-bbox="256 1205 1458 1776">Indicator (a) the Carroll County Department of Corrections provides notification to all inmates on the outcome of their investigations into sexual misconduct. The Investigator and PREA Coordinator confirmed the notification to inmates if the allegation was substantiated, unsubstantiated or determined to be unfounded. Interview with the Investigator supports that he comes to one of these three conclusions in all sexual abuse or sexual harassment cases in administrative investigation. The Investigative files have some documentation to support the notification, and the Auditor made suggestions on how to improve documentation. Policy 4-D-200 directly addresses the indicator when it states, "In accordance with PREA standard 115.73, the inmate who has made a claim of sexual abuse will be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following the investigation." There were 9 allegation that resulted in investigations, the Auditor's review of the documents found documentation supporting inmate notification.</p> <p data-bbox="256 1888 1466 2089">Indicator (b) Carroll County Department of Corrections complete administrative investigations and the County Sheriff's Office will complete criminal investigations into allegations of sexual misconduct. The Lieutenant serve as the lead internal investigator for CCDOC. As noted the Lieutenant has prior experience working for the local Sheriff's Office and was aware of required inmate notifications in PREA.</p>

Interviews support that he would be in communication with the Sheriffs Office in criminal cases to ensure required notifications could be made. There were no cases in the investigations completed in the past year that resulted in a formal criminal investigation. The administrative investigations support there are communication between agencies on cases that may rise to potential criminal acts.

Indicator (c) As noted in indicator (b) the Lieutenant was aware if the accused perpetrator of sexual abuse is a staff person, contractor or volunteer the alleged victim is notified if the individual has been removed from areas where they would come in contact. They were also aware if the staff member is no longer employed at the CCDOC. They will remained informed about the criminal case proceeding to notify the victim if the staff member has been convicted on a charge related to sexual abuse the facility. Agency PREA policy 4-D-200 states the following;

“Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, the Department will subsequently inform the inmate, (unless the agency has determined that the allegation is unfounded), whenever:

1. the staff member is no longer posed within the inmate’s unit;
2. the staff member is no longer employed at the Facility;
3. the Department learns that the staff member has been indicted on a charge related to sexual abuse within the Facility; or
4. the Department learns that the staff member has been convicted on a charge related to sexual abuse with in the Facility.”

During the audit period the agency created a new form to document the various notifications to an inmate. The form can be used to notify them of the investigation outcome, in the alleged perpetrator has been removed from ability to have contact with them, if the individual has been referred for prosecution and the outcome if these events occur while the potential victim is still in custody.

Indicator (d) The facility also reports following an inmate’s allegation that he or she has been sexually abused by another inmate, the CCDOC will inform the alleged victim whenever it learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. The policy language shown in indicator (c) confirms the expectation. There were no cases of inmates, staff or volunteers who were indicted or convicted in the past year.

“If the Carroll County Sheriff’s Office, the N.H. State police or the Office of the Attorney General conducts such an investigation, the Department will request relevant information from the investigative entity in order to inform the inmate of the outcome of the investigation;

Following an inmate's allegation that he or she has been sexually abused by another inmate in the Facility, the Department will notify the alleged victim whenever it learns that the alleged abuser has been indicted on a charge related to sexual abuse within the Facility; or the when the Department learns that the alleged abuser has been convicted on a charge related to sexual abuse within the Facility."

Indicator (e) The facility currently documents notifications in the investigative files. The Auditor recommended the facility consider a separate document that an inmate signs confirming they have been informed at each step of the process as described in indicators (a-d).

Indicator (f) The Auditor is not required to audit this provision.

Compliance Determination

The Auditor was able to review documents in investigative files that support inmate notifications occur. Clients who had made PREA allegations confirmed they were notified of the outcome. The Auditor finds the facility in compliance with the standard, based on policy, the documentation provided, interviews with the investigator, the PREA Coordinator and inmates who had previously filed PREA allegations. The Auditor also considered the adoption of a formal document to record the various notifications to the victim.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Policy 28-10-a Discharge Suspension Policy</p> <p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>PREA Coordinator</p> <p>Summary Determination</p> <p>Indicator (a) CCDOC policy, 4-D-200 Prison Rape Elimination Act states that staff who violate agency sexual abuse or sexual harassment policies are subject to disciplinary action. Disciplinary actions, including termination, will be presumed consequences for a substantiated finding of sexual abuse. “No individual under the supervision or custody of the CCDOC can legally consent to engage in any type of sexual conduct with a staff member as defined in this policy. Any staff member who engages in the sexual activities as defined in this policy will be subject to an administrative and, if deemed appropriate, criminal investigation, the results of which may include discipline up to and including employment termination and criminal prosecution.” The Auditor confirmed with the Superintendent that staff can be terminated for serious violations on the first offense. The Policy on Discharge and Suspensions define several behaviors that could apply, including when staff engages in “immoral conduct.”</p> <p>Indicator (b). As stated in indicator a, the CCDOC policy confirms that termination is the presumptive disciplinary sanction for staff who engage in sexual abuse or sexual misconduct with inmates. In their interviews, both the Superintendent and the PREA Coordinator were very clear that such behavior would not be tolerated. There were no cases of staff terminations in the past three years for sexual misconduct.</p> <p>Indicator (c). Disciplinary sanctions for violations of CCDOC policies relating to sexual misconduct not equaling a criminal act but covered under the Prison Rape Elimination Act could result in suspensions, demotions, requirements of additional training or terminations reportedly. There was no discipline of staff for actions that were not</p>

criminal. The PREA Coordinator and Superintendent confirmed there is a range of staff discipline, and all investigative facts would be considered.

Indicator (d). All terminations for violations of CCDOC sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, unless the activity was clearly not criminal, and to any relevant licensing bodies. CCDOC would work with Prime Care on any allegations against the medical staff that has been substantiated. All criminal acts are reported to the local Sheriff's Office even if the employee has quit/separated.

Compliance Determination

Absent a current case, compliance for this standard was based on the agency policies, interviews with the Superintendent and PREA Coordinator and policies in place.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>Individuals interviewed/ observations made.</p> <p>PREA Coordinator</p> <p>Health Services Administration</p> <p>Medical / mental health staff</p> <p>Summary Determination</p> <p>Indicator (a) Policy 4-D-200 definition of sexual abuse and sexual harassment include acts performed not only by CCDOC staff but also by contractors or volunteers. In discussions with the Superintendent and the PREA Coordinator, the CCDOC will take immediate measures upon any allegation of sexual misconduct by contractors or volunteers. Depending on the findings, the facility will suspend access until an investigation can be completed and will consider whether to prohibit further contact with inmates. The documentation provided in the pre-audit tool support that there have been no incidents of sexual misconduct by contractors, volunteers, or interns. The Agency has a limited number of contractors and limited access to the facility during covid -19 has reduced the use of volunteers or interns. Policy 4-D-200 goes on to state, "Any contractor or volunteer who engages in sexual abuse will be reported to the office of the Attorney General, and to relevant licensing bodies, unless the activity was clearly not criminal."</p> <p>Indicator (b). As noted in the previous indicator, CCDOC policy supports that the facility will take remedial action in determining whether to prohibit further contact with inmates by individuals in the standing groups. The Superintendent confirmed the ability to place contractors, volunteers, or interns who engage in sexual misconduct out of the facility during an investigation. If the finding of the investigation supports non-criminal behavior, the facility will still have to consider if the person should have contact with the inmates based on such information.</p> <p>Compliance Determination</p>

	<p>Absent an incident of sexual misconduct by a contractor or volunteer, the Auditor had to base compliance determination on policy and interviews with facility management. COVID-19 has limited the use of volunteers. The PREA Confirmed they would immediately halt access to any individual alleged to have engaged in sexual misconduct with an inmate.</p>
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115.78	Disciplinary sanctions for inmates
	<p data-bbox="256 185 983 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 342 1050 376">Policies and written/electronic documentation reviewed.</p> <p data-bbox="256 409 1189 443">Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p data-bbox="256 488 868 521">Policy: 4-D-200 Prison Rape Elimination Act</p> <p data-bbox="256 555 713 589">Policy 3-A-101 Inmate Discipline</p> <p data-bbox="256 622 721 656">Carroll County Inmate Handbook</p> <p data-bbox="256 768 882 801">Individuals interviewed/ observations made.</p> <p data-bbox="256 835 544 869">Investigative Officer</p> <p data-bbox="256 902 480 936">Superintendent</p> <p data-bbox="256 969 509 1003">PREA Coordinator</p> <p data-bbox="256 1037 373 1070">Inmates</p> <p data-bbox="256 1193 606 1227">Summary Determination</p> <p data-bbox="256 1261 1477 1552">Indicator (a) Inmates who have been found to have engaged in a criminal offense, including sexual assault, are not only subject to criminal prosecution, they are also referred for facility disciplinary hearing. CCDOC has policy 3-A-101, Inmate Discipline, which defines a formal institutional process for addressing misconduct in the facility. “Inmates who violate PREA are subject to disciplinary sanctions after the Department’s administrative process finds that an inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.”</p> <p data-bbox="256 1563 1477 1843">Criminal acts, including sexual abuse, may also result if formal discipline through this process. The inmate handbook defines the different levels for the reader of discipline in the institution for different types of sexual misconduct. The Inmate Handbook defines various behaviors that could fall under a major rule violations, including M-110 Engaging in a Sexual Act. The pre-audit questionnaire reports that there have been no incidents in the past year that have resulted in a referral for formal discipline for an inmate on inmate sexual abuse.</p> <p data-bbox="256 1955 1453 2078">Indicator (b) After a case is referred for discipline, there will be a multi-level process for review of the sanction from the initial hearing officer to the Captain and it can be appealed to the facility Superintendent. This was confirmed in the Superintendent’s</p>

interview, The Inmate handbook states the Superintendent will review discipline to ensure due process, adequate evidence to sustain the findings and, “the penalties assessed are appropriate. (Determination will be made as to whether the sanctions assessed are appropriate for the violation and consistent with similar violations. The Superintendent may not increase sanctions, but may revise them downward. “

Indicator (c). The Captain, confirmed that he considers an inmate’s mental disabilities or mental illness that might have contributed to his or her behavior before determining what type of sanction if any, should be imposed. He reports that each case is reviewed individually and that patterns of previous similar behaviors may result in greater consequences. Interviews with the Superintendent confirmed this practice expectation.

Indicator (d) CCDOC inmates have access to Mental Health Services at the facility. CCDOC has qualified mental health practitioner to provide diagnostic services in emergent and non-emergent situations. As a pretrial facility, the Carroll County Department of Correction does not impose mandatory treatment for those who engage in sexual misconduct in the facility. The disciplinary committee has various options to impose upon a person who engages in sexual misconduct, but mandatory counseling is not one of the listed items.

Indicator (e) The investigative staff and facility PREA Coordinator confirmed inmates who engage in sexual misconduct with staff would not be disciplined unless it is proven the staff did not consent. The CCDOC may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. There were no cases in the past year of staff and inmate-substantiated sexual encounters that resulted in discipline. Agency PREA policy 4-D-200 addresses this indicator. “Inmates who have sexual contact with staff may be disciplined only upon a finding that the staff member did not consent to such conduct. “

Indicator (f) Page 15 of Policy 4-D-200 states an inmate cannot be disciplined for a PREA allegation unless it is proven the allegation was filed in bad faith. The Investigator confirmed she must conclude this before the inmate would be subject to discipline. The Auditor's review of the handbook revealed that inmates could be disciplined for sexual misconduct and for lying during an investigation. Major misconduct events can result in disciplinary restrictions, loss of privileges, and loss of good time. There were no cases in which an inmate was disciplined for making a PREA allegation in bad faith. Policy states, “A report by a person/inmate of sexual misconduct made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if the investigation did not establish evidence sufficient to substantiate the allegation..”

Indicator (g) Inmates who engage in consensual sexual misconduct can be subjected to discipline as defined in the handbook. The CCDOC prohibits all sexual activity between inmates and may discipline inmates for such activity. Policy language in 4-D-200 states, "Inmates who have sexual contact with staff may be disciplined only upon a finding that the staff member did not consent to such conduct." The Auditor was able to review one case where consensual contact was determined and the two detainees were referred for discipline.

Compliance Determination

CCDOC policies and the Inmate handbook cover many of the requirements of standard. Inmates are provided information on the offenses and the consequences for each act in their handbook. English and Spanish versions of this document are available on the tablets. If the inmate has impairments, the discipline committee can refer the case to mental health. Absent a discipline related to sexual misconduct, compliance is based upon the policy, documentation from the inmate handbook, interviews with the investigator and PREA Coordinator, and the Superintendent.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>PrimeCare Policy J-F-06 Response to Sexual Abuse</p> <p>PREA Screening forms</p> <p>Nurse screening Questions and referrals</p> <p>Individuals interviewed/ observations made.</p> <p>Medical Staff</p> <p>Mental Health Staff</p> <p>Inmates</p> <p>Classification supervisor</p> <p>Observation of the medical unit</p> <p>File reviews</p> <p>Summary Determination</p> <p>Indicator (a) The facility is not a prison</p> <p>Indicator (b) The facility is not a prison.</p> <p>Indicator (c) Inmates who engage in sexual assault or have a history of sexual offenses are automatically referred to Mental Health for an assessment. If the screening indicates that an inmate has previously been a victim of sexual abuse, whether it occurred in an institutional setting or in the community the Lieutenant or medical staff will ensure that the inmate is offered a follow-up meeting with a mental health practitioner. This meeting will occur within 14 days of the intake screening</p>

reportedly. Page 14 of PREA policy 4-D-200 sets forth the expectation consistent with this indicator. “Those inmates who have disclosed any prior sexual victimization during screening will be offered a follow-up meeting with a medical or mental health practitioner.” The Auditor spoke with the mental health clinician who reports she will see individuals before the 14th day in custody and if they do not want to pursue treatment for the past abuse he reminds them of the services of the local rape crisis agency.

Indicator (d) The Auditor confirmed through interviews with medical staff, mental health staff, the Classification Lieutenant, and the PREA Coordinator that sensitive information is protected. Custody staff does not have access to information in the medical or mental health records. Information obtained and documented in the intake/screening process is also limited in access to those individuals who need to know. The Health Care Staff reported that she discusses the limits of confidentiality with the inmates at the inception of services. Inmates interviewed supported that information given to counseling staff is kept confidential. Because of the size of the facility the facility is able to limit knowledge of individuals past sexual abuse histories to a very limited number of administrative staff or health care staff. The Lieutenant who is the facility investigator and the head of classification can manage housing and work decisions. As a pretrial facility there is limited programming or education. In the prior year only 40 % of the population remained over 72 hours and only about 20% stayed more than 30 days.

Indicator (e) All inmates meet with medical staff and receive an understanding of the limits of confidentiality related to criminal behaviors. Nurses report this is completed at intake. Medical and Mental Health staff support they routinely reiterate the limits with clients during each service session. Inmates interviewed confirmed that they had signed acknowledgement forms and verbally understood why a medical or mental health staff must disclose actual sexual abuse or imminent risk situations. The CCDOC health Service staff will not disclose information about prior non institutional abuse and the facility does not service individuals under 18. PrimeCare policy addresses the indicator when it states the following;

“the federal standards require that medical and mental health practitioners report allegations or incidents of sexual abuse that occurred or may occur in a facility, and less precluded by federal, state, or law. The situation in which a patient discloses previous sexual victimization in the community to a medical or mental health practitioner is different. In that situation, the patient has a right to determine how, or if, the medical or mental health practitioner may share the information with other staff and requires that the practitioner obtain informed consent before sharing this information with staff making housing programming education and work decisions.”

Compliance Determination

	<p>The Carroll County Department of Corrections provides Medical and Mental Health Services staff at the County Jail. All individuals complete a screening with both classification and medical staff upon admission. The health care staff confirmed that individuals identified with prior histories are offered Mental Health services. The facility limits access to information on abuse histories and offers mental health services and educated the inmate on STARTING POINT the local rape crisis organization, for ongoing support. CCDOC provides confidential health records separate from the custody files. Critical information that could be used against a victim is secured in health record. Interviews with Mental Health and Medical staff confirm that all inmates are notified about the limits of confidentiality at service initiation. To determine compliance, the Auditor took into consideration the policies, interviews with Medical and Mental Health staff, and random inmates' understanding of confidentiality.</p>
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>PrimeCare Policy J-F-06 Response to Sexual Abuse</p> <p>New Hampshire state law RSA 21-M:8-c (payment of forensic services)</p> <p>New Hampshire AG's Guidelines Sexual Assault: Acute Care Protocol for/Medical/Forensic Evaluation</p> <p>Individuals interviewed/ observations made.</p> <p>Medical Staff</p> <p>Mental Health Staff</p> <p>Inmates</p> <p>PREA Coordinator</p> <p>Local hospital representatives</p> <p>Observation of the medical unit</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Correction has a medical clinic that operates 7 days per week with Registered Nurses and after-hours availability of on-call medical and mental health practitioners. The services are diverse and consistent with community health clinics. Inmates report access to these services if they are in crisis. Medical staff report having medical autonomy if the inmate must go out of the building for emergency services, such as forensic exams, to facilitate that trip. The medical staff state the facility administration is supportive of the work they do, and they work to resolve issues when they arise. In the event of a sexual assault. Inmates at CCDOC would go to one of an area hospitals with trained nurses trained in forensic exams and support from the local rape crisis agency Starting Point. Policy 4-D-200 Prison Rape Elimination Act and PrimeCare Policy J-F-06 Response to Sexual Abuse requires medical staff to provide immediate access to emergency medical services including transfer to a hospital for a forensic exam. Discussions with hospital and</p>

facility medical staff confirm their knowledge of New Hampshire Attorney General's Guidelines Sexual Assault: Acute Care Protocol for/Medical/Forensic Evaluation. Medical and Mental health staff will keep confidential records of their treatment steps separate from the inmates custody files.

Indicator (b) Medical services are available 7 days per day at the Carroll County Department of Corrections. Random staff knew as part of their first responder duties that immediate notification to medical was required. If medical staff are not on duty the staff have access to on call practitioners who will be consulted on the need to transport. All staff interviewed were able to describe in their first responder duties that they must immediately involve the medical team. Interviews with the Shift Commander and line staff confirm they know how to protect evidence if medical staff are not in the building and the importance of getting the individual out to a hospital for a forensic exam. Policy 4 D 200 reminds staff on the need to ensure victims safety. "All offender victims should be escorted to Health Services until a medical and mental health assessment can be conducted. This will allow time for determination of appropriate housing that ensures the safety of the victim and isolation from the perpetrator(s)."

Indicator (c) Discussions with both Hospital staff and facility medical staff confirm that sexual assault victims would be offered prophylaxis medications and emergency contraception. The Auditor confirmed the same medications would be offered to the inmate again upon return from a forensic exam even if they initially denied it. Medical staff confirmed they would educate the inmate on the importance of such medications for continued health. New Hampshire's Attorney General's Sexual Assault: Acute Care Protocol for/Medical/Forensic Evaluation recommends the use of prophylaxis medications for STD and pregnancy contraception options. PrimeCare policy J F 06 also addresses this indicator when it states, "prophylactic treatment and or emergency contraception as well as follow-up for sexually transmitted or other communicable diseases will be offered to the victim as clinically indicated."

Indicator (d) The Auditor confirmed that medical services related to sexual assault victims are provided without cost. CCDOC policies address the fact that service will be provided without cost. The Auditor also confirmed that victims of sexual assault are provided initial and follow-up services at local hospitals through funding from the state. This is done to encourage all victims to come forward for help. The clinic at CCDOC would function in the same way by providing follow-up care. New Hampshire Department of Justice covers the state's obligation through the state's Victim Compensation Program to ensure payment for forensic exams and related treatment for victims of sexual assaults. Pages 61-65 of the attorney Generals protocol inform the medical provider how to file for reimbursement of services provided to victims of sexual assault. The various coding options clearly state no cost to the victim or their insurance provider. CCDOC policy also addressed this indicator. "If the victim agrees to a forensic examination, transfer to a hospital or medical treatment, they may request, that a victim advocate, qualified agency staff member, or a qualified community- based organization staff member may accompany the victim through the forensic medical examination process and investigatory interviews. These treatment services will be provided to every victim without financial cost, and regardless of

whether the victim names the abuser or cooperates with any investigation arising out of the incident.”

Compliance Determination

Carroll County Department of Corrections can quickly respond to and provide emergency care and referral to a local hospital for forensic services located just 7 miles away. The Carroll County Department of Corrections has a response plan that outlines the steps taken to ensure access to care. The CCDOC has on-site medical nursing staff seven days per week. The facility also has on-call providers that can help facilitate the referral to an outside medical provider. Medical staff will automatically send any victim of abuse that has occurred in the previous 96 hours. CCDOC staff will follow the requirements as outlined in Policies 4 D 200, and J F 06. The local hospital confirmed trained nurses in forensic exams though they may not have certifications as SANEs. As part of the audit process, the Auditor spoke to a community representative to confirm the access to forensic exams and the services provided to victims of sexual assault. There is no financial cost to any inmate in DOC. The Auditor reviewed State of New Hampshire website to confirm this. Compliance determination took into consideration the access to services, CCDOC policies, information from the State of New Hampshire on forensic exam requirements, and interviews completed.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4-D-200 Prison Rape Elimination Act</p> <p>PrimeCare Policy J-F-06 Response to Sexual Abuse</p> <p>Policy 4 C 101 Continuum of Health Services</p> <p>New Hampshire AG's Guidelines Sexual Assault: Acute Care Protocol for/Medical/Forensic Evaluation</p> <p>Individuals interviewed/ observations made.</p> <p>Medical Staff</p> <p>Inmates</p> <p>Starting Point Representative</p> <p>PREA Coordinator</p> <p>Observation of the medical unit</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections ensures that all inmates are provided with the appropriate level of medical and mental health services for any issues of sexual abuse. Health staff will provide the appropriate level of care depending on how long ago the abuse occurred. If the incident has occurred in the prior 96 hours, the inmate will be offered a forensic exam at a local hospital. If the incident is a prior life event that occurred in another institution or in the community. The medical and mental health teams will complete a health assessment and mental health referral for services. If the inmate was more comfortable discussing the abuse with a rape crisis agency staff; a mental health referral can be made to Starting Point, the local rape crisis agency, to provide the appropriate supportive counseling. Policy J F 06 states, "if a patient discloses prior sexual victimization and abusiveness, whether it occurred in an institutional setting or in the community, a referral will be made to have the patient seen on the next mental health line for further evaluation." The Policy goes on to state, "If a patient discloses an incident of sexual abuse that</p>

occurred within 96 hours, physical evidence may still be collected; the patient should be sent to the emergency room for examination and the collection of any forensic evidence.”

Indicator (b) Inmates who are victims of sexual assault at CCDOC are immediately referred to mental health services as well as medical services. Even if the assault occurred in the community or at another county jail; the inmate, once identified, is referred to health services staff for follow-up services. If the inmate prefers, they can be referred to the local rape crisis agency for support services post an incident of sexual misconduct. The Medical and Mental Health staff confirmed, as did the STARTING POINT representative that they would make referrals to ensure continuity of care if the inmate were released home or transferred to another facility. Health policy J F 06 describes the expected response of medical and mental health staff during a sexual assault incident and upon the inmate’s return to the facility from a forensic exam. “Upon return from the emergency room, PCM healthcare staff shall document time of return, mode of transportation, escort, and condition physical and behavioral. PCM staff shall also note and confirm any follow-up orders. PCM staff will assess the patient for any suicidal slash homicidal ideations. If the patient presents as suicidal or homicidal, they will be placed on suicide watch and seen on the mental health line.”

Indicator (c) As noted in indicator (a), the medical clinic at the Carroll County Department of Corrections facility is equivalent to a community medical clinic found elsewhere in the county. The facility offers a full array of medical and mental health services, and can refer individual out to specialist if needed. As a pretrial jail most inmates are only in custody for a short period of time. The infirmary addresses the needs of illnesses associated with the wide age range at CCDOC. The facility provides mental health services, including counseling, medication management, and, when needed, the extra support of the in smaller housing unit or close observation room.

Indicator (d) (e) Interviews with health services staff and local hospital staff both confirm the victims of sexual abuse would be offered pregnancy testing. Statewide protocol confirms that all-female victims would be offered policy. Medical staff at the hospital confirmed pregnancy testing is offered. Nursing staff also confirmed the ability to provide pregnancy testing requirements, education on emergency contraception, and access to prophylactic medications.

Indicator (f) The Auditor confirmed with both the medical staff at CCDOC and the representatives of the local hospital used by CCDOC that victims of sexual assault are offered testing for sexually transmitted diseases. This testing is provided free of charge, consistent with agency policy. Medical staff confirmed that if the inmate refused this service in the hospital, they would be educated upon return about the

service and offered it again if appropriate.

Indicator (g) Treatment services are provided to victims of sexual abuse without cost to the inmate, including if the inmate must go out for a forensic exam. New Hampshire has a victim's compensation fund that will absorb the cost of the exam. This is reportedly done to ensure finances are not a barrier to victims seeking treatment. As noted in the previous standard, New Hampshire Attorney General's office oversees funds to hospitals to ensure victims of sexual abuse can come forward without the worry of financial burden.

Indicator (h) NA the facility is a Jail

Compliance Determination

Policy 4-D-200 Prison Rape Elimination Act, Health Care Policy J-F-06 Response to Sexual Abuse and Policy 4 C 101 Continuum of Health Services all speak to this standard's aspects. The availability of Starting Point (local rape crisis service) allows for ongoing treatment services if they prefer to use them instead of the onsite mental health staff provided by CCDOC. Through contracting with rape crisis centers, the CCDOC has opened the inmate victims to resources post-release. The services provided between the community hospital, the facility, and the contracted services providers ensure that inmates at the CCDOC are provided with equitable services to those provided to victims in the community. CCDOC and Prime Care Medical Group provide access to qualified Medical and Mental Health professionals services on-call on evenings and weekends. Discussions with representatives of the local hospitals also ensure appropriate testing and forensic services would be made available to victims from the Jail. Compliance is based on the resources available on-site and community-based services, the interviews with medical and mental health staff, and interviews with representatives of Starting Point and the local hospitals with support appropriate care.

115.86	Sexual abuse incident reviews
	<p data-bbox="256 185 983 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 342 1050 376">Policies and written/electronic documentation reviewed.</p> <p data-bbox="256 409 1189 443">Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p data-bbox="256 488 858 521">Policy 4 D 200 Prison Rape Elimination Act</p> <p data-bbox="256 555 762 589">the PREA Investigation Cover Sheet</p> <p data-bbox="256 633 509 667">Investigation files</p> <p data-bbox="256 768 882 801">Individuals interviewed/ observations made.</p> <p data-bbox="256 846 544 880">Investigative Officer</p> <p data-bbox="256 925 373 958">Inmates</p> <p data-bbox="256 992 480 1025">Superintendent</p> <p data-bbox="256 1059 509 1093">PREA Coordinator</p> <p data-bbox="256 1126 708 1160">Medical and Mental Health staff</p> <p data-bbox="256 1272 608 1305">Summary Determination</p> <p data-bbox="256 1350 1481 1921">Indicator (a) In the past year the facility has not had an allegation of sexual abuse that was substantiated or unsubstantiated. As noted some of the allegations of sexual contact were handled through the discipline system since neither party alleged abuse. The Carroll County Department of Correction policy 2 D 200 mandates and defines the purpose of the review, potential participant and required content. The policy states, "All cases of sexual assault will be evaluated by the PREA Sexual Assault Resource Team (SART) or by a subcommittee of that group. All of the following CCDOC disciplines should be represented at all case review sessions: Investigations, Medical, Mental Health, and Victim Services Advocate and (if applicable) Community Crisis Center Advocates. In some cases, the NH State Police, the NH Office of the Attorney General and other professionals involved in the case may also attend. For purposes of this definition, a report of the findings and recommendations for improvement will be submitted to the CCDOC Superintendent or designee and the PREA Coordinator. Cases will be reviewed using the six criteria outlined in Federal Statute."</p> <p data-bbox="256 1966 1453 2078">Indicator (b) The Auditor reviewed policy which sets forth the timeline for a post-investigation review. "A sexual abuse incident review shall take place within 30 days of the conclusion of</p>

every sexual abuse investigation unless the allegation was determined to be unfounded. The PREA Coordinator/Safety and Security Captain will prepare a report of the findings and recommendations for improvement and submit those findings to the Deputy Superintendent and the Superintendent.” Interviews with the facility administrative team confirmed they are aware of the timeliness requirement of this indicator.

Indicator (c) In the absence of an actual event, the Auditor confirmed in discussions with medical, mental health, investigators and administration there would be a critical incident review occurring on all cases of sexual assault. The Auditor reviewed the policy that sets forth the requirement. “The Facility will explore participation in a multi-disciplinary Sexual Assault Review team, (SART), in an effort to develop Quality Improvement outcomes.” Interviews with the Superintendent and the PREA Coordinator confirmed that most if not all four of the senior management would be involved in the review. Medical and mental health staff also believed their input would be included in the review.

Indicator (d) The elements described in this indicator were all confirmed with the PREA Coordinator and the Superintendent. The agency routinely looks at any significant incident with a critical lens to identify causal factors. Discussions with these individuals support they look at the motivation behind any aggression in the institution, including sexual aggression, to determine if race, religion, LGBTI status, or gang was a causal factor. The Policy states, “The PREA Coordinator/Safety and Security Captain shall consider whether PREA incidents were motivated by racial or group dynamics. When incidents are determined to be motivated by racial or other group dynamics, the PREA Coordinator/Safety and Security Captain shall immediately notify the Superintendent.” The Policy goes on to state,”

As part of the incident review, the area in the Facility where the incident allegedly occurred will be assessed for barriers, camera positioning and staff line of sight.” The Auditor provided some suggestions on improving documentation to support that all elements are addressed in each review. During the Audit Process the agency adopted a format for recording the findings of potential incident reviews. The new form mirrors the standard language.

Indicator (e) None of the current files had an actionable recommendation. The Superintendent described his management process for reviewing all critical incidents with an eye toward system improvement. As noted in indicator (a) the agency policy language requires the review to include recommendations for improvement.

Compliance Determination

The CCDOC requires critical incident reviews to occur on all major events, including PREA sexual assault cases. The Auditor spoke with a multi-disciplinary group to confirm their intended participation in incident reviews. The administration confirmed the various elements of indicator (d) are part of these reviews. Absent any sexual assault reviews, the Auditor based compliance on policy and various staff

	understanding of the expected process. The Auditor also took into consideration the new form to record findings of the review process which will ensure consistent compliance with the standard expectations.
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4 D 200 Prison Rape Elimination Act</p> <p>CCDOC website (annual report)</p> <p>Individuals interviewed/ observations made.</p> <p>Superintendent</p> <p>PREA Coordinator</p> <p>Supervisory staff</p> <p>Summary Determination</p> <p>Indicator (a) The agency collects data consistent with the policy definitions which were developed to be consistent with the standard. 4 D 200 Prison Rape Elimination Act states, "The PREA Coordinator/Safety and Security Lieutenant will collect accurate, uniform data for every reported incident of sexual abuse using the Offender Protection Investigation Form: Investigation Details (Attachment 4)." The CCDOC PREA Policy has a definition section that utilized definitions consistent with federal terms in the Prison Rape Elimination Act. CCDOC as stated in standard 115.12 does not contract beds for housing of its inmates.</p> <p>Indicator (b) The Carroll County Department of Corrections has developed an annual report with aggregate data from the Carroll County Department of Corrections. The PREA policy has language about this indicator. "This data is obtained from multiple sources, including reports, investigation files, and sexual abuse incident files and will be aggregated annually" The Auditor also reviewed the agency's annual report, which was published to the CCDOC website during the post Audit period. The PREA Coordinator described for the Auditor how information on the incident is funneled to him. Interviews with line supervisors confirmed that the PREA Coordinator and the Investigator are informed of all allegations.</p> <p>Indicator (c) The Auditor was able to confirm the various elements of the Survey of Sexual Violence are maintained and could be used to complete the report if requested by the Department of Justice. There has been no request by the Department of Justice for a Survey of Sexual Violence reports from CCDOC. Interviews with the PREA Coordinator confirmed the elements required were tracked.</p>

Indicator (d) The CCDOC requires the retention of records at all records related to sexual assault allegations facilities. Copies of criminal files involving inmates-on-inmate contact will be retained by the investigating agency with a copy to the PREA Coordinator. The PREA Coordinator would receive all incident outcomes and ensure data accuracy. CCDOC policy states; "The PREA Coordinator/Safety and Security Captain will ensure that all collected sexual abuse data is reviewed for corrective action, properly stored, securely retained, protected and entered into the PREA Investigative Module, and documented using the "Sexual Emergency Checklists (See Attachments 1,2, and 3, and the Offender Protection Investigation Form: Investigation Details," (Attachment 4). NOTE: Before making sexual abuse data publicly available, CCDOC will remove all personal identifiers."

Indicator (e) The Carroll County Department of Corrections does not subcontract beds to supervise individuals in custody.

Indicator (f) The Department of Justice has not requested PREA-related information from the Carroll County Department of Correction in the past year.

Compliance Determination

The Auditor has found the standard to be compliant. The CCDOC has a system in place for collecting uniform data that could be used to complete the Survey of Sexual Violence. The 2021 and 2022 CCDOC Annual PREA report includes data for the CCDOC facility. Compliance is based on discussions with the PREA Coordinator, Superintendent, and facility supervisory staff, which supports the information is routinely tracked and provided to the PREA Coordinator.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>POLICY 4 D 200 Prison Rape Elimination Act</p> <p>Annual PREA Reports 2021-2022</p> <p>Carroll County Department of Corrections website</p> <p>Individuals interviewed/ observations made.</p> <p>Interview with Agency PREA Coordinator</p> <p>Interview with the Superintendent</p> <p>Summary Determination</p> <p>Indicator (a) The Carroll County Department of Corrections utilizes both data related to PREA incidents and data related to other critical safety incidents to determine program improvements. The Superintendent reports that he meets with facility leadership almost daily, including the Investigator and the PREA Coordinator. The Superintendent discussed how data is used with his management team to assess needs. Interview with the Superintendent and the PREA Coordinator support critical analysis for PREA incidents and all critical events. The Superintendent confirmed his team looks for trends to further guide policy/ procedural practices or the disbursement of resources. Agency policy states, "The PREA Coordinator/Safety and Security Captain will ensure that all collected sexual abuse data is reviewed for corrective action, properly stored, securely retained, protected and entered into the PREA Investigative Module, and documented using the "Sexual Emergency Checklists (See Attachments 1,2, and 3, and the Offender Protection Investigation Form: Investigation Details," (Attachment 4).</p> <p>NOTE: Before making sexual abuse data publicly available, CCDOC will remove all personal identifiers.</p> <p>F. The Department will retain all written reports pertaining to the administrative or criminal investigation of an alleged sexual assault, or sexual harassment for as long as an alleged abuser of an inmate in CCDOC custody is incarcerated or employed by the agency, plus five years.</p> <p>D. Data shall be retained for 10 years." The PREA Coordinator who is responsible for</p>

data collection confirmed the information in the policy. The Agency had not previously posted the report to the agency website but this was resolved during the post audit period.

Indicator (b) The CCDOC publishes an annual report comparing the number of sexual assault and sexual harassment claims. The report shows if the accused was a staff or an inmate and provides the outcome determination. The Auditor discussed with the PREA Coordinator how the current year's information will be used in comparison to the 2021 data in assessing the Jails progress toward a PREA-safe environment. Since this is the CCDOC first PREA Audit, the agency has only two years of full data.

Indicator (c) The CCDOC Superintendent confirmed PREA annual report developed by the PREA Coordinator and the facility investigator is reviewed and approved by him before being placed on the agency's website. The Auditor reviewed the CCDOC website for the documentation sent to him during the post-audit period. The Annual report was uploaded to the county website before the finalization of this report.

Indicator (d) The CCDOC removes all identifiers from summary reports, this is stated in the policy language listed in indicator (a). The Auditor was able to review the report and was not able to identify any of the individuals from the investigation reports reviewed.

Compliance Determination

The data elements are required to be reviewed by the PREA Coordinator to ensure consistent data. Interviews with the Superintendent supported he utilizes data to make informed decisions on programmatic and policy needs. This is consistent with the standard expectation to critically review data to identify problem areas and enact corrective actions. The PREA Coordinator works as the Security Captain and meets regularly with the Major and the Superintendent allowing trends to be identified. Recommended changes are by policy forwarded to the Superintendent for consideration. The Auditor finds the facility to be compliant with the standard expectations. This determination was based upon the interviews completed and the documents reviewed.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and written/electronic documentation reviewed.</p> <p>Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p>Policy 4 D 200 Prison Rape Elimination Act</p> <p>Individuals interviewed/ observations made.</p> <p>Interview with Agency PREA Coordinator</p> <p>Summary Determination</p> <p>Indicator (a) The CCDOC has policies that protect the security of information. Policies 4 D 200 outline the safety of PREA information and who has access. Discussions with the PREA Coordinator, the Lieutenant who completes screenings, and medical and mental health staff describe layers of controls in place to ensure no unnecessary disclosure. The agency's electronic case management system and electronic medical records systems are separate and limit the access that can be used to exploit an individual. In response to an incident, all relevant information can be retained by the PREA Coordinator.</p> <p>Indicator (b) The CCDOC has added information related to PREA incidents and the agency's efforts to support a zero-tolerance culture are published in an annual report available on the agency website during the post-audit period. The website also includes information on the number of PREA incidents alleged to have occurred and the investigative outcomes dating back to 2020. Policy 4 D 200 addresses this indicator's concern,</p> <p>Indicator (c) The annual report located on the CCDOCs website does not include any identifiers.</p> <p>Indicator (d) Policy, as mentioned in 115.87, set forth the obligations of the agency's PREA Coordinator as the individual responsible for collecting all incidents. The PREA Coordinator is aware that all PREA related Data be maintained for a period of no less than ten years. Policy languages also confirm this expectation, sexual abuse data will be maintained for a "minimum of 10 years."</p> <p>Compliance Determination</p> <p>The Carroll County Department of Corrections (CCDOC) Policy 4 D 200 Prison Rape Elimination Act address the requirements of this standard. All facility data is provided to the agency PREA Coordinator who is responsible for maintaining and securing all</p>

	<p>data. When the facility has an incident, all identifying information is to be removed before any information is made public. All data for the annual report must be kept at a minimum for 10 years by policy 4 D 200. Compliance is based on an interview with the PREA Coordinator, Information available on the Carroll County Department of Correction's Website, and the facility policy defining the requirements.</p>
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115.401	Frequency and scope of audits
	<p data-bbox="279 185 1007 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="279 264 579 297">Auditor Discussion</p> <p data-bbox="279 342 1070 376">Policies and written/electronic documentation reviewed.</p> <p data-bbox="279 409 1211 443">Carroll County Department of Corrections Pre-Audit Questionnaire</p> <p data-bbox="279 488 884 521">Policy 4-D-200 Prison Rape Elimination Act</p> <p data-bbox="279 633 906 667">Individuals interviewed/ observations made.</p> <p data-bbox="279 701 531 734">PREA Coordinator</p> <p data-bbox="279 846 630 880">Summary Determination</p> <p data-bbox="279 913 1445 1115">Indicator (a) The Carroll County Department of Corrections is completing its first PREA Audit ever. The agency only has one facility and had planned to be audited sooner but the COVID-19 crisis further delayed the ability to complete the preparations for the audit process. Discussions with facility and agency leadership confirm they plan to remain in compliance moving forward.</p> <p data-bbox="279 1149 919 1182">Indicator (b) the CCDOC only has one facility.</p> <p data-bbox="279 1227 1476 1473">Indicator (h) The Auditor did have open access to all parts of the facility. The Auditor was able to move freely about the housing units on tour to be able to speak informally with inmates and staff to ensure they were aware of the audit, the agency's efforts to educate inmates, and how to seek assistance if the need arises. The PREA Coordinator and the Shift Commanders aided in the Auditor's movement and getting inmates and staff in a timely fashion.</p> <p data-bbox="279 1507 1469 1753">Indicator (i) The Carroll County Department of Correction provided information in the OAS and sufficient on-site access to paper and electronic documentation for verification. The Auditor kept some hard copy documents while requesting other items be uploaded once the site visit was completed. During the post Audit visit the facility has added required materials to finalize some standards and provide corrective steps in other standards.</p> <p data-bbox="279 1787 1445 2078">Indicator (m) The Auditor was able to interview inmates throughout the facility in private spaces. The space provided was appropriate to allow the Auditor and the inmate to speak freely without others. The Auditor was not in need of the use of translation services as part of the Audit process but was explained the steps to be used if a LEP inmate was admitted. Most inmate interviews took place in an office near the housing units. Most staff interviews took place in the conference room/ office of the investigator.</p>

	<p>Indicator (n) The Auditor received no confidential letters from inmates, staff or other interested parties. Random inmates knew about the audit the posting and that information to the auditor would be confidential unless there were safety or criminal concerns. The Auditor did confirm the posting had been up with administration, staff and inmates.</p> <p>Compliance Determination</p> <p>The Carroll County Department of Corrections is working to come into compliance with all the standards and corresponding indicators. The facility has put policies and procedures in place; provided training and defined roles that will aid continued compliance moving forward once corrective measures are in place. The completion of this audit will put them on track for the completion of a second audit within the next three years. The PREA Coordinator confirmed that this is the intention moving forward.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Indicator a. the Indicator is NA. This is Carroll Counties first PREA Audit. The Superintendent and PREA Coordinator are aware that the Final report must be posted to the agency's website one it is final.

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
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Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
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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
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Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
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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
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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
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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
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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
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115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na

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 consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need	yes

	for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	
	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 facility does not have female inmates.)	yes
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (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 may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes

115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (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.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

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

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

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

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

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

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

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

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

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

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

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

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

115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

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

115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes

115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	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 abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes

115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes

115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	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 evidence sufficient to substantiate the allegation?	yes
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 sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes

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.)	na
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
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.)	no

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.)	no
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
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 (f)	Audit contents and findings	
	<p>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.)</p>	na