

PREA Facility Audit Report: Final

Name of Facility: Montgomery County Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 01/21/2022

| Auditor Certification | |
|---|--------------------------------------|
| The contents of this report are accurate to the best of my knowledge. | <input checked="" type="checkbox"/> |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review. | <input checked="" type="checkbox"/> |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. | <input checked="" type="checkbox"/> |
| Auditor Full Name as Signed: Alton Baskerville | Date of Signature: 01/21/2022 |

| AUDITOR INFORMATION | |
|-------------------------------------|----------------------------|
| Auditor name: | Baskerville, Alton |
| Email: | alton.abm@preaauditors.com |
| Start Date of On-Site Audit: | 12/13/2021 |
| End Date of On-Site Audit: | 12/15/2021 |

| FACILITY INFORMATION | |
|-----------------------------------|--|
| Facility name: | Montgomery County Correctional Facility |
| Facility physical address: | 22880 Whelan Lane, Boyds, Maryland - 20841 |
| Facility Phone | |
| Facility mailing address: | |

| Primary Contact | |
|--------------------------|-------------------------------------|
| Name: | Brandon Ward |
| Email Address: | brandon.ward@montgomerycountymd.gov |
| Telephone Number: | 240-773-9746 |

| Warden/Jail Administrator/Sheriff/Director | |
|--|--------------------------------------|
| Name: | Suzy Malagari |
| Email Address: | Suzy.Malagari@montgomerycountymd.gov |
| Telephone Number: | 240-777-9978 |

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

| Facility Health Service Administrator On-site | |
|---|-----------------------------------|
| Name: | Robin Cody |
| Email Address: | Robin.Cody@montgomerycountymd.gov |
| Telephone Number: | 240-773-9830 |

| Facility Characteristics | |
|---|------------------------|
| Designed facility capacity: | 1028 |
| Current population of facility: | 623 |
| Average daily population for the past 12 months: | 680 |
| 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: | 14-87 |
| Facility security levels/inmate custody levels: | Min/Med/Max |
| Does the facility hold youthful inmates? | Yes |
| Number of staff currently employed at the facility who may have contact with inmates: | 514 |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 0 |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility: | 0 |

| AGENCY INFORMATION | |
|---|--|
| Name of agency: | Montgomery County Department of Corrections and Rehabilitation |
| Governing authority or parent agency (if applicable): | |
| Physical Address: | 22880 Whelan Ln, Boyds, Maryland - 20841 |
| Mailing Address: | |
| Telephone number: | |

| Agency Chief Executive Officer Information: | |
|---|--|
| Name: | |
| Email Address: | |
| Telephone Number: | |

| Agency-Wide PREA Coordinator Information | | | |
|--|---------------|-----------------------|--------------------------------------|
| Name: | Kendra Jochum | Email Address: | kendra.jochum@montgomerycountymd.gov |

| SUMMARY OF AUDIT FINDINGS | |
|--|--|
| <p>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.</p> <p>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.</p> | |
| 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: | 2021-12-13 |
| 2. End date of the onsite portion of the audit: | 2021-12-15 |

Outreach

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|---|---|
| 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: | Montgomery County Health and Human Services Victim Assistance and Sexual Assault Program (VASAP). |

AUDITED FACILITY INFORMATION

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|--|--|
| 14. Designated facility capacity: | 1028 |
| 15. Average daily population for the past 12 months: | 680 |
| 16. Number of inmate/resident/detainee housing units: | 21 |
| 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees? | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility) |

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

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

| | |
|---|-----|
| 36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit: | 634 |
| 37. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit: | 4 |
| 38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit: | 6 |
| 39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit: | 3 |

| | |
|---|---|
| 40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit: | 0 |
| 41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit: | 3 |
| 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: | 41 |
| 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: | 4 |
| 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: | 2 |
| 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: | 2 |
| 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: | 12 |
| 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 additional comments to add. |
| 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: | 514 |
| 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: | 0 |
| 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: | 29 |
| 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: | Covid restrictions have greatly reduced inmate contacts with volunteers and contractors. Restrictions are still in place. |
| INTERVIEWS | |
| Inmate/Resident/Detainee Interviews | |

| Random Inmate/Resident/Detainee Interviews | |
|--|---|
| 53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed: | 16 |
| 54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply) | <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None |
| 55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse? | I was able to observe the background of the inmates while touring the facility. Adjustments were made to the interview list to include more diversity. |
| 56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation): | No problems experienced in selecting random inmates for interviews. |
| Targeted Inmate/Resident/Detainee Interviews | |
| 58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed: | 14 |
| 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". | |
| 59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol: | 4 |
| 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: | 1 |

| | |
|--|---|
| <p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>2</p> |
| <p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>0</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>Staff made available all targeted inmates that they were aware of in the jail population. The inmate population turns over rapidly in the jail.</p> |
| <p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>0</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>Jail staff did not have data showing inmates in this category.</p> |
| <p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>3</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |

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| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>Staff did not identify inmates in this category.</p> |
| <p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p> | <p>3</p> |
| <p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p> | <p>1</p> |
| <p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p> | <p>1</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>No text provided.</p> |
| <p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p> | <p>0</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>Jail staff did not have data on inmates who would fit this category.</p> |

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| 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). | Staff did not have any record of inmates in this category. There are many options to separate an inmate in the general population. |
| 70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews): | No problems with interviewing inmates. |

Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

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|---|--|
| 71. Enter the total number of RANDOM STAFF who were interviewed: | 15 |
| 72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply) | <input 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 checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None |
| If "Other," describe: | No other characteristics considered. |
| 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 problems interviewing random staff. |

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.

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|---|--|
| 75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors): | 16 |
| 76. Were you able to interview the Agency Head? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 77. Were you able to interview the Warden/Facility Director/Superintendent or their designee? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 78. Were you able to interview the PREA Coordinator? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 79. Were you able to interview the PREA Compliance Manager? | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards) |

| | |
|--|---|
| <p>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</p> | <p><input type="checkbox"/> Agency contract administrator</p> <p><input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</p> <p><input checked="" type="checkbox"/> Line staff who supervise youthful inmates (if applicable)</p> <p><input checked="" type="checkbox"/> Education and program staff who work with youthful inmates (if applicable)</p> <p><input checked="" type="checkbox"/> Medical staff</p> <p><input checked="" type="checkbox"/> Mental health staff</p> <p><input checked="" type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches</p> <p><input checked="" type="checkbox"/> Administrative (human resources) staff</p> <p><input type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</p> <p><input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations</p> <p><input checked="" type="checkbox"/> Investigative staff responsible for conducting criminal investigations</p> <p><input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness</p> <p><input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation</p> <p><input checked="" type="checkbox"/> Staff on the sexual abuse incident review team</p> <p><input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation</p> <p><input checked="" type="checkbox"/> First responders, both security and non-security staff</p> <p><input checked="" type="checkbox"/> Intake staff</p> <p><input type="checkbox"/> Other</p> |
| <p>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> |
| <p>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
| <p>a. Enter the total number of CONTRACTORS who were interviewed:</p> | <p>1</p> |

| | |
|---|--|
| <p>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p> | <p><input type="checkbox"/> Security/detention</p> <p><input type="checkbox"/> Education/programming</p> <p><input checked="" type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p> |
| <p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p> | <p>Interviews of specialized staff went well.</p> |

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: discussions related to testing critical functions are expected to be included in the relevant Standard-specific overall determination narratives.

| | |
|--|---|
| <p>84. Did you have access to all areas of the facility?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
|--|---|

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

| | |
|---|---|
| <p>85. Reviewing/examining all areas of the facility in accordance with the site review component of the audit instrument?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
| <p>86. Testing and/or observing all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., intake process, risk screening process, PREA education)?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
| <p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
| <p>88. Informal conversations with staff during the site review (encouraged, not required)?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |

| | |
|---|---|
| <p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p> | <p>I was able to access of areas of the jail during early mornings and late nights.</p> |
|---|---|

Documentation Sampling

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

| | |
|--|--|
| 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.). | It was difficult getting to all the documentation because of the system of record keeping was old. However, the documentation was in the records. |
|---|---|

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 | 2 | 4 | 2 |
| Staff-on-inmate sexual abuse | 5 | 0 | 5 | 0 |
| Total | 9 | 2 | 9 | 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 | 7 | 0 | 7 | 0 |
| Staff-on-inmate sexual harassment | 2 | 0 | 2 | 0 |
| Total | 9 | 0 | 9 | 0 |

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

| | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|--------------------------------------|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual abuse | 0 | 2 | 2 | 0 |
| Staff-on-inmate sexual abuse | 0 | 5 | 0 | 0 |
| Total | 0 | 7 | 2 | 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 | 1 | 3 | 4 | 0 |
| Staff-on-inmate sexual harassment | 1 | 2 | 0 | 0 |
| Total | 2 | 5 | 4 | 0 |

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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| 98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled: | 20 |
| 99. Did your selection of SEXUAL ABUSE 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 abuse investigation files) |
| Inmate-on-inmate sexual abuse investigation files | |
| 100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled: | 3 |
| 101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations? | <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) |
| 102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE 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 abuse investigation files) |
| Staff-on-inmate sexual abuse investigation files | |
| 103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled: | 5 |
| 104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations? | <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files) |
| 105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations? | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files) |
| Sexual Harassment Investigation Files Selected for Review | |
| 106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled: | 11 |

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| <p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p> | <p> <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files) </p> |
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Inmate-on-inmate sexual harassment investigation files

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| <p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p> | <p>8</p> |
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| <p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files) </p> |
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| <p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files) </p> |
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Staff-on-inmate sexual harassment investigation files

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| <p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p> | <p>3</p> |
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| <p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT 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 staff-on-inmate sexual harassment investigation files) </p> |
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| <p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT 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 staff-on-inmate sexual harassment investigation files) </p> |
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| <p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p> | <p>Auditor reviewed twenty investigative files; a number of complaints were made by mental health inmates.</p> |
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SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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| <p>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.</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> |
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Non-certified Support Staff

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| <p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
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| <p>a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:</p> | <p>2</p> |
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AUDITING ARRANGEMENTS AND COMPENSATION

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| <p>121. Who paid you to conduct this audit?</p> | <p><input checked="" type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p> |
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Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

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| 115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="240 304 979 331">MCDOCR Policy and Procedure, "Prison Rape Elimination Act", #3000-64</p> <p data-bbox="240 338 560 365">MCDOCR Organizational Chart</p> <p data-bbox="240 371 400 398">Staff Interviews</p> <p data-bbox="240 405 440 432">Offender Interviews</p> <p data-bbox="240 461 759 488">MCDOCR Policy and Procedure PREA #3000-64</p> <p data-bbox="240 517 1493 584">Policy and Procedure clearly articulates the agency's zero tolerance policy. Agency organization chart and chain of command chart clearly depict the</p> <p data-bbox="240 591 1461 680">role of Deputy Warden (who by agency policy is the Facility PREA Coordinator. Interviews with the PREA Coordinator and Warden confirmed their knowledge of the PREA standards and commitment to the implementation of the PREA standards. Notice of the PREA compliance audit was posted on all housing units and other prominent locations throughout the facility.</p> <p data-bbox="240 710 1469 871">The MCDOCR actively works to prevent, detect, report, and respond to any violation. In addition, this procedure provides information on preventing, detecting, and responding to such conduct, and also includes definitions of bad behaviors regarding sexual assault and sexual harassment. The Agency PREA Coordinator acknowledge they have sufficient time to manage their PREA responsibilities. Staff and offender interviews affirm the policy of zero tolerance of sexual abuse and sexual harassment.</p> <p data-bbox="240 900 376 927">Conclusion:</p> <p data-bbox="240 934 1477 1023">MCDOCR have shown the facility meets the standard 115.11. The agency and facility have met PREA standards in the past and the coordinators display exceptional efforts in maintaining that status. Policy is very good requiring zero tolerance and adherence to efforts to prevent, detect and respond to sexual abuse of harassment of offenders under MCDOCR charge.</p> |

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| 115.12 | Contracting with other entities for the confinement of inmates |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="242 304 1074 434"> MCDOCR PREA Policy and Procedure #3000-4 Howard County Alternative Housing Agreement Fredrick County Adult Detention Center Alternative Housing Agreement Prince George's County Department of Corrections Alternative Housing Agreement </p> <p data-bbox="242 463 742 492">MCDOCR PREA Policy and Procedure #3000-4</p> <p data-bbox="242 497 839 526">MCDOCR does not contract for the confinement of inmates.</p> <p data-bbox="242 555 756 584">Howard County Alternative Housing Agreement</p> <p data-bbox="242 589 1485 916"> According to Howard County Alternative Housing Agreement, In the event an emergency necessitates the relocation of the Montgomery County Department of Correction and Rehabilitation inmate population, or a portion thereof, the Howard County Adult Detention Center agrees to assist, as available, until such time the inmate population can be safely returned to Montgomery County, or other site arrangements or housing can be secured. In the event an emergency necessitates the relocation of the Howard County Adult Detention Center inmate population, or a portion thereof, the Montgomery County Department of Correction and Rehabilitation agrees to assist, as available, until such time the inmate population can be safely returned to Howard County, or other site arrangements or housing can be secured. As part of this agreement between our two Departments, each Department acknowledges its obligation to adopt and comply with the PREA standards as issued by the Department of Justice. Each Department further agrees that the letter identifying that each Department has achieved compliance shall be provided along with this signed agreement or as soon as compliance has been achieved. </p> <p data-bbox="242 945 1011 974">Fredrick County Adult Detention Center Alternative Housing Agreement</p> <p data-bbox="242 978 1477 1209"> In the event an emergency necessitates the relocation of the Montgomery County Department of Correction and Rehabilitation inmate population, or a portion thereof, the Frederick County Adult Detention Center agrees to assist, as available, until such time the inmate population can be safely returned to Montgomery County, or other site arrangements or housing can be secured. In the event an emergency necessitates the relocation of the Frederick County Adult Detention Center inmate population, or a portion thereof, the Montgomery County Department of Correction and Rehabilitation agrees to assist, as available, until such time the inmate population can be safely returned to Frederick County, or other site arrangements or housing can be secured. </p> <p data-bbox="242 1238 1136 1267">Prince George's County Department of Corrections Alternative Housing Agreement</p> <p data-bbox="242 1272 1485 1503"> In the event an emergency necessitates the relocation of the Montgomery County Department of Correction and Rehabilitation inmate population, or a portion thereof, the Prince George's County Department of Corrections agrees to assist, as available, until such time the inmate population can be safely returned to Montgomery County, or other site arrangements or housing can be secured. In the event an emergency necessitates the relocation of the Prince George's County Department of Corrections inmate population, or a portion thereof, the Montgomery County Department of Correction and Rehabilitation agrees to assist, as available, until such time the inmate population can be safely returned to Prince George's County, or other site arrangements or housing can be secured. </p> <p data-bbox="242 1532 1485 1659"> There were (0) number of contracts for the confinement of inmates that the agency entered into or renewed with private entities or other government agencies on or after August 20, 2012. There were (0) number of above contracts that DID NOT require contractors to adopt and comply with PREA standards. There were (0) number of contracts referenced in 115.12 (a)-3 that DO NOT require the agency to monitor contractor's compliance with PREA standards. </p> <p data-bbox="242 1688 373 1718">Conclusion:</p> <p data-bbox="242 1722 1442 1785"> The Auditor reviewed agency policies, contracts, contract renewals with Howard County, Fredrick County and the Prince George's County. The Auditor determined the MCDOCR meets the requirements of this standard. </p> |

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| 115.13 | Supervision and monitoring |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="242 329 952 358">MCDOCR Policy and Procedure Minimum Shift Requirement #3000-15</p> <p data-bbox="242 360 920 389">MCDOCR Policy and Procedure Implementation of PREA #3000-64</p> <p data-bbox="242 392 553 421">MCCF Net Annual Work Hours</p> <p data-bbox="242 423 557 452">MCDC Net Annual Work Hours</p> <p data-bbox="242 454 467 483">MCCF Deviation 2021</p> <p data-bbox="242 486 469 515">MCDC Deviation 2021</p> <p data-bbox="242 517 738 546">Staff-Monitoring Tech Resources Round Readers</p> <p data-bbox="242 548 549 577">Supervisors Rounds Daily Log</p> <p data-bbox="242 580 446 609">Interviews with Staff</p> <p data-bbox="242 611 378 640">Observations</p> <p data-bbox="242 683 989 712">MCDOCR Policy and Procedure Minimum Shift Requirement #3000-15</p> <p data-bbox="242 716 1481 779">Minimum shift requirements have been established to insure the safe and secure operation of correctional facilities operated by the department. Supervisory personnel shall adhere to these guidelines in determining staffing assignments.</p> <p data-bbox="242 808 1425 902">A. Each facility operated by the department shall develop a staffing plan which shall be reviewed and approved by the Department Director. This staffing plan shall include a listing of those posts that can be collapsed in order to manage overtime as well as a minimum safe staffing requirement below which manpower cannot drop.</p> <p data-bbox="242 907 1386 969">B. All department personnel are to be aware that they may be contacted for callback in cases of unanticipated and unscheduled work assignments. In such cases, County Personnel Regulations 10-13 (Call-back pay) shall apply.</p> <p data-bbox="242 974 1449 1037">C. The Department Director may set a work schedule for all department employees. (County Personnel Regulations 15-2 (Work Schedules)</p> <p data-bbox="242 1041 1390 1171">D. Department personnel who are called in for required overtime shall be compensated in accordance with County Personnel Regulations, 10-6 (Overtime policy) and negotiated labor agreements. Compensation is not required to be monetary. It can be given in compensatory leave if allowed under the Fair Labor Standards Act.</p> <p data-bbox="242 1176 1445 1238">E. All authorized supervisors may order staff either to report for duty or to work beyond one's normal shift in the event of emergencies and/or to meet minimum shift requirements.</p> <p data-bbox="242 1243 1241 1272">F. Staff who volunteer for additional duty shall be called first to provide the required shift manpower.</p> <p data-bbox="242 1276 1485 1339">G. Staff who refuses a direct order to report to or remain over for duty to meet a minimum shift requirement will be subject to disciplinary action. (County Personnel Regulations, 15-9 (Disciplinary Action or termination for non-compliance.</p> <p data-bbox="242 1344 1489 1406">H. In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan.</p> <p data-bbox="242 1435 954 1464">MCDOCR Policy and Procedure Implementation of PREA #3000-64</p> <p data-bbox="242 1469 1497 1599">Senior Floor Officers or higher-level supervisors shall conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. These rounds shall be conducted on all shifts. Staff are prohibited from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.</p> <p data-bbox="242 1628 1485 1924">Policy and Procedures were reviewed by this auditor. The policy requires the Montgomery County Correctional Facility to have a staffing plan in compliance with the PREA standards and that the plan is reviewed annually. The facility has a staffing plan which was provided to this auditor. Documentation of annual review of the plan was also provided. Montgomery County Correctional Facility Policy and Procedure, "Prison Rape Elimination Act", requires unannounced rounds. This auditor was provided documentation of these rounds and interviews with supervisory staff confirmed that they occur. Observed staffing during the on-site audit demonstrated compliance with the staffing plan during program hours. Over-night staffing in compliance with the staffing plan was documented on staffing schedules, housing unit logs as well as interviews with staff. There were instances of deviations from the staffing plan due to staff injury, suicide watch 2-1, 1:1 suicide, staff emergency and scheduling.</p> <p data-bbox="242 1953 376 1982">Conclusion:</p> <p data-bbox="242 1986 1485 2049">Additionally, Pennsylvania Code, chapter 95 for the operation of county correctional institutions requires compliance with this standard. Based upon the above this standard was deemed to be in full compliance.</p> |

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| 115.14 | Youthful inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure Implementation of PREA #3000-64 COR - Youth Intakes Memorandum regarding Youthful Offenders Interviews with Staff Observations</p> <p>MCDOCR Policy and Procedure Implementation of PREA #3000-64 IV. Youthful Inmates/Detainees: A. Housing: A youthful inmate shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping quarters. The Department will make best efforts to avoid placing youthful inmates in isolation to comply with this provision.</p> <p>The MCDOCR, on rare occasions, may place youthful inmates in the same housing units as adults for short periods of times in certain circumstances. This includes the mental health unit and/or the medical unit. They would be housed in a single cell until evaluated by a health care professional. The goal is addressing their health first with the intent of always moving them to juvenile housing, general population, as soon as possible.</p> <p>In the past 12 months, there were 2 housing units (1 male and 1 female) to which youthful inmates are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters. In the past 12 months, there were (10) number of youthful inmates placed in same housing unit as adults at this facility. Most cases were an overnight stay before release or re-class to juvenile general population. The extended stays in SMH were a result of mental/medical health care.</p> <p>Medical- 2 CIU Juvenile Males- 7 CIU Juvenile Females- 1</p> <p>The facility documents the exigent circumstances for each instance in which youthful inmates' access to large-muscle exercise, legally required education services, and other programs and work opportunities was denied.</p> <p>Conclusion: In the past 12 months, there were (0) number of youthful inmates who have been placed in isolation in order to separate them from adult inmates. Based upon the above this standard was deemed to be in full compliance.</p> |

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| 115.15 | Limits to cross-gender viewing and searches |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure Searches #1300-19 Program List-Female Offenders Memorandum regarding Facility Female Workers Training Logs Interviews with Staff Interviews with Offenders Observations</p> <p>MCDOCR Policy and Procedure Searches #1300-19</p> <p>B. Cross Gender "Pat" Searches and Searches of Transgender or Intersex Inmates PREA Standard 115.15 Limits to cross-gender viewing and searches. -The agency shall train security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Staff are prohibited from searching or physically examining a transgender or intersex inmate for the sole purpose of examining the inmate's genital status.</p> <ol style="list-style-type: none"> 1. Definitions: <ol style="list-style-type: none"> a. Transgender -A person whose gender identity or internal sense of feeling male or female is different from the person's assigned sex at birth. b. Intersex -A person's whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. 2. General Search Procedures - <ol style="list-style-type: none"> a. When feasible, pat-down searches will be conducted by an officer of the same sex as the inmate being searched. b. Male officers will not conduct pat-down searches of female inmates unless a female officer is not available and an exigent circumstance exists that requires the search be carried out immediately. c. The facility will not conduct cross gender strip searches except in exigent circumstances. d. Transgender and intersex inmates will be provided the opportunity to express gender preference of staff that will conduct pat-down searches of their person. A search by both male and female staff of a transgender female inmate with breasts and male genitalia is not an acceptable practice. e. Transgender or intersex inmates should be searched by one staff member of the same gender as that listed on the inmates booking paperwork unless the inmate requests an opposite gender preference. f. Prior to the cross-gender search being conducted, the Shift Administrator or Supervisor will be notified. g. The inmate's preference (regarding the sex/gender of the staff member conducting the body search) will be honored, if it is reasonably practicable to do so. h. The search will be conducted in the presence of another officer and this information will be documented on an incident report (DCA #36) written by each officer. 3. Searches of transgender or intersex inmates shall be done in a respectful and professional manner. If the inmate has breasts, search: <ol style="list-style-type: none"> a. Without cupping or tactile touching b. Using the outside blade of the hand c. Place the blade against the chest and the back of the hand next to the breast d. Move the hand in a sweeping motion under the breast toward the outside of the body. Repeat for the other breast 4. Pat others areas such as the back, sides and underarms using a flat hand. 5. Searches of the groin area should be done by placing a flat hand against the inside of the leg, and moved upward so that when at the groin area the back of the hand is toward the genitals. 6. Wigs, breast binders, or breast prosthesis should be removed in private. 7. When dressing out, if the transgender or intersex inmate has enlarged breasts, a bra may be issued. <p>As precautionary measures and operational changes within our facilities are continuously developing, please note the following updates for facility inmate workers superseding the Memorandum from June 21, 2021. Effective immediately, the only inmate facility workers allowed out for assignments are listed below. There are no exceptions.</p> <p>These named workers will only be called out as needed and as directed by Custody and Security Officers. Any time these workers come out of W12/N22 for assignments, they must, at a minimum, wear their provided non-medical N95 mask and gloves for the duration of their work. Other forms of PPE (cover gowns, Tyvek suits, surgical masks, shoe covers, eye protection, etc.) should be made available to these workers during their cleaning assignment. Questions about PPE should be directed to the Shift Commander.</p> |

In the past 12 months, there were (0) number of cross-gender strip or cross-gender visual body cavity searches of inmates. In the past 12 months, there (0) number of cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff. The facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. There are (0) number of pat-down searches of female inmates that were conducted by male staff. There (0) number of pat-down searches of female inmates conducted by male staff that did not involve exigent circumstance(s). Facility policy requires that all cross-gender strip searches and cross-gender visual body cavity searches be documented. MCDOCR does not conduct body cavity searches in-house. Outside medical handles these cases. There 100% percent of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs.

The female inmates interviewed reported that they have never been searched by a male staff while at the Montgomery County Correctional Facility. All random staff interviewed confirmed that cross-gender searches of female inmates do not occur. All inmates interviewed denied ever having been searched by an opposite gender staff. All of the inmates interviewed denied ever being searched for this purpose. The corrections officers interviewed were aware that this type of search is prohibited. There are no cameras with a view inside bathrooms or showers.

Conclusion:

Policy a, provides for all inmates to shower privately. All inmate interviewed acknowledged that they have reasonable privacy when showering, toileting and changing clothes. All staff interviewed stated that their presence is announced when they enter a housing unit of opposite gender inmates. All inmates interviewed acknowledged that opposite gender staff announces their presence when entering housing units. This practice was also observed throughout the on-site audit.

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| 115.16 | Inmates with disabilities and inmates who are limited English proficient |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="242 329 920 356">MCDOCR Policy and Procedure Implementation of PREA #3000-64</p> <p data-bbox="242 360 1418 423">MCDOCR Policy and Procedure Effective Communication with Inmate and Visitors Who are Deaf or Hearing Impaired #3000-58</p> <p data-bbox="242 430 635 456">PREA Publication English and Spanish</p> <p data-bbox="242 461 588 488">PREA Poster English and Spanish</p> <p data-bbox="242 495 552 521">Interpreter Contact Information</p> <p data-bbox="242 526 446 553">Interviews with Staff</p> <p data-bbox="242 560 497 586">Interviews with Offenders</p> <p data-bbox="242 593 378 620">Observations</p> <p data-bbox="242 651 791 680">MCDOCR Policy and Procedure Searches #3000-64</p> <p data-bbox="242 687 1355 748">(d) The intake screening shall 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;</p> <p data-bbox="242 752 1466 813">S. Inmates/detainees/residents may not be disciplined for refusing to answer, or for not disclosing complete information in response to the following:</p> <p data-bbox="242 844 1163 873">1. Whether the inmate/detainee/resident has a mental, physical, or developmental disability.</p> <p data-bbox="242 902 1461 1095">Inmates with Disabilities or are Limited English Proficient - The Department shall not rely on inmate interpreters, inmate 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 under PREA Standard 115.64, or the investigation of the inmate's allegations. The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.</p> <p data-bbox="242 1126 686 1155">MCDOCR Policy and Procedure #3000-58</p> <p data-bbox="242 1162 1484 1453">Prison Rape Elimination Act MCDOCR shall take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the Department's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both respectively and expressively, using any necessary specialized vocabulary. In addition, the Department shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities. The Department is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under Title II of the Americans with Disabilities Act, 28 CFR 35.164.</p> <p data-bbox="242 1485 1453 1680">This auditor received copies of intake materials in Spanish. The facility has multiple Spanish speaking staff. A language interpretation service is available for all languages should the need arise. There is also American Sign Language interpretation available. In the past 12 months, there were (0) number of instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations.</p> <p data-bbox="242 1711 375 1740">Conclusion:</p> <p data-bbox="242 1747 1484 1939">The Auditor concluded the agency provides information that ensures equal opportunity to offenders who are disabled. The facility takes reasonable steps to ensure meaningful access to all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment are provided to offenders who are Limited English proficient and those who are disabled. The Auditor conducted a thorough review of the agency's policies, procedures, Zero Tolerance for Sexual Abuse and Sexual Harassment handout, interpretive services contracts, offender records, training records, conducted interviews with staff, offenders and made observations to determine the agency meets the requirements of this standard.</p> |

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| 115.17 | Hiring and promotion decisions |
| | <p data-bbox="242 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 273 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="242 304 1031 331">MCDOCR Policy and Procedure Standards of Conduct/Code of Ethics #3000-7</p> <p data-bbox="242 336 1270 362">MCDOCR Policy and Procedure Applicant and Employee Background Investigations/Checks #3000-41</p> <p data-bbox="242 367 533 394">Criminal History Check Form</p> <p data-bbox="242 398 558 425">Memorandum from the Director</p> <p data-bbox="242 430 437 456">Employee Records</p> <p data-bbox="242 461 456 488">Contractor's Records</p> <p data-bbox="242 492 446 519">Interviews with Staff</p> <p data-bbox="242 560 791 586">MCDOCR Policy and Procedure Searches #3000-41</p> <p data-bbox="242 591 1490 757">This policy states the following: Best Practices for Background Checks, Benchmarks for dropping applicants from the hiring process, Unsuccessful Background. A background investigation is conducted on all applicants that are provided contingent job offers, contractors, and volunteers prior to their assuming duties to identify whether there are indicators that have a nexus to job performance which could disqualify them from the process. Investigation reveals conduct and/or acts that require review under the Prison Rape Elimination Act (PREA) ,28 CFR§ 115.17</p> <p data-bbox="242 788 673 815">MCDOCR Policy and Procedure #3000-7</p> <p data-bbox="242 819 1477 1048">The Department shall ask all applicants and employees who may have contact with inmates directly and previous misconduct in written applications or interviews for hiring or for promotion and in any interviews or written self-evaluations conducted as a part of reviews or current employees. The Department shall also impose upon employees a continuing affirmative duty to disclose any such misconduct. Material Omissions regarding such misconduct, or the provision of materially false information, shall be grounds form termination. Records checks include clearance through the Pennsylvania child abuse registry. Material omissions of sexual abuse or harassment incidents or the provision of materially false information are grounds for termination. Staff have an affirmative obligation to report any arrest.</p> <p data-bbox="242 1079 1487 1173">There were (67) new employees who underwent background checks during this audit period. There were (20) contract personnel who underwent background checks during this audit period. Documentation of background checks and clearances for this audit period was provided to this auditor. Background checks are repeated annually.</p> <p data-bbox="242 1205 376 1232">Conclusion:</p> <p data-bbox="242 1236 1481 1402">The Auditor concluded the MCDOCR is performing appropriate practices to identify previous acts of sexual misconduct prior to hiring staff and enlisting the services of contractors, and before promoting staff members. The Auditor conducted a thorough review of the agency's policies, procedures, employee records, contractor records, Criminal History Check, Background Investigation Report, Employment Application, and interviewed staff and contractors to determine the agency meets the requirements of this standard.</p> |

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| 115.18 | Upgrades to facilities and technologies |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure Implementation of PREA #3000-64 Interviews with Staff</p> <p>MCDOCR Policy and Procedure Implementation of PREA #3000-64 Video Monitoring: - The Department shall assess, determine, and document whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies whenever necessary, but no less frequently than once each year, for each facility the Department operates, in consultation with the PREA coordinator.</p> <p>Conclusion: MCCF acquired 21 additional Cameras which were installed on 7/8/2021. The Auditor conducted a review of the agency's policies, procedures, interviewed staff and made observations to determine the facility meets the requirements of this standard.</p> |

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| 115.21 | Evidence protocol and forensic medical examinations |
| | <p data-bbox="242 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 273 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="242 304 1401 331">MCDOCR Policy and Procedure Suspected Criminal Activity by Inmates and the Preservation of Evidence #1300-11</p> <p data-bbox="242 336 911 362">MCP Policy Investigation of Rapes and Sex Offenses - FC No. 616</p> <p data-bbox="242 367 643 394">Memorandum of Understanding (SART)</p> <p data-bbox="242 398 448 425">Interviews with Staff</p> <p data-bbox="242 430 448 456">Interview with SANE</p> <p data-bbox="242 461 549 488">Interview with Victim Advocate</p> <p data-bbox="242 524 1474 551">MCDOCR Policy and Procedure Suspected Criminal Activity by Inmates and the Preservation of Evidence #1300-11</p> <p data-bbox="242 555 1481 721">Experience has shown that inmates frequently commit criminal acts while housed in correctional facilities. To assist in managing this situation the following procedures have been developed for performing searches, preserving evidence, and conducting investigations when criminal activity by inmates is suspected. The Montgomery County Department of Correction and Rehabilitation (MCDOCR) personnel will prosecute and/or assist, to the fullest extent possible, in the prosecution of any inmate determined to be involved in criminal activity within the facility or on facility property.</p> <p data-bbox="242 757 951 784">MCP Policy Investigation of Rapes and Sex Offenses – FC No. 616</p> <p data-bbox="242 788 432 815">Initial Investigation</p> <p data-bbox="242 819 488 846">A. Welfare of the Victim</p> <p data-bbox="242 851 1485 913">The officer's first responsibility is the welfare of the victim. When applicable, the officer must administer first aid and/or call for an ambulance.</p> <ol data-bbox="242 918 1453 1285" style="list-style-type: none"> 1. If the victim has sustained injuries requiring immediate treatment, the officer will direct transportation to the nearest hospital. 2. In non-emergency situations, if it is necessary to transport the victim to the hospital prior to the investigator's arrival, advise the victim to take a change of clothing, if available. 3. The victim has the right to choose any hospital within Montgomery County. However, Shady Grove Medical Center (SGMC) is currently best equipped to conduct a Sexual Assault Forensic Examination (SAFE). 4. The victim has the right to have the SAFE conducted at another hospital or by the victim's personal physician. In these situations, the Special Victims Investigatio11S Division will provide a Physical Evidence Recovery Kit (PERK) to the hospital/doctor/nurse handling the SAFE. The investigator will retrieve the aforementioned PERK as soon as possible and ensure the PERK is tracked and entered into the appropriate evidence tracking system. 5. The victim has the right to refuse medical treatment. <p data-bbox="242 1312 379 1339">MOU (SART)</p> <ul data-bbox="242 1344 1134 1608" style="list-style-type: none"> •Determine if the allegations of sexual assault rise to the level of a criminal violation. •Conduct investigations and gather evidence to be used in criminal prosecution. •Follow best practices when interviewing victims of sexual assault to avoid revictimization. •Coordinate cases with the State's Attorney's Office for potential prosecution. •Participate in (and offer) training programs for SART members. •Participate in SAR T meetings. •Provide reports and other information to SART members when requested. •Provide victims of sexual assault with immediate access to medical care, including sexual assault forensic exams. <p data-bbox="242 1644 1481 1796">Montgomery County Police conducts all Criminal Investigations. The facility offers all inmates who experience sexual abuse access to forensic medical examinations which are conducted at an outside medial facility. There were zero (0) number of forensic medical exams conducted during the past 12 months. There were zero (0) number of exams performed by SANES/Safes during the past 12 months. There were zero (0) number of exams performed by a qualified medical practitioner during the past 12 months.</p> <p data-bbox="242 1832 373 1859">Conclusion:</p> <p data-bbox="242 1863 1481 2056">Forensic examinations are not conducted by facility staff. All staff are trained to preserve incident scenes and measures to prevent evidence from being destroyed. Physical evidence collection of criminal acts may be collected by staff in a manner consistent with municipal law enforcements practices. This was confirmed via interviews with staff. Criminal investigations are conducted by detectives from the Montgomery County District Attorney's Office. There is an extensive protocol in place that was collaboratively developed with the District Attorney's Office, outside law enforcement and several community-based victim advocacy groups. Based upon the above this standard was deemed to be in full compliance.</p> |

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| 115.22 | Policies to ensure referrals of allegations for investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure Implementation of the PREA #3000-64 Investigative Records Agency Website Interviews with Staff Interviews with Offenders</p> <p>MCDOCR Policy and Procedure Implementation of the PREA #3000-64 F. Those offenders, who wish to anonymously report allegations of sexual crimes, sexual misconduct, sexual harassment, etc., may do so in any manner or format that is comfortable for the offender (e.g., letter to a counselor or chaplain). Note: The department will immediately start an investigation whenever an alleged sexual crime, sexual harassment, sexual misconduct (or threats of the same) is reported. M. The Directors Office will be notified immediately by the Division Chief of any allegation of sexual crimes, sexual harassment, or sexual misconduct so that an investigation can be initiated.</p> <p>VII. Criminal and Administrative Agency Investigations A. When the Department conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. B. Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations. C. Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. D. When the quality of evidence appears to support criminal prosecution, the investigating Department shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. E. The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. The Department shall not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. F. Administrative investigations: 1. Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and 2. Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. 3. The Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated G. Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. H. Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. I. The agency shall retain all written reports referenced in paragraphs (F) and (G) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five (5) years. J. The departure of the alleged abuser or victim from the employment or control of the facility or Department shall not provide a basis for terminating an investigation. K. When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. L. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. The supervisor shall contact the Montgomery County Police Department and request a unit to respond to the facility to conduct an investigation into alleged sexual crimes.</p> <p>Montgomery County Correctional Facility Policy and Procedure, "Prison Rape Elimination Act", were reviewed by this auditor. This section of the policy meets all the requirements of this standard. It requires that all allegations of sexual harassment and sexual abuse be investigated. It requires that allegations that may be criminal in nature be referred to law enforcement and provides clear guidance for when Montgomery County Correctional Facility may conduct an administrative investigation once a referral to law enforcement has been made. All Montgomery County Correctional Facility staff are mandated reporters of sexual abuse and/or harassment and all staff interviewed were aware of their obligations to report sexual abuse and/or</p> |

harassment under agency policy.

The facility reported (21) allegations of sexual harassment, sexual abuse or sexual assault during this audit period. There were (18) number of allegations resulting in an administrative investigation in the past 12 months. There were (3) allegations referred to the law enforcement for investigation. Of the (3) allegations referred for criminal investigation, three are pending MCP evidence/reports and lab results.

Conclusion:

Montgomery County Correctional Facility policy requires reporting of sexual harassment allegations that do not rise to the level of sexual harassment as defined by the PREA standards (the standards specifically state "repeated" as a condition of the definition). Montgomery County Correctional Facility is intentionally reporting and investigating single occurrences of sexual harassment in order to improve the conditions of confinement at the facility as they relate to PREA compliance. This practice clearly meets the requirements of this standard. Based upon the above this standard was deemed to be in full compliance.

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| 115.31 | Employee training |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="242 304 735 333">MCDOCR Policy and Procedure PREA #3000-64</p> <p data-bbox="242 338 667 367">MCDOCR PREA Lesson Plan/PowerPoint</p> <p data-bbox="242 371 384 400">Memorandum</p> <p data-bbox="242 405 446 434">Interviews with Staff</p> <p data-bbox="242 439 497 468">Interviews with Offenders</p> <p data-bbox="242 499 994 528">MCDOCR Policy and Procedure Implementation of the PREA #3000-64</p> <p data-bbox="242 533 1485 725">This policy requires all staff with contact with inmates to be trained as required in this standard. The training curriculum meets all aspects of this standard. This is the same curriculum used for refresher training. All staff interviewed acknowledged that they had received the initial training and refresher training (except the one officer who had less than a year on the job). Documentation was provided to this auditor confirming staff's understanding of the material presented. All staff interviewed were aware of their obligations related to the agency's PREA policy, their obligations as mandated reporters of sexual abuse and/or harassment, their duties as a first responder and agency protocols related to evidence collection.</p> <p data-bbox="242 757 1485 882">Such training shall be tailored to the gender of the offenders at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male offenders to a facility that houses only female offenders, or vice versa. The agency shall document through employee signature or electronic verification that employees understand the training they have received.</p> <p data-bbox="242 913 1474 1106">There have been 514 staff employed by the facility, who may have contact with offenders, who were trained or retrained on the PREA requirements listed above. Staff training is conducted annually. During the pre-audit, the auditor was provided with copies of the agency's PREA curriculum, training logs, certificates of completion, training acknowledgement forms. The training curriculum meets all requirements under 115.31 (a)-1. Random staff interviews indicate staff have received the training required under 115.31. This standard is in compliance based on review of MCDOCR procedures, proper documentation and staff interviews. All employees of the MCDOCR are required to participate in PREA education.</p> <p data-bbox="242 1137 1490 1232">Each individual is required to take a test at the end of the training and pass with 100%. If they do not pass with 100%, the staff member is allowed to take the test one additional time. If they do not pass with 100% on the re-test, they will be required to retake the entire training course.</p> <p data-bbox="242 1263 1469 1357">Each person is required to also sign off on a form indicating that they have not only participated in the required training, but also verify they understand the training that was provided to them. This documentation is kept in training files. During the onsite audit visit, training files were reviewed and found to include the required information for each person.</p> <p data-bbox="242 1388 1490 1514">Interviews were conducted with staff, contractors and volunteers for the facility. All were able to provide information regarding the PREA training they have received. This information included a broad overview of the topics that have been covered in this training. When asked more specific questions regarding the training content, the majority of staff were able to discuss, with detail, the topics.</p> <p data-bbox="242 1545 392 1574">Memorandum</p> <p data-bbox="242 1579 1490 1740">In Maryland, there is no specific requirement to report sexual assault on behalf of competent adult victims. A health practitioner or human service worker shall notify the local department of social services if the victim is a vulnerable adult. Maryland Family Law mandates physicians to report to child abuse authorities if the perpetrator is a family member. They are not required to report if the perpetrator is not a family member or other caretaker but they may report with informed consent. Professionals are allowed to notify parents, guardians or caretakers, but are not required to notify them.</p> <p data-bbox="242 1771 373 1800">Conclusion:</p> <p data-bbox="242 1805 1490 1930">The Auditor concluded the facility has appropriately trained its staff and documented the training as required by this standard. Facility staff interviewed by the Auditor were knowledgeable in the training topics mandated in PREA standard 115.31. The Auditor reviewed agency policy, procedures, training curriculum, attendance rosters, tests, newsletters, conducted interviews with staff and offenders and determined the facility meets the requirements of this standard.</p> |

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| 115.32 | Volunteer and contractor training |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 MCDOCR PREA Lesson Plan/Contractor/Volunteer Interviews with Staff Interviews with Offenders</p> <p>MCDOCR Policy and Procedure Implementation of the PREA #3000-64 According to agency operating procedures all volunteers and contractors who may have contact with offenders are required to participate in PREA training. Contractors, such as medical personnel, are required to participate in the same level of training as a staff member since they have as much contact with offenders as regular employees do. They are required to participate in PREA training before any contact with offenders and also required to participate in training annually.</p> <p>After the training, each participant is required to sign that they have participated and understand the information provided to them. There were 213 number of volunteers and contractors, who may have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. Due to the COVID-19 pandemic, volunteers have not been allowed to come to the facility for over 12 months to provide services to offenders. However, this Auditor was able to talk with a volunteer over the phone to confirm the training that had been provided. In addition to the interviews conducted with the volunteer and contractors, documentation was reviewed that provided verification of the training provided to this population.</p> <p>Conclusion: The Auditor concluded the facility is appropriately training volunteers and contractors and staff ensures documentation of training is maintained. The Auditor determined through a review of agency policies, procedures, training curriculum, brochure, acknowledgment forms and interviewing contractors and volunteer personnel the facility meets the requirements of this standard.</p> |

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| 115.33 | Inmate education |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="240 208 451 235">Auditor Discussion</p> <p data-bbox="240 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="240 304 735 331">MCDOCR Policy and Procedure PREA #3000-64</p> <p data-bbox="240 338 1046 365">MCDOCR Policy and Procedure Treatment of a Person with a Disability #3000-5</p> <p data-bbox="240 371 1430 432">MCDOCR Policy and Procedure Effective Communication with Inmates and Visitors Who are Deaf or Hearing Impaired #3000-58</p> <p data-bbox="240 439 1262 465">MCDOCR Policy and Procedure Limited English Proficiency (LEP) Effective Communication #3000-73</p> <p data-bbox="240 472 695 499">Inmate Guide Book/Zero Tolerance Brochure</p> <p data-bbox="240 506 448 533">Interviews with Staff</p> <p data-bbox="240 539 499 566">Interviews with Offenders</p> <p data-bbox="240 573 379 600">Observations</p> <p data-bbox="240 629 994 656">MCDOCR Policy and Procedure Implementation of the PREA #3000-64</p> <p data-bbox="240 663 1442 757">The Montgomery County Department of Correction and Rehabilitation (MCDOCR) has a zero-tolerance policy relating to illegal sexual acts, sexual harassment, or sexual misconduct in any of the detention facilities, places of business, and community corrections occurring programs operated by the department.</p> <p data-bbox="240 786 1091 813">MCDOCR Policy and Procedure Treatment of a Person with a Disability #3000-5</p> <p data-bbox="240 819 1474 880">Appropriate steps will be taken and auxiliary aids and services made available so that communication with inmates, visitors, and members of the public with disabilities is as effective as communication with others.</p> <p data-bbox="240 909 1406 969">MCDOCR Policy and Procedure Effective Communication with Inmates and Visitors Who are Deaf or Hearing Impaired #3000-58</p> <p data-bbox="240 999 568 1025"><i>VIII Prison Rape Elimination Act</i></p> <p data-bbox="240 1032 1490 1328">MCDOCR shall take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the Department's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both respectively and expressively, using any necessary specialized vocabulary. In addition, the Department shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities. The Department is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under Title II of the Americans With Disabilities Act, 28 CFR 35.164.</p> <p data-bbox="240 1357 1329 1384">MCDOCR Policy and Procedure Limited English Proficiency (LEP) Effective Communication #3000-73</p> <p data-bbox="240 1391 1490 1720">In accordance with Title VI of the Civil Rights Act of 1964 and Executive Order 13166, "Improving Access to Services by Persons with Limited English Proficiency", it is the policy of the Montgomery County Department of Correction and Rehabilitation not to discriminate against any person who has limited English proficiency. The MCDOCR will take reasonable steps to provide meaningful access to limited English proficient (LEP) individuals incarcerated, detained, or otherwise encountering Department facilities, programs, and activities. The policy is to ensure that language will not prevent staff from communicating effectively with LEP inmates, detainees, residents, participants and others to ensure safe and orderly operations, and that limited English proficiency will not prevent inmates, detainees, residents, participants or individuals from accessing important programs and information; understanding rules, participating in proceedings; or gaining eligibility for parole, probation, pre-trial, treatment programs, alternatives to revocation, or classifications. This commitment applies to all Divisions within the MCDOCR.</p> <p data-bbox="240 1749 451 1776">Inmate Guide Book</p> <p data-bbox="240 1783 1490 1877">This book details the following: educating one about sexual misconduct, sexual abuse and assault; preventing tips for keeping yourself safe; and responding and zero tolerance. This information must be communicated verbally and in writing, in language clearly understood by the offender and will include the following topics.</p> <p data-bbox="240 1906 1474 2000">The agency provided the offender education curriculum for review as part of the pre-audit information to review. All required elements of the standard are included in the offender education. When offenders arrive at MCDOCR, they are provided with a paper on PREA which provides information on what PREA is and how to make a report at the facility.</p> <p data-bbox="240 2029 1474 2157">They will also receive a more comprehensive training on PREA within the first few days at the orientation training. They will watch a video and have the opportunity to ask questions. Once they participate in this training, they will sign the "Preventing Sexual Abuse and Assault Training Acknowledgement". This documentation is kept on file for review. PREA information is also included in the Inmate Guide Book. During the onsite audit visit, this Auditor randomly selected offenders to view the</p> |

signed acknowledgement forms. This information was provided.

In addition, during the interviews with offenders, questions were asked regarding the education they were provided on PREA, what it is, how to report, etc. The vast majority of offenders were able to provide information on PREA and discuss how and when the facility provided them with this information. Different formats of information are available to ensure that all offenders are able to receive education and understand PREA and reporting methods at the facility. These were reviewed by this Auditor onsite.

Conclusion:

PREA Posters in English and Spanish were clearly visible on all living units and throughout the facility. The telephone numbers for outside reporting and access to victim services are posted at each inmate telephone. The number of inmates admitted during past 12 months who were given this information at intake is 2684. There were (933) number of those inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake. Based upon the above this standard was deemed to be in full compliance.

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| 115.34 | Specialized training: Investigations |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="242 304 735 331">MCDOCR Policy and Procedure PREA #3000-64</p> <p data-bbox="242 338 1273 365">National Institute of Corrections (NIC) PREA (Prison Rape Elimination Act) Course Interviews with Staff</p> <p data-bbox="242 371 536 398">Training Records/Certificates</p> <p data-bbox="242 405 526 432">Interviews with Investigators</p> <p data-bbox="242 465 994 492">MCDOCR Policy and Procedure Implementation of the PREA #3000-64</p> <p data-bbox="242 499 1442 591">The Montgomery County Department of Correction and Rehabilitation (MCDOCR) has a zero-tolerance policy relating to illegal sexual acts, sexual harassment, or sexual misconduct in any of the detention facilities, places of business, and community corrections occurring programs operated by the department.</p> <p data-bbox="242 624 1465 784">Montgomery County Correctional Facility does not conduct criminal investigations of sexual abuse and assault. Such investigations are conducted by detectives from the Montgomery County District Attorney's Office. Montgomery County Correctional Facility does conduct administrative investigations of sexual abuse and sexual harassment. Documentation of training for Montgomery County Correctional Facility Investigator was provided to this auditor. A review of completed investigations demonstrated the investigators' full understanding of the training.</p> <p data-bbox="242 817 1347 844">National Institute of Corrections (NIC) PREA (Prison Rape Elimination Act) Course Interviews with Staff</p> <p data-bbox="242 878 1481 969">Agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings. This training is a 3rd party course offered through the National Institute for Corrections. https://nicic.gov/prison-rape-elimination-act-prea-investigating-sexual-abuse-confinement-setting-course. The main purpose of this course is to assist agencies in meeting the requirements of Prison Rape Elimination Act (PREA) Section 115.34 "Specialized Training for Investigators". At the end of this course, you will be able to explain the knowledge, components, and considerations that an investigator must use to perform a successful sexual abuse or sexual harassment investigation consistent with PREA standards. There are 18 number of investigators currently employed who have completed the required training.</p> <p data-bbox="242 1167 1490 1391">The Auditor conducted a telephone interview with an agency Investigators. The agency Investigators informed the Auditor he had received training offered by the agency to conduct sexual abuse investigations in a confinement setting. The Investigators explained the Investigators conducts sexual abuse and sexual harassment investigations in the facility when the act appears to be criminal in nature. The Investigators had been trained in the areas listed in this PREA policy. The Investigators issues Miranda and Garrity, interviews those involved, collects evidence, and is familiar with the criteria and evidence to substantiate a case. The Investigators explained he is a sworn law enforcement officer and consults with the Attorney's office to discuss sufficient evidence to prosecute a case.</p> <p data-bbox="242 1424 1490 1516">There were no allegations in the facility within the past 12 months that required referral for criminal investigation by an Investigator. The Auditor reviewed investigative reports from the previous 12 months. A review of investigative reports appear to support the Investigators have been appropriately trained to conduct investigations in a confinement setting.</p> <p data-bbox="242 1550 373 1576">Conclusion:</p> <p data-bbox="242 1583 1401 1675">The Auditor concluded the agency has provided appropriate training to its Sexual Abuse Investigators. The Auditor conducted a review of policies, procedures, training curriculum, training records, investigative reports and conducted interviews with agency investigators to determine the agency meets the requirements of this standard.</p> |

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| 115.35 | Specialized training: Medical and mental health care |
| | <p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="240 304 1002 465"> MCDOCR Policy and Procedure PREA #3000-64 The Prison Rape Elimination Act Medical/Mental Health/Training Curriculum Training Records Interviews with Medical Practitioners Interview with Mental Health Practitioner </p> <p data-bbox="240 501 994 528">MCDOCR Policy and Procedure Implementation of the PREA #3000-64</p> <p data-bbox="240 533 1490 689"> The MCDOCR Training Section staff and division training staff will ensure that all new employee orientation curriculums incorporate and train all new correctional employees and other authorized personnel who will work in any of the department's facilities in the department's zero tolerance philosophy regarding sexual crimes, sexual harassment, and sexual misconduct. Yearly training will be conducted to stress the importance of prevention and the reporting of any allegation or act of illegal sexual crimes, sexual harassment or sexual misconduct, as outlined throughout this procedure. </p> <p data-bbox="240 725 1054 752">The Prison Rape Elimination Act Medical/Mental Health/Training Curriculum</p> <p data-bbox="240 757 1485 949"> Specialized medical training is provided to medical and mental health practitioners utilizing the National Institute of Corrections, "PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting." The specialized training includes detecting and assessing signs of sexual abuse and sexual harassment, preserving physical evidence, responding effectively and professionally to victims, and how to report allegations or suspicions of sexual abuse and sexual harassment. Each medical and mental health professional is provided the specialized training during their orientation and prior to performing services in the facility. </p> <p data-bbox="240 985 1493 1375"> The Auditor conducted formal interviews with medical and mental health practitioners. Each practitioner informed the Auditor they had received both specialized training and the training offered to all MCDOCR employees. The Auditor was informed the training was provided during their orientation to the facility and each year thereafter. The Auditor questioned each medical practitioner about the training topics as required by this standard. The Auditor asked each to explain how medical staff treat victims while preserving physical evidence. Each explained they treat the victim's life-threatening injuries while preserving any evidence in the process. Each explained if there are no life-threatening injuries the nurse will obtain vital sign and obtain as much information as possible from the victim while waiting transportation to the hospital. The Auditor verified each medical practitioner has been educated regarding the requirements of this standard. The Auditor was informed medical and mental health personnel are required to attend training on an annual basis. The annual training includes a review of the agency's policies and procedures towards sexual abuse and sexual harassment and the National Institute of Corrections Specialized Medical Training. Medical personnel at the MCDOCR do not conduct forensic examinations. Forensic examinations are performed by appropriate staff at the Local Hospital. </p> <p data-bbox="240 1411 1485 1500"> There were 30 number of all medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy. There are 100% of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy. </p> <p data-bbox="240 1536 376 1563">Conclusion:</p> <p data-bbox="240 1568 1490 1724"> The Auditor concluded medical and mental health professionals at the MCDOCR have been appropriately trained. The facility maintains documentation that medical and mental health professionals have received specialized medical training and the same training offered to all MCDOCR staff. The auditor conducted a review of MCDOCR policies, procedures, training curriculum, training records and interviewed medical and mental health professional and determined the facility meets the requirements of this standard. </p> |

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| 115.41 | Screening for risk of victimization and abusiveness |
| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 Offender Records Interviews with Staff Interviews with Offenders</p> <p>MCDOCR Policy and Procedure Implementation of the PREA #3000-64</p> <p>1. Screening for Risk of Victimization and Abusiveness.</p> <p>(a) All inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.</p> <p>(b) Intake screening shall ordinarily take place within 24 hours of arrival at the facility.</p> <p>(c) Such assessments shall be conducted using an objective screening instrument. (Initial Placement Screening Form, Intake Data Entry Form, Initial Placement Screening Summary Chart)</p> <p>(d) The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization:</p> <ol style="list-style-type: none"> (1) Whether the inmate has a mental, physical, or developmental disability; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's own perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes. <p>(e) The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the Department, in assessing inmates for risk of being sexually abusive.</p> <p>(f) Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.</p> <p>(g) An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.</p> <p>(h) Inmates may not be 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.</p> <p>(i) The Department shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.</p> <p>NOTE: Staff shall utilize the comments section on the booking forms to fully complete the assessment.</p> <p>There are 1595 number of inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility. There are 933 number of inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more and who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake.</p> <p>Conclusion: The auditor interviewed intake staff and reviewed intake screening forms of random offenders. In addition, the auditor questioned random staff and offenders in reference to offender screening for risk of sexual victimization or risk of sexually abusing other offenders within 72 hours of intake. MCDOCR is in compliance of this standard.</p> |

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| 115.42 | Use of screening information |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 MCDOCR Policy and Procedure Objective Jail Classification # 1200-1 Program List Inmate DOCR Custody Locator List Keep Separate List Facility Work Board Interviews with Staff Interviews with Offenders</p> <p>MCDOCR Policy and Procedure Implementation of the PREA #3000-64 V. Use of Screening Information: (a) The Department shall use information from the risk screening to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. (b) The Department shall make individualized determinations about how to ensure the safety of each inmate. (c) In deciding whether to assign a transgender or intersex inmate to a housing unit or a programming assignment, the Department shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems. (d) 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. (e) A transgender or intersex inmate's own view with respect to his or her own safety shall be given serious consideration. (f) Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. (g) The Department shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates. (h) The Department shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. (i) The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. (j) The Department shall provide such victims with medical and mental health services consistent with the community level of care.</p> <p>II. PROCEDURES A. Classification System 1. The MCDOCR classification process begins when the inmate is booked into MCDC. The process is continued when and if the inmate is transferred to MCCF. Once at MCCF, unless special housing is necessary, inmates are initially housed in a Pre-placement pod awaiting orientation, a physical exam, TB skin test (if not previously administered at MCDC), and interview with a Case Manager. 2. The process of Objective Jail Classification is accomplished by completion of all classification forms according to their instructions as well as participation and interaction between the Case Manager, Correctional Officer, and the inmate. These forms/steps may include: a. Initial Classification Screening Form and Initial Placement Screening Summary Chart b. Suicide Screening Form (SSF) c. Classification and Custody Assessment Form d. Classification Interview /Inmate Guidebook e. Inmate Needs Assessment f. Orientation Procedure g. Reclassification and Custody Assessment Scale h. Intake A (Inmates 21 and under). i. Ninety (90) day review.</p> <p>V. INTAKE PROCESS A. Booking Phase: A Receiving and Discharge Officer receives the inmate into MCDC. (See MCDOCR Policy and Procedure 1300-12, Receiving, Temporary Release and Discharge). The officer observes the newly admitted inmate, and</p> |

reports and documents any unusual behavior, injuries, intoxication, or other pertinent data to the Shift Administrator, the Intake/Classification Unit, and/or Intake Counselor. The Receiving Officer assigned to intake completes all booking forms:

1. During the booking process, an Initial Classification Screening form is completed which identifies risks that may exist in dealing with that inmate (e.g. medical problems, substance abuse, escape history, violent history, suicidal tendencies, gang affiliations, domestic violence, sexual abuse/victimization, etc.)

VII. PRIMARY CLASSIFICATION

Variables considered for primary classification include: type of offense, notoriety of offense, victimization potential, psychological stability, passive/aggressive behavior, personal interview, medical concerns, and prior institutional behavior. The Case Manager will review the file, meet with the inmate, complete the Classification and Custody Assessment Form, and address any concerns the inmate may have.

A. Each inmate is evaluated in terms of his/her need for a special housing assignment. Any inmate who is identified as a potential risk is referred to the Special Classification Review Board for consideration and review. Classification decisions are based on the least restrictive custody level appropriate for the risk variables involved. The inmate may appeal any classification decision.

MCDOCR Policy and Procedure Objective Jail Classification # 1200-1

III. CUSTODY LEVELS DETERMINED AT MCCF:

The following is a description of the custody levels used in the classification process.

A. MINIMUM CUSTODY: An inmate who has been specifically rated for minimum custody through the Objective Jail Classification process may meet one or more of the following criteria:

1. A risk assessment total score of 0-5 points.
2. Have no open charges or detainers, not including charges for which the individual has been given personal bond.
3. Be sentenced or unsentenced.
4. Have no prior escape or attempted escape charges or convictions.
5. Have no charges or convictions for violent offenses or 1st of 2nd degree sex offenses.
6. Have a good institutional adjustment record, to include no adjustment reports or serious incident reports within the last thirty (30) days, and/or must have been off of disciplinary hold for thirty (30) days.
7. Is program eligible (if specific program requirements are met), including the Model Learning Center (MLC), Youthful Offender Unit, (YOU), Jail Addiction Services (JAS) Program, Choices for Change (CFC), and/or Workforce.
8. Is a worker or is approved by the Deputy Warden of Custody and Security, Shift Manager (or designee), the CS IV, and the Institutional Work Coordinator for institutional work, with minimal supervision.

B. MEDIUM CUSTODY: As a general rule, inmates in this custody level display satisfactory institutional adjustment and are not felt to be dangerous or an escape risk, but have been identified by the risk factor assessment instrument as requiring medium custody level. They may meet one or more of the following criteria:

1. A Risk Assessment total score of 0-10 points, and/or may have a detainer/warrant.
2. Be sentenced or unsentenced.
3. Is a general population inmate, needing only minimal controls within the medium security living environment.
4. Is program eligible (if specific program requirements are met) including the Model Learning Center (MLC), Youthful Offender Unit, (YOU), Jail Addiction Services (JAS) Program, Choices for Change (CFC) and/or Workforce.
5. Have no institutional infractions within the last thirty (30) days and/or must have been off of disciplinary hold for thirty (30) days.
6. Is a worker or is approved by the Deputy Warden of Custody and Security, Shift Manager (or designee), the CS IV, and the Institutional Work Coordinator for work inside the institution, with minimal supervision.

C. MAXIMUM CUSTODY AT MCCF: An inmate classified to this level of custody may require restricted housing based on past and present behaviors and a criminal background that is determined to pose a security risk. Inmates classified to this level of custody may have typically displayed repetitive assaultive behavior, have a history of several prior felony convictions, have an escape or attempted escape from an institution, by virtue of their behavior pose a threat to the safety of others, and/or display an unsatisfactory institutional adjustment, i.e. one which includes repeated violations at the Category 100 or 200 level. An inmate designated as maximum custody either during the regular classification process or temporarily by the Shift Manager, Case Manager, or Shift Administrator (pending review by the Classification staff), may meet one or more of the following criteria:

1. A Risk Assessment total score of 11 points or above.
2. A Risk Assessment score of 7 on the first three items.
3. Be sentenced or unsentenced.
4. Has a detainer for an escape or attempted escape, a violent offense, or is considered an escape risk as judged by past and/or current behavior.
5. Has displayed assaultive behavior toward staff or inmates.
6. Have prior or current charges for a violent offense.
7. Displays behavior that includes a Category 1 00A offense, or recurring Category 100 or 200 adjustment violations.

D.SPECIAL MANAGEMENT AT MCCF: An inmate designated as a special management concern is deemed so principally because of special needs. The special management inmate may pose a risk to both him/herself and others, and may therefore present essentially the same risk as a maximum custody inmate. This inmate is designated as special

management, not necessarily maximum custody, because the risk he/she poses may be beyond his/her control. Special management may include mentally disturbed inmates housed in the Crisis Intervention Unit (CIU), inmates with self-mutilation tendencies, suicidal inmates, chronic alcoholics, active epileptics, diabetics, inmates on a "Keep Separate" status, those who display

aggressive or antisocial tendencies, those who are experiencing serious adjustment problems, and those inmates ordered medically isolated by institutional medical staff.

1. Crisis Intervention Unit (CIU)

a. Inmate is acutely suicidal, has expressed suicidal ideation or has exhibited suicidal gestures, and/or requires special observation as determined by Mental Health Staff.

b. Inmate's mental status is impaired, and a Mental Health therapist has determined that his/her functioning precludes him/her from being able to function in the general population.

c. Inmate has a history of chronic mental illness, and a Mental Health therapist has determined that he/she requires special handling and treatment.

2. SPECIAL MANAGEMENT POD

a. Inmate displays aggressive or antisocial tendencies.

b. Inmate is experiencing serious adjustment problems and has displayed an inability to be housed in general population.

c. Inmate is on Protective Custody status in order to ensure his/her safety.

3. MEDICAL

a. Inmate is housed in the medical isolation area.

b. Inmate is housed in the general medical area for observation or convalescence.

IV. INITIAL CLASSIFICATION

Initial Classification is the determination of the first housing assignment of a newly admitted inmate at MCDC, and the potential need for any special referrals or services. The Shift Administrator at MCDC, as appropriate, will determine the need for any immediate special housing. This decision is made following the booking process, and is based upon information received from the delivering CPU officer, the booking officer, the risk assessment, direct observation, and any other sources of pertinent information (i.e. rap sheet, warrant checks, etc.). Any matter needing immediate attention shall be referred to the Intake/Classification Unit or Shift Administrator. Telephone referrals shall be made to the Classification Staff/Traffic Officer at MCCF in emergency situations, and may result in the inmate's immediate transfer to MCCF.

V. INTAKE PROCESS

A. Booking Phase: A Receiving and Discharge Officer receives the inmate into MCDC. (See MCDOCR Policy and Procedure 1300-12, Receiving, Temporary Release and Discharge). The officer observes the newly admitted inmate, and reports and documents any unusual behavior, injuries, intoxication, or other pertinent data to the Shift Administrator, the Intake/Classification Unit, and/or Intake Counselor. The Receiving Officer assigned to intake completes all booking forms:

1. During the booking process, an Initial Classification Screening form is completed which identifies risks that may exist in dealing with that inmate (e.g. medical problems, substance abuse, escape history, violent history, suicidal tendencies, gang affiliations, domestic violence, sexual abuse/victimization, etc.)

2. An Initial Placement Screening Summary Chart is also completed which summarizes these risks, indicates the appropriate referrals to be made (i.e. mental health, medical, or classification), and documents the initial housing placement.

Conclusion:

A review of documentation of classification decisions and housing assignments clearly showed that the decisions are case-by-case, and that there is no designated unit for transgender or intersex inmates. Interviews with all staff and inmates confirmed compliance with this standard. Montgomery County Correctional Facility Policy and Procedure, "Prison Rape Elimination Act", requires that housing assignment decisions for transgender and intersex inmates be done on a case by case basis based on the health and safety needs of the inmate and the facility. The facility reports that there were no transgender or intersex inmates admitted to MCCF during this audit period and therefore no documentation of practice to review for compliance. Based upon the above this standard was deemed to be in full compliance.

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| 115.43 | Protective Custody |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="242 304 735 333">MCDOCR Policy and Procedure PREA #3000-64</p> <p data-bbox="242 338 1165 367">MCDOCR Policy and Procedure Gender Identification, Classification, and Housing #1200-27</p> <p data-bbox="242 371 681 400">MCDOCR Thirty Day Review Memorandum</p> <p data-bbox="242 405 435 434">Interview with Staff</p> <p data-bbox="242 463 994 492">MCDOCR Policy and Procedure Implementation of the PREA #3000-64</p> <p data-bbox="242 497 1402 557">Montgomery County Correctional Facility Policy and Procedure, "Prison Rape Elimination Act", addresses the use of protective custody.</p> <p data-bbox="242 586 1224 616">MCDOCR Policy and Procedure Gender Identification, Classification, and Housing #1200-27</p> <p data-bbox="242 620 678 649">VI. HOUSING DURING INCARCERATION:</p> <p data-bbox="242 654 1477 813">A. After completion of the initial intake process, an inmate identified as a transgender or transsexual person shall be housed in a single cell in a housing area consistent with the person's anatomical sex/gender, as identified during initial intake and that their safety and health can be ensured. Staff shall document this information on an incident report (DCA#36). These decisions are made on a case by case basis to ensure the management, health and safety of the inmate are taken into consideration as well.</p> <p data-bbox="242 817 1473 916">B. All identified transgender and transsexual inmates will be classified and assigned housing based on their safety/security needs, gender identity and genitalia. Classification staff shall assess all identified transgender and transsexual inmates for potential vulnerability if housed in general population.</p> <p data-bbox="242 920 1489 1081">C. An identified transgender or transsexual inmate will be housed in protective custody when there is reason to believe the inmate presents a heightened risk to him/herself or to others, or when the inmate expresses concern that he or she will be vulnerable to victimization in any other housing unit. The assignment shall be only for the period during which the heightened risk and/or concern exists. Inmates in administrative segregation, protective custody, or medical housing areas shall have access to programs and services consistent with that status.</p> <p data-bbox="242 1086 1493 1184">D. Transgender and transsexual inmates will be provided standard jail attire and privileges consistent with the gender of their housing assignment. Inmates under hormone therapy with secondary sexual characteristics such as breasts shall retain or be provided an initial amount of appropriate undergarments (i.e. a bra) when clinically indicated by appropriate medical staff.</p> <p data-bbox="242 1189 1489 1317">E. While incarcerated in the MCDOCR, transgender and transsexual inmates shall not be discriminated against as related to their participation in services, programs, or privileges, and shall not be subjected to verbal or physical harassment/misconduct or a hostile environment by staff or other inmates. Individuals who are found to engage in such abuse shall be subject to appropriate disciplinary action.</p> <p data-bbox="242 1321 1493 1382">F. All searches of transgender and transsexual inmates shall be conducted in a manner consistent with MCDOCR policy, and outside of the presence of other inmates or non-critical staff whenever possible.</p> <p data-bbox="242 1413 1489 1641">There were (0) number of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment. In the past 12 months, there were (0) number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement. From a review of case files of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months, there were (0) number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged.</p> <p data-bbox="242 1673 375 1702">Conclusion:</p> <p data-bbox="242 1706 1477 1899">The provisions of the policy comply with this standard. A review of documentation of classification decisions and housing assignments clearly showed that the decisions are case-by-case, and involuntary protective custody is used only as last resort. Interviews with all inmates confirmed compliance with this standard. Documentation (inmate's signed request) on all inmates in protective custody at Montgomery County Correctional Facility showed they are there at their own request (see inmate handbook). The facility reports that involuntary protective custody was not used during this audit period. Based upon the above this standard was deemed in full compliance.</p> |

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| 115.51 | Inmate reporting |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="242 304 735 331">MCDOCR Policy and Procedure PREA #3000-64</p> <p data-bbox="242 338 1003 365">MCDOCR Policy and Procedure Consular Notification and Access #3000-54</p> <p data-bbox="242 371 416 398">Visitor Handbook</p> <p data-bbox="242 405 536 432">Inmate Guide Book/Brochure</p> <p data-bbox="242 439 435 465">Interview with Staff</p> <p data-bbox="242 499 992 526">MCDOCR Policy and Procedure Implementation of the PREA #3000-64</p> <p data-bbox="242 533 1473 689">A. Each Division Chief will ensure that, through the orientation process and materials supplied during orientation, offenders are aware of the Department's zero-tolerance policy with regard to illegal sexual crimes, inclusive of sexual misconduct and sexual harassment. Each Division Chief will also ensure that all offenders understand that they are being encouraged to immediately report any concern or fear of possible sexual crimes to any correctional staff member, including a correctional staff member other than an immediate point-of-contact line officer or staff member.</p> <p data-bbox="242 696 1489 925">(b)The MCDOCR Training Section staff and division training staff will ensure that all new employee orientation curriculums incorporate and train all new correctional employees and other authorized personnel who will work in any of the department's facilities in the department's zero tolerance philosophy regarding sexual crimes, sexual harassment, and sexual misconduct. Yearly training will be conducted to stress the importance of prevention and the reporting of any allegation or act of illegal sexual crimes, sexual harassment or sexual misconduct, as outlined throughout this procedure. This training may include dissemination of handouts/brochures related to the department's zero tolerance policy on Sexual Acts/Misconduct in the workplace and/or the reading of these procedures.</p> <p data-bbox="242 958 596 985">Reporting Incidents / Allegations</p> <p data-bbox="242 1019 1485 1077">C. Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.</p> <p data-bbox="242 1084 1485 1312">D. In instances of incidents involving alleged sexual crimes, sexual misconduct, or sexual harassment, the on-duty supervisor will ensure that an Incident Report (e.g. DCA-36) is processed and submitted to the facility Division Chief. Any member or authorized personnel including, but not limited to medical staff, mental health staff, social service and social work practitioners, who has knowledge of or who has received information, written or verbal, regarding commission of sexual crimes/sexual harassment, or sexual misconduct or an offender's concern or fear that the offender will become the victim of impending sexual crimes/sexual harassment, or sexual misconduct, must immediately notify a supervisor who will then take immediate steps to evaluate the victim's concern/allegation.</p> <p data-bbox="242 1341 1453 1435">W. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to file reports relating to allegations of sexual abuse, and shall also be permitted to file such reports on behalf of inmates. Third-party allegations on behalf of an inmate can be initiated by contacting the Departments PREA investigator.</p> <p data-bbox="242 1464 1482 1559">Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates.</p> <p data-bbox="242 1592 1050 1619">MCDOCR Policy and Procedure Consular Notification and Access #3000-54</p> <p data-bbox="242 1626 759 1653">D. Consular Access to Detained Foreign Nationals</p> <ol data-bbox="242 1659 1489 2085" style="list-style-type: none"> <li data-bbox="242 1659 1466 1753">1. Detained foreign nationals are entitled to communicate with their consular officers. Any communication by a foreign national to his/her consular representative must be forwarded by the appropriate local officials to the consular post, without delay. <li data-bbox="242 1760 1473 1883">2. Foreign consular officers must be given access to their nationals and permitted to communicate with them. Such officers have the right to visit their nationals, to converse and correspond with them, and to arrange for their legal representation. They must refrain from action on behalf of a foreign national, however, if the national opposes their involvement. In addition, consular officers may not act as attorneys for their nationals. <li data-bbox="242 1890 1489 2018">3. The rights of consular access and communication generally must be exercised subject to local laws and regulations. For example, consular officers may be required to visit during established visiting hours. Federal, state, and local rules of this nature may not, however, be so restrictive as to defeat the purpose of consular access and communication. Such rules "must enable full effect to be given to the purposes" for which the right of consular assistance has been established. <li data-bbox="242 2024 1441 2085">4. The above requirements are set out in Article 36 of the Vienna Convention on Consular Relations (VCCR). Additional requirements may apply to particular countries because of bilateral agreements. <p data-bbox="242 2119 1473 2145">The facility does not house inmates detained solely for civil immigration purposes. All inmates interviewed knew at least two</p> |

means to report sexual abuse or harassment (report to staff and Hotline via inmate telephone system were the most common responses). All knew where to find the Hotline number to report abuse outside the agency. The Auditor reviewed the agency's Zero Tolerance Brochure. Each offender is provided the brochure during their intake. The brochure informs offenders to report sexual abuse or sexual harassment by:

- Verbally to staff
- Call #77 for internal call or #88 for outside reporting
- Ask family or friends to report (email address, telephone number and address provided)

The tour included all offender housing units and support areas. Observations were made of posters and postings throughout the facility that inform offenders about the agency's zero-tolerance to sexual abuse and sexual harassment and how to report allegations of sexual abuse and sexual harassment.

Inmates receive a handout at admission regarding how to report abuse and there are posters throughout the facility and on all housing units with the information. All staff are mandated reporters of abuse per Montgomery County Correctional Facility Policy and Procedure.

Conclusion:

The facility requires staff accept, report and document all allegations of sexual abuse and sexual harassment. The Auditor reviewed the agency's policies, procedures, Inmate Guide Book, Zero Tolerance Brochure, Website, postings, investigative reports, training records, made observations, interviewed staff and offenders and determined the facility meets the requirements of this standard.

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| 115.52 | Exhaustion of administrative remedies |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 Adjustment Report DCA-71 Interview with Staff Interview with Inmates</p> <p>MCDOCR Policy and Procedure Implementation of the PREA #3000-64</p> <p>13. Grievance/Discipline:</p> <p>A. Emergency Grievance:</p> <ol style="list-style-type: none"> 1. Special provisions will be made for responding to grievances of an emergency nature. An emergency is generally an unforeseen combination of circumstances or the resulting state that calls for immediate action. (i.e. substantial risk of imminent sexual abuse.) The Division Administrator will determine whether a grievance is an emergency within forty eight (48) hours after receipt of the grievance. 2. If a grievance submitted as an emergency is ruled at any level not to be an emergency, it will be returned to the inmate/resident citing the reasons why the grievance is not considered an emergency. The response will also indicate that the grievance can be resubmitted as a regular grievance. 3. Emergency grievances will be forwarded immediately, without substantive review, to the level at which corrective action can be taken. It will be the duty of all correctional employees to forward the emergency grievance in an expedited fashion to the appropriate supervisory/management level within the institution. 4. Like other grievances, emergency grievances can be appealed to the Division Administrator and to the Department Director. The Division Administrator (or the Department Director where appropriate) or designee will take prompt action (within 24 hours) upon receipt of an emergency grievance appeal. The inmate/resident will be notified in writing immediately after a decision is made in these cases. 5. Emergency grievances must be resolved and a written response provided to the inmate/resident within five (5) calendar days. The initial response and final Department decision shall document the Department's determination whether the inmate is in substantial risk of imminent sexual abuse or other danger and the action taken in response to the emergency grievance. <p>B. The Department shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse.</p> <p>C. The Department may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.</p> <p>D. The Department shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.</p> <p>E. Nothing in this section shall restrict the Department's ability to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired.</p> <p>F. The Department shall 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, and such grievance is not referred to a staff member who is the subject of the complaint.</p> <p>G. The Department shall issue a final decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Computation of the 90-day time period shall not include time consumed by inmates in preparing any administrative appeal. The Department may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The Department shall notify the inmate in writing of any such extension and provide a date by which a decision will be made.</p> <p>H. At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.</p> <p>I. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates.</p> <p>J. 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. If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision.</p> <p>K. The Department may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.</p> <p>L. Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.</p> |

- M. The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.
- N. The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.
- O. Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.

The Auditor conducted formal interviews with offenders. Offenders were asked to explain the different ways of reporting allegations of sexual abuse and an imminent risk of sexual abuse. Most offenders asked were aware the facility accepts allegations of sexual abuse through the grievance mechanism. Offenders were aware they could file a grievance to report sexual abuse anonymously. None of the offenders interviewed by the Auditor had filed a grievance alleging an imminent risk of sexual abuse or an allegation of sexual abuse.

The Auditor conducted interviews with facility staff. Staff were asked if offenders could submit a grievance alleging sexual abuse and/or alleging an imminent risk of sexual abuse. Each staff member was aware offenders could file such grievances. Supervisors interviewed by the Auditor explained their responsibilities in responding to grievances alleging an imminent risk of sexual abuse. Supervisors informed the Auditor they take immediate action to ensure the safety of the offender.

The Auditor was informed the offender is provided a response within 8 hours. The Auditor asked what is included in the written response. The Auditor was informed the response to the offender includes whether the offender is at substantial risk of imminent sexual abuse and the supervisor's actions taken in response to the emergency grievance. The Auditor discussed disciplining an offender who has submitted an emergency grievance alleging sexual abuse in bad faith. Staff informed the Auditor they must have proof the offender submitted an allegation in bad faith.

In the past 12 months, there were (0) number of grievances filed that alleged sexual abuse. In the past 12 months, there were (0) number of grievances alleging sexual abuse that reached final decision within 90 days after being filed. In the past 12 months, there were (0) number of grievances alleging sexual abuse that involved extensions because final decision was not reached within 90 days. There were (0) number of grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline. There were (0) number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months. There were (0) number of those grievances in 115.52 (e)-3 that had an initial response within 48 hours. There were (0) number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within 5 days. In the past 12 months, there were (1) number of inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith.

Conclusion:

The Auditor determined the MCDOCR has appropriate policies and procedures in place for addressing offender allegations of sexual abuse and an imminent risk of sexual abuse. Facility staff understand the agency's procedures and the offender population is aware they can submit grievances alleging sexual abuse and/or risk of imminent sexual abuse. The Auditor reviewed the agency's policies, procedures, grievances, investigative records, and conducted interviews with staff and offenders to determine the facility meets the requirements of this standard.

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| 115.53 | Inmate access to outside confidential support services |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="240 304 735 331">MCDOCR Policy and Procedure PREA #3000-64</p> <p data-bbox="240 338 456 365">VASAP Crisis Center</p> <p data-bbox="240 371 647 398">Memorandum Of Understanding (SART)</p> <p data-bbox="240 405 655 432">Memorandum Of Understanding (MCPD)</p> <p data-bbox="240 439 603 465">PREA Posters-English and Spanish</p> <p data-bbox="240 472 440 499">Inmate Guide Book</p> <p data-bbox="240 506 647 533">Visitor Handbook – English and Spanish</p> <p data-bbox="240 539 435 566">Interview with Staff</p> <p data-bbox="240 573 469 600">Interview with Inmates</p> <p data-bbox="240 629 994 656">MCDOCR Policy and Procedure Implementation of the PREA #3000-64</p> <p data-bbox="240 663 1485 1059">F. Any member or authorized personnel including, but not limited to medical staff, mental health staff, social service and social work practitioners, who has knowledge of or who has received information, written or verbal, regarding commission of sexual crimes/sexual harassment, or sexual misconduct or an offender's concern or fear that the offender will become the victim of impending sexual crimes/sexual harassment, or sexual misconduct, must immediately notify a supervisor who will then take immediate steps to evaluate the victim's concern/allegation. In cases where offenders are the victims, department staff will send a departmental PREA information sheet/brochure to community referral practitioners (outside counselors, therapists, etc.) and give inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies so that they are aware of PREA requirements and their role in alerting departmental staff. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. The supervisor notified will ensure proper medical treatment (if applicable) and the safety of the victim by means provided in department policies and procedures.</p> <p data-bbox="240 1088 469 1115">VASAP Crisis Center</p> <p data-bbox="240 1122 1485 1451">Each allegation is evaluated on a case-by-case basis and depending on the nature of the allegation depends on how an inmate would receive this information. The MCDOCR mental health therapists maintain a close working relationship with the Crisis Center. Through their sessions with the inmates, it is determined if the case would be forwarded to the Crisis Center or not. Many inmates feel the sessions they have with our therapists is sufficient and no further intervention is needed. If the therapist thinks it is more appropriate to have a Crisis Center therapist meet with the inmate, they would contact them and have them provide their services. A meeting room would be made available for them that ensure privacy and confidentiality. In cases where the police are involved and a medical examination is conducted at the hospital, it is the Police protocol that they would provide the inmate with advocate information. That same information can also be provided by MCDOCR if necessary. There is a folder with a number of sources and advocate information available for the auditors review once on site. MCDOCR is a part of the VASAP and provides resources to obtain these services outside of the facility.</p> <p data-bbox="240 1480 671 1507">Memorandum Of Understanding (SART)</p> <p data-bbox="240 1514 1477 1742">To ensure a coordinated, trauma-informed response to sexual assault for the benefit of the victim and the community, the Montgomery County Police Department (MCPD), the Takoma Park Police Department (TPPD), the Montgomery County State's Attorney's Office (SAO), the Montgomery County Health and Human Services Victim Assistance and Sexual Assault Program (V ASAP), the Shady Grove Adventist Hospital SANE Program (SGAH), the Family Justice Center (FJC), the Treehouse Child Assessment Center (THCAC), Montgomery County Department of Correction and Rehabilitation, and the Maryland Coalition Against Sexual Assault (MCASA), agree to participate in the Montgomery County Sexual Assault Response Team and to follow the tenants set forth in Memorandum of Understanding set forth below.</p> <p data-bbox="240 1771 408 1798">SART MISSION</p> <ul data-bbox="240 1805 1493 2033" style="list-style-type: none"> • To provide a comprehensive, collaborative, victim-centered, trauma-informed, multidisciplinary team response to allegations of sexual assault. • To minimize trauma for victims. • To provide state-of-the-art medical and mental health services to victims. • To promote interagency collaboration and coordination on sexual assault cases. • To prevent further victimizing identified victims. • To provide quality interdisciplinary training for SART members. <p data-bbox="240 2063 663 2089">Memorandum Of Understanding MCPD</p> <p data-bbox="240 2096 1485 2157">This Memorandum of understanding (MOU) is entered into between the Montgomery County Department of Correction and Rehabilitation (MCDOCR) and the Montgomery County Police Department (MCPD) and is initiated to facilitate an agreement</p> |

between the parties for services related to goals and implementation of Federal Prison Rape Elimination Act (PREA) mandates.

The facility does not house inmates detained solely for civil immigration purposes. Interviews with medical and mental health staff confirmed that inmates would be advised about confidentiality prior to accessing the services. Information is provided to inmates via posters that are on display in all housing units, the inmate handbook and the inmate education supplemental brochure. All of these contain the telephone number and mailing address for inmates to contact.

The VASAP provides advocacy services to the MCDOCR. The agency provided the Memorandum of Understanding (MOU) dated January 2015, which outlines what each agency will provide as part of this agreement. Offenders can reach out to the VASAP You can report to any MCDOCR Staff Member verbally or in writing. You may also remain anonymous if you choose. If you are a Foreign National and want to file a report with your country's Consulate, you may request to see a supervisor or your Case Manager. Using an outside line, you can file a report by calling: Internal to MCDOCR: 240-777-9855 or to an Outside Third Party: 1-855-273-5609. Using the inmate phone system, you can dial: Internal: #77 or Outside: #88.

The auditor was provided with PREA Brochures in English, and Spanish. The posters contained phone numbers and mailing addresses for victim emotional support services. The auditor established telephone contact with a representative of VASAP. They affirmed their service to MCDOCR offenders alleging sexual abuse. The facility informs offenders, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law.

Conclusion:

The facility maintains documentation it provides emotional support services for sexual abuse victims through written agreements. Contact information with the organization is provided by intake personnel through the Inmate Guidebook, Zero Tolerance Brochure and comprehensive education. The Auditor reviewed the MCDOCR policies, procedures, Memorandum of Understanding, Inmate Guidebook, Zero Tolerance Brochure, training acknowledgements and interviewed staff, offenders and victim advocate to determine the facility meets the requirements of this standard.

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| 115.54 | Third-party reporting |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="242 304 735 331">MCDOCR Policy and Procedure PREA #3000-64</p> <p data-bbox="242 338 435 365">Reporting Methods</p> <p data-bbox="242 371 414 398">Third Party Form</p> <p data-bbox="242 405 408 432">Agency Website</p> <p data-bbox="242 439 496 465">Zero Tolerance Brochure</p> <p data-bbox="242 472 603 499">PREA Posters-English and Spanish</p> <p data-bbox="242 506 435 533">Interview with Staff</p> <p data-bbox="242 539 469 566">Interview with Inmates</p> <p data-bbox="242 573 379 600">Observations</p> <p data-bbox="242 629 994 656">MCDOCR Policy and Procedure Implementation of the PREA #3000-64</p> <p data-bbox="242 663 1477 757">MCDOCR has a Zero Tolerance policy for incidences of sexual abuse within its facilities. It is the policy of the MCDOCR to provide a safe, humane, and secure environment free from the threat of sexual abuse for all inmates or residents in custody by maintaining a program that prevents, detects, responds, investigates, and tracks all alleged sexual abuse incidents.</p> <p data-bbox="242 786 451 813">Reporting Methods</p> <p data-bbox="242 819 1485 1016">There are several methods to receive third party reports of inmate sexual abuse or harassment. Any third-party verbal report is accepted, documented, and forwarded for investigation or a third party piece of documentation in any manner that is received is documented, forwarded, and investigated. PREA brochures, posters, and the Department PREA informational web site provides information to report instances either via a Departmental internal tip line, an external third party (855) tip line, or they can file a report via email to the DOCR PREA email box. Finally, third party reports can be received via other facilities as the allegation is reported to them.</p> <p data-bbox="242 1046 1481 1207">MCDOCR public website lists the hotline number to call if sexual abuse or harassment is suspected. All inmates interviewed acknowledged that they knew they could report abuse via a third party. All inmates interviewed acknowledged ready access to contact with their families (visiting and telephone calls) and the ability to contact their lawyer if they so desired. All staff interviewed acknowledged that they would accept a third-party report of abuse and respond in the same manner as if they had witnessed the abuse themselves.</p> <p data-bbox="242 1236 1485 1464">Each MCDOCR facility has a free and confidential PREA tip line available to inmates and residents to report incidents of sexual abuse confidentially without fear of retaliation. Inmates/residents receive a guidebook during their orientation that gives notice that sexual contact is prohibited and may be punishable by disciplinary action and criminal prosecution. In the same guidebook, the inmates/residents are directed on how to avoid becoming a target for sexual abuse. During the orientation, inmates/residents are given instructions on what to do if they have become a victim of sexual abuse or if they believe someone else may be a victim of sexual abuse. This includes the various methods that reports are taken and how to preserve physical evidence.</p> <p data-bbox="242 1471 584 1498">All information is kept confidential.</p> <p data-bbox="242 1527 1461 1588">PREA tip lines for both inmate reporting and third-party reporting of sexual abuse, sexual harassment, sexual assault, and sexual misconduct are available at:</p> <p data-bbox="242 1594 587 1621">Internally to DOCR: 240-777-9855</p> <p data-bbox="242 1628 603 1655">Outside third party: 1-855-273-5609</p> <p data-bbox="242 1662 994 1688">You may submit a report via email to docrprea@montgomerycountymd.gov</p> <p data-bbox="242 1695 815 1722">Please click link to use Form: Third Party Reporting Form</p> <p data-bbox="242 1751 1490 2016">All employees, vendors, contractors, and volunteers are required to report all allegations of sexual abuse through their chain of command, a security staff member, or their point of contact at the facility. First Responders ensure that the alleged abuser and victim are separated and that they both receive immediate medical attention if applicable, they are offered mental health services and they are offered Chaplin services. All allegations that are criminal in nature are referred to the Montgomery County Police for further investigation. PREA tip lines for both inmate reporting and third-party reporting of sexual abuse, sexual harassment, sexual assault, and sexual misconduct are available at Internally to DOCR at 240-777-9855 or to an outside third party at 1-855-273-5609. You may submit a report via email to docrprea@montgomerycountymd.gov. All information is kept confidential.</p> <p data-bbox="242 2045 1485 2139">The Auditor conducted formal interviews with offenders. Each offender was asked what avenues were available for making an allegation of sexual abuse or sexual harassment. The offenders stated they could tell a staff member or any person they trust, file an emergency grievance, call the sexual abuse hotline, or have another person make the allegation on their behalf.</p> |

Each offender understood how to have a third-party file an allegation on their behalf. Each offender understands they can file an allegation anonymously. The Auditor conducted formal interviews with facility and Investigators. Investigators explained they conduct investigation of all allegations, regardless of how they are made.

Conclusion:

The Auditor determined the facility accepts all reports, including third party reports of sexual abuse and sexual harassment. The public is informed through the agency's website how to make a third-party report on behalf of an offender. The Auditor reviewed agency policy, procedures, website, posted PREA materials, Inmate Guidebook, Zero Tolerance Brochure, Third Party Reporting Form, Investigative Records, interviewed staff and offenders, made observations and determined the facility meets the requirements of this standard.

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| 115.61 | Staff and agency reporting duties |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 Investigative Records Training Curriculum Training Records Interviews with Staff Interviews with Offenders</p> <p>MCDOCR Policy and Procedure Implementation of the PREA #3000-64 Reporting Incidents / Allegations</p> <p>A. All incidents or allegations of sexual battery, sexual misconduct and sexual harassment that occurred in a facility, whether or not it is part of the Montgomery County Department of Correction and Rehabilitation, will be reported in accordance with established policies and procedures.</p> <p>C. Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.</p> <p>F. Any member or authorized personnel including, but not limited to medical staff, mental health staff, social service and social work practitioners, who has knowledge of or who has received information, written or verbal, regarding commission of sexual crimes/sexual harassment, or sexual misconduct or an offender's concern or fear that the offender will become the victim of impending sexual crimes/sexual harassment, or sexual misconduct, must immediately notify a supervisor who will then take immediate steps to evaluate the victim's concern/allegation. In cases where offenders are the victims, department staff will send a departmental PREA information sheet/brochure to community referral practitioners (outside counselors, therapists, etc.) and give inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies so that they are aware of PREA requirements and their role in alerting departmental staff. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. The supervisor notified will ensure proper medical treatment (if applicable) and the safety of the victim by means provided in department policies and procedures.</p> <p>G. Medical and mental health practitioners shall 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.</p> <p>H. Any correctional staff member who fails to report or take immediate action regarding such incidents, or who intentionally inflicts humiliation upon the victim or informant, or who trivializes a report of alleged sexual crimes, sexual harassment, or sexual misconduct, or fails to report any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation may be subject to procedures outlined in MCDOCR Standards of Conduct (P&P 3000-7) and Montgomery County policy. If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.</p> <p>M. The Directors Office will be notified immediately by the Division Chief of any allegation of sexual crimes, sexual harassment, or sexual misconduct so that an investigation can be initiated.</p> <p>N. If the offender does not make the allegation until he/she arrives at a medical department, medical staff will immediately notify a supervisor on duty. The supervisor receiving the allegation will notify the senior supervisor on duty, who in turn will notify the Division Chief and they will notify the Director.</p> <p>T. Inmates and Employees have the right to be free from retaliation for reporting sexual abuse and sexual harassment, staff are to report any retaliation immediately to the Deputy Warden of Custody and Security.</p> <p>Staff interviews indicate staff are aware the agency requires all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, as well as retaliation against offenders or staff who reported such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. All allegations of sexual abuse and sexual harassment (including those from third-party and anonymous sources) are reported directly to designated facility investigators.</p> <p>Medical and mental health staff indicate they disclose the limitations of confidentiality and their duty to report, at the initiation of services to an offender. Medical and mental health staff also acknowledged being required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to a designated supervisor or official immediately upon learning it. Volunteers who were interviewed indicated their requirement to report immediately any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility.</p> <p>The Auditor conducted formal interviews with a facility investigator. The Auditor asked the investigator if he had conducted</p> |

investigations of allegations that were reported by third parties. The investigator stated he conducts investigations of all allegations no matter the reporting avenue chosen. The Auditor asked if he has conducted investigations that were made anonymously.

The Auditor conducted formal interviews with randomly selected and specifically targeted offenders. Each offender was asked if they were confident in staff's ability to maintain confidentiality of an allegation of sexual abuse after learning of a reported incident. Most offenders stated they do feel staff would maintain confidentiality of the information.

The Auditor conducted a telephone interview with a facility volunteer. The volunteer was asked if he is required to report allegations of sexual abuse and sexual harassment. The volunteer stated the agency requires him to immediately report such allegations. The Auditor asked if he had received training from the facility. The volunteer stated he had received training and he was informed in training of the agency's requirement to report all allegations.

Conclusion:

The Auditor concluded staff, volunteers and contractors are aware of the MCDOCR requirement to report any knowledge, suspicion or information related to sexual abuse and sexual harassment. Staff understands the requirement to maintain confidentiality with the information obtained by an allegation. Interviews with medical and mental health practitioners revealed they understand the requirements for reporting sexual abuse that occurred in a community setting and for youthful offenders. The Auditor reviewed agency policies, procedures, training curriculum, investigative reports and conducted interviews with staff, contractors, volunteer and offenders to determine the facility meets the requirements of this standard.

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| 115.62 | <p>Agency protection duties</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 Investigative Records Internal Incident Reports Interviews with Staff Interviews with Offenders</p> <p>MCDOCR Policy and Procedure Implementation of the PREA #3000-64 Agency Protection Duties: -When authorized personnel learn that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.</p> <p>The facility reported there were no instances in the previous 12 months where facility personnel learned an offender was identified at a substantial risk of imminent sexual abuse. There was no offender who alleged an imminent risk of sexual abuse in the previous 12 months.</p> <p>The Auditor conducted formal interviews with facility supervisors. Supervisors were asked to explain what steps are taken to protect an offender after learning the offender is at a substantial risk of imminent sexual abuse. The Auditor was informed the potential victim and potential aggressor would be separated from one another. The facility investigator would immediately be notified so an investigation could begin to determine the risk. One of the offenders would be moved to another housing unit to maintain the safety of both offenders. Randomly selected staff were interviewed by the Auditor. Each was asked what steps they would take after learning an offender was at imminent risk of substantial sexual abuse. Each informed the Auditor they would immediately notify their supervisor and stay with the at-risk offender.</p> <p>The Auditor participated in a detailed tour of the MCDOCR. The Auditor observed multiple housing units that provide an opportunity to ensure offenders who are identified at a substantial risk of imminent sexual abuse could be housed safely from a potential aggressor. The facility has the ability to transfer offenders to another facility if the offender could not be housed safely.</p> <p>Conclusion: The Auditor concluded the MCDOCR takes immediate and appropriate actions to ensure the protection of offenders who are identified at a substantial risk of imminent sexual abuse. The Auditor reviewed agency policy, procedures, investigative records, conducted interviews with staff and offenders, made observations and determined the MCDOCR meets the requirements of this standard.</p> |
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| 115.63 | Reporting to other confinement facilities |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 PREA Investigator Report Interviews with Staff</p> <p>MCDOCR Policy and Procedure Implementation of the PREA #3000-64 B. Reporting to Other Confinement Facilities</p> <ol style="list-style-type: none"> 1. Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. 2. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The agency shall document that it has provided such notification. 3. The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with PREA standards. <p>The MCDOCR reported there were no allegations received that an offender had allegedly been sexually abuse while confined at another facility. The facility reported there were no notifications received from another facility that a former MCDOCR offender alleged sexual abuse while incarcerated at the Montgomery County Correctional Facility.</p> <p>The Auditor conducted formal interviews with MCDOCR staff. Each staff member was asked what actions they take if an offender alleges to have been sexual abused while confined at another facility. Each staff member stated they would immediately report the allegation to their supervisor and submit an Incident Report including the details of the allegation as reported to them. The Auditor asked facility supervisors what their actions would be after receiving such information. The Auditor was informed the agency investigator would immediately be notified. The investigator stated he would ensure the Warden is notified so proper notification could be made in a timely manner. The investigator stated he would conduct an investigation into the allegation.</p> <p>The Auditor conducted a formal interview with the facility's Warden. The Warden explained he notifies another facility once the MCDOCR receives an allegation that an offender alleges suffering sexual abuse at another facility. The Warden places a telephone call followed by an email to make notification. When asked when the notification would occur the Warden explained he has up to 72 hours to make the notification but would make the notification as soon as he receives it. The Auditor asked the Warden to explain what takes place when he receives notification from another facility that a former MCDOCR offender has alleged suffering sexual abuse at the MCDOCR The Warden stated he would ensure the investigator is notified so an investigation would be conducted.</p> <p>The Warden explained there has not been an instance where he has had to notify another facility and has received no notices from another facility since he has been assigned to the Montgomery County Correctional Facility. The Auditor discussed notification requirements of this standard with the Warden. The Warden is clear of the requirements.</p> <p>Conclusion: The Auditor reviewed the agency's policies, procedures, and conducted interviews with agency staff and determined the facility has appropriate procedures in place to comply with this standard. Although the facility's Warden has not been required to make a notification in the previous 12 months, he is clear on the notification requirements. The Auditor determined the facility meets the requirements of this standard.</p> |

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| 115.64 | Staff first responder duties |
| | <p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="240 304 735 331">MCDOCR Policy and Procedure PREA #3000-64</p> <p data-bbox="240 336 635 362">MCDOCR Coordinated Response Plan</p> <p data-bbox="240 367 456 394">Investigative Reports</p> <p data-bbox="240 398 659 425">Interviews with Security First Responders</p> <p data-bbox="240 430 707 456">Interviews with Non-Security First Responders</p> <p data-bbox="240 492 994 519">MCDOCR Policy and Procedure Implementation of the PREA #3000-64</p> <p data-bbox="240 524 1422 586">(a) First responders should immediately ensure the safety of the reporter by separating the alleged victim and abuser, secure the scene of the incident (if applicable) and immediately contact a supervisor.</p> <p data-bbox="240 591 1485 689">(b) A supervisor will conduct an immediate interview with the victim to determine whether the collection of physical evidence is indicated. If physical evidence is indicated, the supervisor should take all necessary steps to ensure the preservation of evidence (as outlined in department policy).</p> <p data-bbox="240 694 1490 757">(c) If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.</p> <p data-bbox="240 761 1495 860">(f) In the cases of rape or sexual offenses where evidence may be available, request the victim and ensure the perpetrator (if known) do not take any actions that could destroy physical evidence such as washing or showering in any manner, brushing teeth, urinating, defecating, smoking, drinking, eating and clothing and bed linens should be treated as evidence as well.</p> <p data-bbox="240 887 1498 1048">The Auditor conducted interviews with security and non-security staff first responders. All security first responders were asked to explain the actions they take when responding to a sexual abuse incident. First responders stated they would maintain separation of the victim and abuser and immediately notify the Supervisor. Security staff stated they would request the victim and ensure the abuser not shower, eat, use the restroom, brush their teeth, drink or take any actions that could destroy physical evidence.</p> <p data-bbox="240 1075 1422 1205">The Auditor asked each what action they take regarding the crime scene. Staff stated they ensure the crime scene is secured. The Auditor asked each if they knew who would be allowed in the crime scene to process the evidence. Staff understood the MCDOCR Investigator would process evidence from the crime scene.</p> <p data-bbox="240 1232 1495 1330">The Auditor reviewed the agency's training records. Training curriculum includes first responder duties of both security and non-security personnel. The Auditor observed all staff, contractors and volunteers have been trained to appropriately respond to incidents of sexual abuse.</p> <p data-bbox="240 1357 1495 1420">The Auditor conducted formal interviews with non-security first responders. Non-security first responders informed the Auditor they have received training by the agency to respond to incidents of sexual abuse.</p> <p data-bbox="240 1447 1495 1576">The Auditor asked each what action they would take if they discovered an offender had been sexually abused. Each informed the Auditor they would remain with the offender and immediately notify a security staff member. Each was asked if they would be required to write a report regarding their knowledge and actions in response to the information. Each stated they are required to document such.</p> <p data-bbox="240 1603 1461 1733">The Auditor asked how they ensure any evidence would be protected. Each non-security first responder stated they would ask the offender not to take any actions that would destroy physical evidence. The Auditor asked each what action would destroy evidence. The Auditor was informed brushing teeth, using the bathroom, bathing, eating and drinking could potentially destroy physical evidence.</p> <p data-bbox="240 1760 1495 1957">The Auditor conducted formal interviews with medical practitioners. The practitioners have been trained to treat an offender while preserving physical evidence. The Auditor was informed medical staff immediately treat any life-threatening injuries. If the victim has no life-threatening injuries medical personnel collect the offender's vital signs and speak to the victim until transported to the hospital for a forensic examination. The Auditor was informed any clothing or other evidence removed from the victim while treating a life-threatening injury would be provided to the Special Investigations Unit Investigator. The medical practitioner stated medical personnel attempt to preserve any evidence while treating the victim.</p> <p data-bbox="240 1984 1495 2150">The MCDOCR reported (7) allegations of sexual abuse were received within the previous 12 months. There were (7) instances that required a security staff member or non-security staff member follow the first responder duties as required by this standard. In the past 12 months, there were (0) number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence. Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, (0) number of times the first security staff member to</p> |

respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence; and (0) number of times the first security staff member to respond to the report requested that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. Of the allegations that an inmate was sexually abused made in the past 12 months, the (0) number of times a non-security staff member was the first responder; and of those allegations responded to first by a non-security staff member, the number of times that staff member requested that the alleged victim not take any actions that could destroy physical evidence were (0). There were (0) number of allegations responded to first by a non-security staff member.

Conclusion:

The Auditor determined the facility has trained its staff in their responsibilities as a first responder to an incident of sexual abuse. Staff interviewed by the Auditor appeared proficient in their duties. The Auditor reviewed agency policies, procedures, Coordinated Response Plan, Sexual Assault Response Checklist, investigative reports, interviewed staff and determined the facility meets the requirements of this standard.

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| 115.65 | Coordinated response |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 MCDOCR Coordinated Response Plan Sexual Assault Response Checklist Interviews with Staff Interviews with Offenders</p> <p>MCDOCR Policy and Procedure Implementation of the PREA #3000-64</p> <p>4. Reporting Incidents/ Allegations</p> <p>A. All incidents or allegations of sexual battery, sexual misconduct and sexual harassment that occurred in a facility, whether or not it is part of the Montgomery County Department of Correction and Rehabilitation, will be reported in accordance with established policies and procedures (refer to MCDOCR P&P 1300 -20 Division Incident Notification P&P's).</p> <p>B. Reporting to Other Confinement Facilities</p> <p>1. Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.</p> <p>2. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The agency shall document that it has provided such notification.</p> <p>3. The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with PREA standards.</p> <p>C. Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.</p> <p>D. In all instances of incidents involving alleged sexual crimes, sexual misconduct, or sexual harassment, the on-duty supervisor will ensure that an Incident Report (e.g. DCA-36) is processed and submitted to the facility Division Chief.</p> <p>E. The perpetrator suspected of committing a sexual battery will be managed in accordance with established policies and procedures pending a complete and thorough investigation and employment of the disciplinary process (if appropriate), inclusive of external criminal charges, if applicable. Perpetrators who have been found guilty of sexual crimes, or sexual harassment, through the course of either internal or external hearings will be processed in accordance with MCDOCR discipline policies, and possibly through judicial and/or administrative process.</p> <p>F. Any member or authorized personnel including, but not limited to medical staff, mental health staff, social service and social work practitioners, who has knowledge of or who has received information, written or verbal, regarding commission of sexual crimes/sexual harassment, or sexual misconduct or an offender's concern or fear that the offender will become the victim of impending sexual crimes/sexual harassment, or sexual misconduct, must immediately notify a supervisor who will then take immediate steps to evaluate the victim's concern/allegation. In cases where offenders are the victims, department staff will send a departmental PREA information sheet/brochure to community referral practitioners (outside counselors, therapists, etc.) and give inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies so that they are aware of PREA requirements and their role in alerting departmental staff. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. The supervisor notified will ensure proper medical treatment (if applicable) and the safety of the victim by means provided in department policies and procedures.</p> <p>G. Medical and mental health practitioners shall 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.</p> <p>H. Any correctional staff member who fails to report or take immediate action regarding such incidents, or who intentionally inflicts humiliation upon the victim or informant, or who trivializes a report of alleged sexual crimes, sexual harassment, or sexual misconduct, or fails to report any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation may be subject to procedures outlined in MCDOCR Standards of Conduct (P&P 3000-7) and Montgomery County policy. If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.</p> <p>I. Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in Department policy, to make treatment, investigation, and other security and management decisions including housing, bed, work, education, and program assignments.</p> <p>J. Offenders who have been a victim of a sexual crime, or who are aware of a sexual crime, sexual harassment, or sexual misconduct perpetrated by authorized personnel should immediately report the incident to the nearest correctional staff member or report the matter by any other means they feel comfortable with (e.g., letter to chaplain). All reasonable measures to secure the safety of the reporting offender will be implemented.</p> <p>K. Victims of a sexual crime should try to preserve as much physical evidence of the crime as possible. Prior to reporting a</p> |

sexual crime, there should be no showering, washing, etc., of the body and/or clothing or bed linen.

L. Staff will also ensure the preservation of any such evidence by securing the site of the crime (if possible) and the clothing or any other items of the victim and the perpetrator (if known), which may be pertinent to an investigation.

M. The Directors Office will be notified immediately by the Division Chief of any allegation of sexual crimes, sexual harassment, or sexual misconduct so that an investigation can be initiated.

N. If the offender does not make the allegation until he/she arrives at a medical department, medical staff will immediately notify a supervisor on duty. The supervisor receiving the allegation will notify the senior supervisor on duty, who in turn will notify the Division Chief and they will notify the Director.

O. Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.

P. If an offender makes a report of an alleged sexual crime where the incident occurred outside the department's control (within the community).

(1) These reports/allegations will be referred to local law enforcement authorities.

(2) The investigative elements of this Policy and Procedure will not apply to an incident occurring in the community, unless it is alleged that authorized personnel were involved in the incident.

Q. If an offender on home detention makes a report of sexual crimes, sexual misconduct or sexual harassment where the incident occurred while the offender was incarcerated within a MCDOCR facility, under control of the department, prior to the offender's release to home detention status. These reports/allegations will be referred to the Directors Office.

R. If the alleged sexual crime occurred more than forty-eight (48) hours prior to the reporting of the incident, the Directors Office will be notified before initiating the post-sexual battery guidelines as described in this procedure (see below).

Note: It is understood that even though the incident may have occurred more than forty-eight (48) hours before reporting, there may still be evidence that exists that will be helpful in the investigation and that can be collected.

S. Inmates/detainees/residents may not be disciplined for refusing to answer, or for not disclosing complete information in response to the following:

1. Whether the inmate/detainee/resident has a mental, physical, or developmental disability.

2. Whether the inmate/detainee/resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming.

3. Whether the inmate/detainee/resident has previously experienced sexual victimization.

4. The inmates/detainees/residents own perception of vulnerability.

T. Inmates and employees have the right to be free from retaliation for reporting sexual abuse and sexual harassment. Staff are to report any retaliation immediately to the Deputy Warden of Custody and Security.

U. The Department shall 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.

V. For at least 90 days following a report of sexual abuse, the Department shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and 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, and shall act promptly to remedy any such retaliation.

Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The Department shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. In the case of inmates, such monitoring shall also include periodic status checks. An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.

W. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to file reports relating to allegations of sexual abuse, and shall also be permitted to file such reports on behalf of inmates. Third-party allegations on behalf of an inmate can be initiated by contacting the Departments PREA investigator.

X. There is no specific requirement or law in the State of Maryland that makes it mandatory to report a sexual assault however all MCDOCR staff shall follow the guidelines outlined in this policy for reporting incidents/allegations.

Y. If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable person's statute, the Department shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

Z. All terminations for violations of Department sexual abuse or sexual harassment policies, or resignations by staff that would have been terminated if not for their resignation, shall be reported to the Montgomery County Police, unless the activity was clearly not criminal.

5. Guidelines for Staff Action Following Receipt of an Allegation of Sexual Crime

The following steps should be taken after receiving an allegation of a sexual crime:

(a) First responders should immediately ensure the safety of the reporter by separating the alleged victim and abuser, secure the scene of the incident (if applicable) and immediately contact a supervisor.

(b) A supervisor will conduct an immediate interview with the victim to determine whether the collection of physical evidence is indicated. If physical evidence is indicated, the supervisor should take all necessary steps to ensure the preservation of evidence (as outlined in department policy).

(c) If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim

not take any actions that could destroy physical evidence, and then notify security staff.

- (d) The supervisor shall contact the Montgomery County Police Department and request a unit to respond to the facility to conduct an investigation into alleged sexual crimes. Investigations into the crime of "Indecent Exposure to Correctional Employee" shall in most cases be handled by Persons with the Powers of Arrest.
 - (e) Any unethical act/behavior of sexual abuse or sexual misconduct committed by MCDOCR licensed professional staff or other authorized personnel, upon substantiated allegation, may result in reporting the matter to the professionals licensing agency.
 - (f) In the cases of rape or sexual offenses where evidence may be available, request the victim and ensure the perpetrator (if known) do not take any actions that could destroy physical evidence such as washing or showering in any manner, brushing teeth, urinating, defecating, smoking, drinking, eating and clothing and bed linens should be treated as evidence as well.
 - (g) No attempt will be made to clean or treat the victim unless the injuries are such that not treating them would cause deterioration of the victim's medical condition.
 - (h) The victim shall be transported and/or required to go to the emergency room as soon as possible. MCDOCR Medical staff does not conduct Sexual Assault Forensic Examinations. The examination shall be conducted without financial cost to the victim where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFE) or Sexual Assault Nurse Examiners (SANE) where possible. If SAFE or SANE are not available, the examination can be performed by other qualified practitioners or hospital staff. The Department shall document its efforts to provide SAFEs or SANES.
 - (i) Law Enforcement personnel accompanying an offender victim to the emergency room will ensure that a standard medical "sexual assault kit" is requested.
 - (j) As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.
 - (k) For offender victims, medical staff will ensure that all necessary written documents are completed (with the above actions completely and accurately listed, as they have occurred) and will maintain these documents in the offenders' medical records.
 - (l) Upon the offender's return to the facility, medical staff will make a mental health referral (DCA-100) for evaluation and counseling, at a minimum, for the next working day. Medical staff must ascertain what tests the offender received at the emergency room. Copies of those results will be obtained and placed in the offenders' medical records. The medical records of offender victims and suspected offender perpetrators (only if identified by the Directors Office as a suspect) will be reviewed and appropriate testing identified.
 - (m) For offender victims and perpetrators, medical staff will ensure provisions are made for testing for sexually transmitted diseases, unless already completed by emergency room personnel.
 - (n) Regardless of the results of the tests, preventative and protective education, including information about symptoms and transmission, will be provided to offender victims and alleged offender perpetrators, and treatment will also be offered, as appropriate.
 - (o) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.
 - (p) Reporting of offenders assessed by the medical department, for those sexual crimes reported, will be an integral part of post-sexual crimes treatment and referral. In order to ensure and maintain privacy of information, the Health Administrator shall be contacted to determine what information may be reported and to whom the information can be reported to.
 - (q) Since the Department does not offer therapy, counseling, and other interventions designed to address and correct underlying reasons or motivations for the abuse, the Department does not consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.
 - (r) The Department shall 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.
 - (s) Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.
 - (t) If pregnancy results from the conduct described in section (s) above, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.
6. Sexual Abuse Incident Reviews:
- A. The Department shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.
 - B. Such review shall ordinarily occur within 30 days of the conclusion of the investigation.
 - C. The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.
 - D. The review team shall:
 - (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
 - (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
 - (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area

may enable abuse;

(4) Assess the adequacy of staffing levels in that area during different shifts;

(5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and

(6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (D)(1)-(D)(5) of this section and any recommendations for improvement and submit such report to the Department head and PREA compliance manager.

E. The Department shall implement the recommendations for improvement, or shall document its reasons for not doing so.

All staff interviewed were able to articulate their first responder duties. All staff receive training regarding first responder duties. The Auditor conducted formal interviews with offenders. Offenders were asked if they feel safe in the facility. Most stated they do feel safe in the facility. Offenders were asked if they are confident in staff's abilities to respond to incidents of sexual abuse. Most offenders interviewed stated they are confident in staff's abilities. Offenders informed the Auditor staff are helpful to the population. The Auditor asked each offender if they had ever heard of or seen an incident of sexual abuse occurring at the facility, none had.

There were no offenders incarcerated at the time of the audit who filed an allegation of sexual abuse. The facility reported no allegations of sexual abuse were received in the past 12 months. Through interviews the Auditor determined staff understands they are required to immediately ensure the safety of each offender who alleges sexual abuse. There were no incidents that required staff implement first responder duties as required in the facility's Coordinated Response Plan.

Conclusion:

The Auditor determined the facility maintains an appropriate response plan that coordinates the actions of personnel following an incident of sexual abuse and trained its personnel to follow the plan. Based on a review of the agency's policies, procedures, Coordinated Response Plan, Sexual Assault Response Checklist, training records, and interviews with staff and offenders, the Auditor determined the MCDOCR meets the requirements of this standard.

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| 115.66 | Preservation of ability to protect inmates from contact with abusers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed Collective Bargaining Agreement Interviews with Staff</p> <p>The collective bargaining agreement is made and entered into this 1st day of July, 2020, between by Montgomery County, Maryland (hereinafter to as "Employer") and the Municipal & County Government Employees Organization/Unit Food and Commercial Workers Union local, 1994, (hereinafter referred to as the "Union") was reviewed by this auditor.</p> <p>There is nothing in the contract that would violate this standard. The contract very clearly states that the county retains all rights in supervising and directing the work force; to reprimand, suspend, discharge or otherwise discipline employees for cause. Montgomery County Correctional Facility Policy and Procedure "Prison Rape Elimination Act", specifically states that termination will be the discipline for sexual abuse of inmates. Documentation of a staff member being terminated for misconduct was provided to this auditor. Documentation of staff being separated from the alleged victim pending the outcome of the investigation was also provided.</p> <p>Conclusion: The Auditor determined the facility meets the requirements of this standard.</p> |

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| 115.67 | Agency protection against retaliation |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 Investigative Records Retaliation Monitoring Log Interview with Retaliation Monitor Interviews with Offenders</p> <p>MCDOCR Policy and Procedure PREA #3000-64 H. Any correctional staff member who fails to report or take immediate action regarding such incidents, or who trivializes a report of alleged sexual crimes, sexual harassment, or sexual misconduct, or fails to report a staff neglect or violation of responsibilities that may have contributed to an incident or retaliation may be subject to procedures outlined in MCDOCR Standards of Conduct (P&P 3000-7) and Montgomery County policy. If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.</p> <p>T. Inmates and employees have the right to be free from retaliation for reporting sexual abuse and sexual harassment. Staff are to report any retaliation immediately to the Deputy Warden of Custody and Security.</p> <p>V. For at least 90 days following a report of sexual abuse, the Department shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and 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, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The Department shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. In the case of inmates, such monitoring shall also include periodic status checks. An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.</p> <p>For cases involving inmate on inmate allegations and reports received by inmates, the monitoring is assigned to the Deputy Warden of Inmate Services and Case Manager Supervisor. Deputy Warden of Inmate Services: (A) Kendra Jochum Case Manager Supervisors Jennifer Zuckerman Karalynn Davis Shaunda Legg</p> <p>For cases involving staff on inmate allegations and reports received by staff, the monitoring is assigned to the Deputy Warden of Custody and Security or their designee. Deputy Warden Shelford Gilliam (MCCF) or Martin Westby (MCDG) Designees will in most cases be the rank of Captain assigned to specified unit.</p> <p>The facility reports that there were no reports or complaints of retaliation during this audit period. Appropriate measures would be taken to stop retaliation. These measures would include transfer of the inmate(s) retaliator; keep separate orders (inmate from inmate and inmate from staff) and transfers to other county jails. None of the inmates that made an allegation were still in the facility to be interviewed regarding this standard.</p> <p>Conclusion: The Auditor determined the agency has appropriate policies and practices in place to ensure staff and offenders are protected from retaliation. The Auditor reviewed the MCDOCR policies, procedures, retaliation monitoring log, investigative reports, conducted interviews with staff and offenders and determined the facility meets the requirements of this standard.</p> |

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| 115.68 | Post-allegation protective custody |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 Investigative Records Housing Records Interviews with Staff Interviews with Offenders Observations</p> <p>MCDOCR Policy and Procedure PREA #3000-64 VI. Protective Custody: A. Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separating from likely abusers. If the Department can not conduct such an assessment immediately, the Department may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.</p> <p>Montgomery County Correctional Facility Policy and Procedure "Prison Rape Elimination Act", states that involuntary protective custody will only be used as a last resort. The facility reports that there were no instances of involuntary protective custody being used during this audit period.</p> <p>During the past 12 months, there has been no offender who alleged to have suffered sexual abuse who were held in involuntary segregated housing for one to 24 hours awaiting completion of an assessment. During the past 12 months, there has been no offender who alleged to have suffered sexual abuse who was assigned to involuntary segregated housing for longer than 30 days while awaiting an alternative assessment. During the pre-audit, the auditor was provided with documentation showing a statement for the basis for facility's concern for the offender's safety, and the reason why alternative means of separation could not be arranged. If an involuntary segregated housing assignment is made, the facility affords each such offender a review every 30 days to determine whether there is a continuing need for separation from the general population. Staff interviews confirm the agency's policy prohibiting placing offenders at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas, unless an assessment has determined there are no available alternative means of separation from likely abusers. If an offender were to be held in involuntary segregated housing for this reason, they would be moved as soon as less restrictive housing became available.</p> <p>Conclusion: The agency's policy includes the elements of PREA standard 115.43 to ensure sexual abuse victims receive privileges, programming, education, and work opportunities if a victim is placed in segregated housing for protection. After a thorough review of the agency's policies and procedures, housing records, investigative records, making observations, interviewing staff and offenders, the Auditor determined the facility meets the requirements of this standard.</p> |

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| 115.71 | Criminal and administrative agency investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 Investigative Records Investigative Matrix Interviews with Investigators</p> <p>MCDOCR Policy and Procedure PREA #3000-64 Note: The department will immediately start an investigation whenever an alleged sexual crime, sexual harassment, sexual misconduct (or threats of the same) is reported.</p> <p>E. The perpetrator suspected of committing a sexual battery will be managed in accordance with established policies and procedures pending a complete and thorough investigation and employment of the disciplinary process (if appropriate), inclusive of external criminal charges, if applicable. Perpetrators who have been found guilty of sexual crimes, or sexual harassment, through the course of either internal or external hearings will be processed in accordance with MCDOCR discipline policies, and possibly through judicial and/or administrative process.</p> <p>H. Any correctional staff member who fails to report or take immediate action regarding such incidents, or who intentionally inflicts humiliation upon the victim or informant, or who trivializes a report of alleged sexual crimes, sexual harassment, or sexual misconduct, or fails to report any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation may be subject to procedures outlined in MCDOCR Standards of Conduct (P&P 3000-7) and Montgomery County policy. If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.</p> <p>L. Staff will also ensure the preservation of any such evidence by securing the site of the crime (if possible) and the clothing or any other items of the victim and the perpetrator (if known), which may be pertinent to an investigation.</p> <p>M. The Directors Office will be notified immediately by the Division Chief of any allegation of sexual crimes, sexual harassment, or sexual misconduct so that an investigation can be initiated.</p> <p>(d) The supervisor shall contact the Montgomery County Police Department and request a unit to respond to the facility to conduct an investigation into alleged sexual crimes. Investigations into the crime of "Indecent Exposure to Correctional Employee" shall in most cases be handled by persons with the Powers of Arrest.</p> <p>VII. Criminal and Administrative Agency Investigations</p> <p>A. When the Department conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.</p> <p>B. Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations.</p> <p>C. Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.</p> <p>D. When the quality of evidence appears to support criminal prosecution, the investigating Department shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.</p> <p>E. The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. The Department shall not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.</p> <p>F. Administrative investigations:</p> <ol style="list-style-type: none"> 1. Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and 2. Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. 3. The Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated <p>G. Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.</p> <p>H. Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.</p> <p>I. The agency shall retain all written reports referenced in paragraphs (F) and (G) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five (5) years.</p> <p>J. The departure of the alleged abuser or victim from the employment or control of the facility or Department shall not provide a basis for terminating an investigation.</p> <p>K. When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor</p> |

to remain informed about the progress of the investigation.

L. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation

7. Case Records

(a) All case records associated with reports of sexual crimes, sexual harassment, and sexual misconduct, including incident reports, investigative reports, perpetrator and victim information, case disposition, and copies of medical and counseling evaluation findings, recommendations for post-release treatment and/or counseling will be retained in the office of the MCDOCR Deputy Warden of Programs and Services, for a period of five (5) years after the date the investigation concluded.

Montgomery County Correctional Facility does not conduct criminal investigations of sexual abuse and/or sexual assault. Those are conducted by detectives from the Montgomery County District Attorney's Office. Montgomery County Correctional Facility Policy and Procedure "Prison Rape Elimination Act", complies with this standard relative to administrative investigations. Montgomery County Correctional Facility investigators completed specialized PREA investigations training and follow the protocols there in when conducting initial investigations related to allegations of sexual abuse and sexual harassment. Documentation of this training was provided to this auditor. A review of prior sexual harassment investigation reports confirmed the investigators' understanding of this policy and their training.

The Auditor conducted a formal interview with a facility investigator. The investigator discussed the procedures utilized when conducting sexual abuse investigations. The process starts by interviewing the alleged victim. During the investigation he interviews the alleged victim, perpetrator and all witnesses, including staff witnesses. The Auditor asked what information is reviewed concerning the victim and abuser. The Investigator stated he reviews criminal record, institutional history, grievances, discipline history, Incident Reports, Request Forms, video footage, telephone records, previous complaints and any other relevant information. The investigator was asked how he determines the credibility of a victim, abuser and witnesses. The Auditor was informed credibility is not based solely on a person's status and is based on a review of documents, information, video footage, phone records, and statements made during the interview and subsequent interviews.

The Auditor asked each Investigator and the PREA/ADA Analyst how long they maintain investigative records. The Auditor was informed the data is maintained for at least 5 years after the abuser has either been released or is no longer employed by the MCDOCR. Each Investigator was asked if they require the victim to submit to a polygraph examination or other truth telling device. The Auditor was informed they do not polygraph an alleged victim or use any other truth telling device.

Conclusion:

There was (1) number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012, or since the last PREA audit, whichever is later. The Auditor reviewed agency policy, procedures, training records, investigative records, investigative matrix, made observations, interviewed staff and offenders to determine the facility meets the requirements of this standard.

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| 115.72 | Evidentiary standard for administrative investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 Investigative Records Interviews with Investigators</p> <p>MCDOCR Policy and Procedure PREA #3000-64 F. Administrative investigations: 1. Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and 2. Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. 3. The Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated</p> <p>The Auditor conducted a formal interview with facility Sexual Abuse Investigators. Each Investigator informed the Auditor the agency's policy requires the use of preponderance as the standard of evidence to substantiate an allegation of sexual abuse or sexual harassment. The Auditor asked the investigators to explain the meaning of preponderance. Investigators explained a preponderance means there is more evidence to justify the investigator's determination.</p> <p>Conclusion: The Auditor was able to determine Investigators understand preponderance as the basis for determining investigative outcomes. The Auditor reviewed the agency's policies, procedures, investigative reports and interviewed facility Investigators and determined the facility meets the requirements of this standard.</p> |

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| 115.73 | Reporting to inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 Investigative Records Notification Forms Interviews with Staff Interview with Offenders</p> <p>MCDOCR Policy and Procedure PREA #3000-64 VIII. Reporting to Inmates A. Following an investigation into an inmate's allegation that he or she suffered sexual abuse in a Department facility, the Department shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. E. All such notifications or attempted notifications shall be documented.</p> <p>Following an investigation into an offender's allegation that they suffered sexual abuse or sexual harassment in a MCDOCR facility, the offender must be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.</p> <p>MCDOCR Policy 3000-64 requires that all inmates who make an allegation of sexual harassment or sexual abuse must be informed in writing at the conclusion of the investigation as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The inmate is provided a written decision of this decision by the facility Investigator.</p> <p>This policy requires that following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the facility informs the inmate (unless the agency has determined that the allegation is unfounded) whenever the employee is no longer assigned on his unit, no longer employed in the facility and if the employee was indicted or charged. There were no cases involving this type of conduct requiring this notification within the last 12 months. It also requires where the cases against another inmate results in and indictment and trial the victim is apprised of the outcome of both.</p> <p>There were (7) number of criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months. Of the alleged sexual abuse investigations that were completed in the past 12 months, there were (7) number of inmates who were notified, verbally or in writing, of the results of the investigation. There were (0) number of investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency in the past 12 months. Of the outside agency investigations of alleged sexual abuse that were completed in the past 12 months, there were (0) number of inmates alleging sexual abuse in the facility who were notified verbally or in writing of the results of the investigation. There is (1) pending case but no final report to complete notification of outcome.</p> <p>Conclusion: In the past 12 months, there were (20) number of notifications to inmates that were provided pursuant to this standard. Of those notifications made in the past 12 months, (20) were documented. Based upon the above this standard was deemed to be in full compliance.</p> |

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| 115.76 | Disciplinary sanctions for staff |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA (Staff Sexual Misconduct) #3000-64 Investigative Records Interviews with Staff</p> <p>MCDOCR Policy and Procedure PREA #3000-64 Staff Sexual Misconduct C. Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p>The Auditor conducted formal interviews with facility staff. The Auditor asked if staff were aware of the disciplinary sanctions for violating the agency's sexual abuse policies. Staff informed the Auditor they would be terminated for participating in an act of sexual abuse. Staff were also aware the MCDOCR reports criminal violations to law enforcement agencies. The agency's command staff has a zero-tolerance approach and disciplines staff for violating the agency's sexual abuse and sexual harassment policies. Command staff interviewed by the Auditor stated any employee who violates sexual abuse and sexual harassment policies are immediately removed from contact with offenders and disciplined for such policy violations. Disciplinary recommendations for violating sexual harassment policies are dependent upon the circumstances of the act. The Auditor was informed by command staff that an employee who commits an act of sexual abuse will be terminated.</p> <p>The Auditor conducted formal interviews with facility Investigators. Investigators informed the Auditor if the act was criminal in nature the investigator would contact the Montgomery County District Attorney's Office for a criminal investigation. Facility investigators immediately cease efforts once a determination is made that sufficient evidence appears to support criminal activity. Each Investigator coordinates with the Montgomery County District Attorney's Office and assists in their efforts when requested by the Montgomery County District Attorney's Detectives. The Auditor asked how the investigation is handled if the act was not criminal in nature. The Detective continues the investigation until a determination is made. The results of the investigation are shared with command staff so appropriate discipline against a staff member can be sanctioned if warranted.</p> <p>In the past 12 months, there were (0) number of staff from the facility who have violated agency sexual abuse or sexual harassment policies. In the past 12 months, there were (0) number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies. In the past 12 months, there were (0) number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse). In the past 12 months, there were (0) number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.</p> <p>Conclusion: During this audit period, MCDOCR did not report referrals to any Law Enforcement agencies or relevant licensing bodies and did not have any staff that was disciplined or terminated for violating the agency's sexual abuse or sexual harassment policy. The Auditor determined the agency has appropriate policies and practices in place to ensure staff are disciplined for violating the agency's sexual abuse and sexual harassment policies. The agency makes termination the presumptive discipline measure for engaging in acts of sexual violence. The agency reports violations of sexual abuse to the local law enforcement agency and relevant licensing bodies. The Auditor reviewed the agency's policies, procedures, investigative records, and conducted interviews with staff and determined the agency meets the requirements of this standard.</p> |

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| 115.77 | Corrective action for contractors and volunteers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA (Staff Sexual Misconduct) #3000-64 Training Records A Guide to Maintaining Appropriate Boundaries with Offenders Brochure Interviews with Contractors Interview with Volunteer Interviews with Staff</p> <p>MCDOCR Policy and Procedure PREA #3000-64 Staff Sexual Misconduct D. Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.</p> <p>The MCDOCR reported there were no incidents in which a volunteer or contractor engaged in or was alleged to have engaged in sexual abuse or sexual harassment in the previous 12 months. The Auditor conducted formal interviews with a volunteer and contract personnel. Each were asked what actions would be taken against them for violating sexual abuse or sexual harassment policies. The volunteer and contractors informed the Auditor they would be terminated from the facility. The Auditor asked if each is aware they would be reported to a law enforcement agency if found to have committed a criminal act of sexual abuse. Each is aware the facility reports criminal violations of sexual abuse policies to the appropriate law enforcement agency.</p> <p>Volunteers and contractors are made aware of the VADOC sexual abuse and sexual harassment policies during their initial training and prior to providing services in the facility. Each volunteer and contractor attend training and signs a form of receipt of such. The facility provides each volunteer and contractor "A Guide to Maintaining Appropriate Boundaries with Offenders Brochure" during their orientation. All volunteers and contractors are required to read the agency's policies and procedures related to sexual abuse and sexual harassment and sign a receipt after doing so. The Auditor verified through training records each volunteer and contractor in the facility had received training and reviewed the policies. The Auditor conducted a telephone interview with a volunteer. The Volunteer was aware the agency would report criminal acts of sexual abuse to law enforcement.</p> <p>In the past 12 months, there were (0) number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates.</p> <p>Conclusion: The MCDOCR maintains appropriate policies to ensure contractors and volunteers at the MCDOCR are removed from offender contact after committing an act of sexual abuse or sexual harassment of an offender. The Auditor reviewed the agency's policies, procedures, training records, training curriculum and conducted formal interviews with staff, volunteer and contractors to determine the facility meets the requirements of this standard.</p> |

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| 115.78 | Disciplinary sanctions for inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA (Staff Sexual Misconduct) #3000-64 Interview with Investigator Interviews with Medical Practitioners Interview with Mental Health Practitioner Interviews with Offenders</p> <p>MCDOCR Policy and Procedure PREA #3000-64</p> <p>D. The Department prohibits all sexual activity between inmates and will discipline inmates for such activity. The Department may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.</p> <p>L. Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.</p> <p>The Auditor conducted formal interviews with facility Investigators. Investigators informed the Auditor disciplinary charges are placed following a substantiated administrative allegation of sexual abuse and/or following a criminal finding of guilt. Disciplinary charges are not placed on an offender for filing an allegation unless the facility can prove the offender made the allegation in bad faith. Each Investigator was asked if charges are placed on offenders if an act is consensual. The Auditor was informed disciplinary charges are placed on offenders for participating in sexual activity. Investigators explained offenders who participate in a consensual sex act are not charged for a sexual abuse related offense.</p> <p>The Auditor conducted a formal interview with medical health practitioners. The Auditor asked what services are offered to offenders. Offenders are offered counseling, therapy and other intervention services. The Auditor asked if offenders are required to participate in any meetings or sessions. The Auditor was informed offenders are not forced to participate in any mental health service offered at the facility. Medical and mental health services are offered to all offenders. Offenders maintain the right to refuse services. The mental health practitioner informed the Auditor her department is involved following an act of sexual abuse, including a consideration of whether mental disabilities may have contributed to the incident.</p> <p>In the past 12 months, there were (0) number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility. In the past 12 months, there were (0) number of criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility.</p> <p>Conclusion: The Auditor discovered the agency maintains policies that align with PREA standard 115.78 Discipline Sanctions for Inmates. Facility personnel ensure the policy is applied when choosing whether to discipline an offender for reporting or participating in an act of sexual abuse. The Auditor reviewed the facility's policies, procedures, offender records, interviewed staff and offenders. The Auditor determined the facility meets the requirements of this standard</p> |

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| 115.81 | Medical and mental health screenings; history of sexual abuse |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <p>MCDOCR Policy and Procedure Mental Health Services #1200-17 Md. Report Requirement & Consent Form Interviews with Medical Practitioners Interview with Mental Health Practitioner Interviews with Staff Interviews with Offenders</p> <p>MCDOCR Policy and Procedure Mental Health Services #1200-17</p> <p>D. Assessment/ Screening and Monitoring of Inmates with a History of Sexually Assaultive Behavior:</p> <p>1. Assessment and Screening: The MCDC is mainly a Pre-Trial Facility with approximately ninety-percent (90%) of bookings consisting of non-convicted detainees. Inmates charged with any type of sexual offense are deemed innocent until proven guilty. Therefore, assessment, screening and monitoring of inmates with an alleged history or charge of sex offense may not be conducted since the facility would engage in civil rights and due process violations. Additionally, even when inmates are sentenced, they cannot be forced to undergo any type of forced mental health assessment.</p> <p>Furthermore, while there are yet no established laws that govern credentialing for sex offender assessment and treatment in the State of Maryland, mental health providers are expected to perform with utmost integrity and adherence to their professional code of ethics, and included among the list of practice guidelines, providers are expected to recognize professional limitations and boundaries. This means mental health providers are expected to adhere solely to a practice that falls within their level of competence and expertise so the best interest of the clients, victims, and the community-at-large are protected. In summary, mental health providers may not be forced to, or coerced or accept positions or roles where they would engage in the assessment, treatment, or counseling of sexual offenders.</p> <p>2. Monitoring High Risk Sex Offenders and compliance with Prison Rape Elimination Act (PREA) Compliance: The MCDOCR has a zero-tolerance policy for any behavior that suggests sexual harassment or sexual behaviors of any type. All department staff and inmates receive PREA training and information during initial hire and booking respectively, and staff receive mandatory training, at the minimum every 3 years, regarding Sexual Abuse, Assault and Harassment. This training includes prevention/ intervention, self-protection, reporting sexual abuse, assault, harassment, treatment and individual counseling if requested. Inmates, whether charged with a sex offense or not, are monitored continually by security staff to ensure that no inappropriate interpersonal relationships are established among any gender. As stated, inmates are encouraged and instructed on how to report any sexual harassment, intimidation, requests, coercion, quid-pro-quo propositions and/or any behavior suggestive of sexual harassment.</p> <p>3. Investigation of Sexual Offenses including Assault: No complaint or suspicion of sexual assault is ignored and these will immediately trigger an investigation that adheres to the Montgomery County Department of Correction and Rehabilitation Policy 3000-64 Implementation of the Prison Rape Elimination Act (PREA).</p> <p>E. Assessment and Monitoring of Victims of Sexual Offenses:</p> <p>1. Identification: Victims of sexual offenses are identified during screening at booking if this information is self-disclosed or obtained through other sources. Any victims identified during this initial screening or at any time throughout their incarceration, are immediately referred to mental health staff for assessment and crisis intervention. If these inmates request or agree to on-going specialized counseling, mental health staff will refer the inmate to the County's Victim's Assistance Program.</p> <p>2. Monitoring: As indicated previously, all inmates are continually monitored to ensure their safety and prevent sexual abuse of any kind which is not tolerated. However, if any inmate reports subjective distress or fears being victimized, he/she may be placed in protective custody after an assessment of their case or if requested by the inmate based on his/her perception of risk. Special Classification reviews are conducted weekly. Counseling will be provided, if requested by the inmate or deemed necessary by facility staff.</p> <p>In the past 12 months, (100%) of inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner. In the past 12 months, (100%) of inmates who have previously perpetrated sexual abuse, as indicated during the screening, who were offered a follow-up meeting with a mental health practitioner.</p> <p>During admission to a MCDOCR facility, and within 14 days, if the Classification Assessment indicates that the offender has</p> |

experienced prior sexual victimization (HRSV) or perpetrated sexual violence (HRSA), whether it occurred in an institutional setting or in the community, staff shall ensure the offender is offered a follow-up meeting with a medical and mental health practitioner. Policy states that any information related to sexual violence that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff as necessary to inform of treatment plans and security and management decisions including housing, bed, work, education and program assignments. MCDOCR medical and mental health practitioners are required to obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting. The auditor reviewed cases identified during the classification assessment as HRSV or HRSA. A mental health referral occurred within 14 days with housing and programming decisions determined based on the classification assessment.

Conclusion:

Based upon the documentation reviewed and processes conducted in accordance with agency policies, this standard is in compliance with the requirement of the PREA.

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| 115.82 | Access to emergency medical and mental health services |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 Investigative Records MOU with VASAP Interviews with Medical Practitioners Interview with Mental Health Practitioner Interviews with Staff Interviews with Offenders</p> <p>MCDOCR Policy and Procedure PREA #3000-64 (h) The victim shall be transported and/or required to go to the emergency room as soon as possible. MCDOCR Medical staff does not conduct Sexual Assault Forensic Examinations. The examination shall be conducted without financial cost to the victim where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFE) or Sexual Assault Nurse Examiners (SANE) where possible. If SAFE or SANE are not available, the examination can be performed by other qualified practitioners or hospital staff. The Department shall document its efforts to provide SAFEs or SANES. (o) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Both the Mental Health Practitioner and Medical Practitioner both stated that the nature and scope of the services provided are based according to their professional judgment. If it is required, the outside hospital typically starts the medication and it is then continued at the institution. All treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. If an offender victim requires medical attention, there is 24-hour medical department at the facility. If the incident is reported in a timeframe for the collection of evidence, the decision to send an inmate out for the forensic examination is based on professional opinion of the staff working in the medical department. According to policy "treatment services will be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident."</p> <p>Conclusion: The Auditor determined the facility provides offenders access to timely and unimpeded access to emergency medical services. Medical practitioners provide offender victims emergency contraception and sexually transmitted infections prophylaxis. The Auditor reviewed the agency's policies, procedures, MOU and interviewed staff, offenders and SANE. The Auditor determined the agency meets the requirements of this standard.</p> |

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| 115.83 | <p>Ongoing medical and mental health care for sexual abuse victims and abusers</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 Investigative Records Offender Records Interviews with Medical Practitioners Interview with SANE Interviews with Staff</p> <p>MCDOCR Policy and Procedure PREA #3000-64 (h) The Department shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. (i) The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. (s) Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnant tests. (m) For offender victims and perpetrators, medical staff will ensure provisions are made for testing for sexually transmitted diseases, unless already completed by emergency room personnel.</p> <p>Offender victims have the right to follow up and counseling services after they have been abused at the facility. These services are all provided to the offender victim regardless of whether the offender names their abuser or agrees to cooperate with the investigation. If an offender is sent out for a forensic medical examination, they will be required to come back to medical when they arrive at the facility. This gives the medical personnel time to review the documentation provided by the hospital and follow those recommendations. When questioned about whether the level of care offender victims receive at the facility is equal to or higher than the level provided in the community at large, the answer was better than what the offender can expect in the community. The mental health personnel at the facility are able to provide reasonable care to those that are lower functioning.</p> <p>Conclusion: The facility's medical and mental health practitioners offer counseling, treatment, sexually transmitted infection prophylaxis and make referrals for continued care when necessary. The services provided to offender victims are consistent with a community level of care. The Auditor reviewed policies, procedures, offender records, interviewed offenders, SANE and medical/mental health practitioners to determine the facility meets the requirements of this standard.</p> |
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| 115.86 | Sexual abuse incident reviews |
| | <p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="240 304 735 331">MCDOCR Policy and Procedure PREA #3000-64</p> <p data-bbox="240 336 461 362">Investigative Records</p> <p data-bbox="240 367 571 394">PREA Report of Incident Review</p> <p data-bbox="240 398 446 425">Interviews with Staff</p> <p data-bbox="240 461 754 488">MCDOCR Policy and Procedure PREA #3000-64</p> <p data-bbox="240 492 598 519">6. Sexual Abuse Incident Reviews:</p> <p data-bbox="240 524 1430 591">A. The Department shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.</p> <p data-bbox="240 595 1142 622">B. Such review shall ordinarily occur within 30 days of the conclusion of the investigation.</p> <p data-bbox="240 627 1430 694">C. The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.</p> <p data-bbox="240 698 512 725">D. The review team shall:</p> <p data-bbox="240 730 1489 797">(1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;</p> <p data-bbox="240 801 1465 891">(2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;</p> <p data-bbox="240 896 1489 963">(3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;</p> <p data-bbox="240 967 1013 994">(4) Assess the adequacy of staffing levels in that area during different shifts;</p> <p data-bbox="240 999 1420 1025">(5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and</p> <p data-bbox="240 1030 1477 1120">(6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (D)(1)-(D)(5) of this section, and any recommendations for improvement and submit such report to the Department head and PREA compliance manager.</p> <p data-bbox="240 1124 1469 1151">E. The Department shall implement the recommendations for improvement, or shall document its reasons for not doing so.</p> <p data-bbox="240 1187 1481 1384">Sexual abuse incident reviews are part of the investigation process. Once an investigation has been completed, an outcome is determined and the Montgomery County Police Department indicates it is also completed its investigation and has an outcome, if applicable, then an incident review of the process and system is scheduled. The department has developed a form to be utilized during this review process. It contains questions with all the appropriate pieces to determine if a case was handled appropriately. If there are any problems that are identified, this committee, typically consisting for the following, will identify the problem, and figure out how to make this form work for them.</p> <p data-bbox="240 1388 625 1415">Deputy Warden of Custody & Security</p> <p data-bbox="240 1420 801 1447">Deputy Warden of Inmate Services (PREA Coordinator)</p> <p data-bbox="240 1451 544 1478">Deputy Warden of Operations</p> <p data-bbox="240 1482 579 1509">Responsible Health Administrator</p> <p data-bbox="240 1514 384 1541">Mental Health</p> <p data-bbox="240 1545 426 1572">Classification Unit</p> <p data-bbox="240 1576 1035 1603">This review is required to be held within (30) days of the conclusion of the case.</p> <p data-bbox="240 1639 1458 1774">In the past 12 months, there were (7) number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents. In the past 12 months, there were (7) number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents.</p> <p data-bbox="240 1809 375 1836">Conclusion:</p> <p data-bbox="240 1841 1485 1998">The Auditor determined the facility understands the requirement to conduct an incident review within 30 days of the conclusion of each substantiated and unsubstantiated sexual abuse investigation. The Incident Review Team documents the performance of each incident review on a formatted form. The Auditor reviewed the MCDOCR policies, procedures, PREA Report of Incident Review, investigative records and conducted interviews with staff and determined the facility meets the requirements of this standard.</p> |

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| 115.87 | Data collection |
| | <p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="240 304 735 432"> MCDOCR Policy and Procedure PREA #3000-64 Agency Website Annual Reports Surveys of Sexual Violence </p> <p data-bbox="240 463 754 490">MCDOCR Policy and Procedure PREA #3000-64</p> <p data-bbox="240 495 1484 557">8. Data, where used herein, refers to the information collected from the appropriate division and processed by the Director's Office, regarding incidents or allegations of incidents of illegal sexual acts, sexual harassment, and sexual misconduct.</p> <p data-bbox="240 562 1461 624">(b) Each Division Chief is responsible for maintaining full data on investigations of sexual crimes, sexual harassment, and sexual misconduct that may occur in their respective facility.</p> <p data-bbox="240 629 339 656">IX. Data:</p> <p data-bbox="285 660 394 687">Collection:</p> <p data-bbox="240 696 1423 759">A. The Department shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instruments and set of definitions.</p> <p data-bbox="240 763 1144 790">B. The Department shall aggregate the incident-based sexual abuse data at least annually</p> <p data-bbox="240 795 1474 857">C. The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.</p> <p data-bbox="240 862 1489 925">D. The Department shall maintain, review, and collect data as needed from all available incident based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p data-bbox="240 929 1485 992">E. Upon request, the Department shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.</p> <p data-bbox="240 996 994 1023">F. The Department shall ensure that the collected data is securely retained.</p> <p data-bbox="240 1028 1457 1090">G. The Department shall make all aggregated sexual abuse data, from facilities under its direct control readily available to the public annually through the Department website.</p> <p data-bbox="240 1095 1254 1122">1. Prior to making the aggregated sexual abuse data public, all personal identifiers shall be removed.</p> <p data-bbox="240 1126 1353 1153">H. All sexual abuse data collected shall be maintained for at least 10 years after the date of the initial collection.</p> <p data-bbox="240 1158 1497 1292">The Auditor reviewed the agency's 2020 and 2021 Annual Reports published on the Montgomery County Correctional Facility website. Each report includes data aggregated from July1st through December 31st, 2020-Jan 1st -June 30th, 2021. The reports were easily accessible as the agency's website was simple to navigate. MCDOCR does not contract for the confinement of inmates. There has been no request for Department of Justice request for agency data.</p> <p data-bbox="240 1323 1485 1451">The Auditor interviewed the Agency Wide PREA Coordinator concerning the collection of sexual abuse data in agency facilities. All data is derived from investigative reports, Incident Reports, Incident Reviews, and all supporting documents in investigative records. Data is reported to the PREA Hotline Coordinator who is responsible for maintaining and compiling the annual data. All data derived from the MCDOCR is securely maintained in the Investigator's locked office.</p> <p data-bbox="240 1482 368 1509">Conclusion</p> <p data-bbox="240 1514 1453 1608">The Auditor observed evidence the facility is collecting and aggregating sexual abuse data annually. The reported data utilizes a standardized set of definitions. The Auditor reviewed the agency's policies, procedures, website, annual reports, Survey of Sexual Violence and interviewed staff and determined the facility meets the requirements of this standard.</p> |

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| 115.88 | Data review for corrective action |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 Agency Website Annual Reports Interview with Staff</p> <p>The agency's public website was reviewed by this auditor. The most recent, available annual PREA report is available via the website. The annual report addresses all elements of this standard. Montgomery County Correctional Facility Policy and Procedure, "Prison Rape Elimination Act", page 6 addresses the retention requirements of this standard. Based upon the above this standard was deemed to be in full compliance.</p> |

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| 115.89 | Data storage, publication, and destruction |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed MCDOCR Policy and Procedure PREA #3000-64 Interview with Staff Observations</p> <p>MCDOCR Policy and Procedure PREA #3000-64 F. The Department shall ensure that the collected data is securely retained. G. The Department shall make all aggregated sexual abuse data, from facilities under its direct control readily available to the public annually through the Department website. 1. Prior to making the aggregated sexual abuse data public, all personal identifiers shall be removed.</p> <p>The Auditor reviewed the agency's website. The website included annual sexual abuse data collection in an annual report. The Auditor observed data collected from 2015 through 2020. There were no personal identifiers included in any agency annual reports. The Auditor was informed sexual abuse and sexual harassment data is maintained by the PREA Hotline Coordinator for a minimum of 10 years after collection. A username and password are required to gain access to the computer used by the PREA Hotline Coordinator. All investigative data used to compile the data is maintained in the Investigator's and PCM's locked offices and on their computer that require a username and password. The Auditor observed the office of the Investigator and PCM.</p> <p>Conclusion: The Auditor reviewed the agency's website, annual reports, made observations and interviewed staff to determine the agency meets the requirements of this standard.</p> |

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| 115.401 | Frequency and scope of audits |
| | <p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <p data-bbox="240 304 521 331">Previous PREA audit report</p> <p data-bbox="240 336 368 362">Facility Tour</p> <p data-bbox="240 367 462 394">Interactions with Staff</p> <p data-bbox="240 430 1493 725">The facility conducted this audit during the third year of the current audit cycle. The Auditor was provided and reviewed the relevant policies, procedures, documents and other applicable reports to assist with rendering a decision on the facility's level of compliance with relevant standards. The Auditor reviewed a relevant sampling of documentation from the previous 12-month period. The facility allowed the Auditor to conduct formal interviews with offenders and staff. Agency personnel provided the Auditor with a detailed tour, allowing the Auditor access to all areas in the facility. During the audit the facility provided additional documents that were requested by the Auditor to aid in a determination of the facility's level of compliance. The Auditor observed camera placements and reviewed monitors to ensure offenders were not able to be viewed naked by a staff member of the opposite sex through the facility's video system. The offender population was allowed to correspond confidentially with the Auditor prior to the Auditor's arrival.</p> <p data-bbox="240 757 1489 846">The Auditor reviewed the agency's previous PREA audit report and observed the facility complied with all standards. The Auditor communicated with a victim advocate with the VASAP Crisis Center and the Sexual Assault Nurse Examiner with the local hospital to gain an understanding of services offered through the Memorandums of Understanding with the MCDOCR.</p> <p data-bbox="240 882 376 909">Conclusion:</p> <p data-bbox="240 913 1023 940">The Auditor concluded the MCDOCR meets the requirements of this standard.</p> |

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| 115.403 | Audit contents and findings |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed Previous PREA audit report Agency Website</p> <p>The Auditor reviewed the agency's website which includes a link for its previous PREA Audit reports. All prior agency final audit reports are posted on the agency's website. The MCDOCR was last audited in August 2018.</p> <p>Conclusion: The Auditor determined the agency meets the requirements of this standard.</p> |

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

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| 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 for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? | yes |
| 115.13 (b) | Supervision and monitoring | |
| | In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.) | yes |
| 115.13 (c) | Supervision and monitoring | |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? | yes |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? | yes |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? | yes |

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| 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).) | yes |
| 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).) | no |
| | 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).) | yes |
| 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).) | yes |
| | 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).) | yes |
| | 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).) | yes |
| 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 |

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

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| 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 |

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| 115.17 (f) | Hiring and promotion decisions | |
| | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? | yes |
| | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? | yes |
| | Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? | yes |
| 115.17 (g) | Hiring and promotion decisions | |
| | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? | yes |
| 115.17 (h) | Hiring and promotion decisions | |
| | Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) | yes |
| 115.18 (a) | Upgrades to facilities and technologies | |
| | If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.) | yes |
| 115.18 (b) | Upgrades to facilities and technologies | |
| | If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.) | yes |
| 115.21 (a) | Evidence protocol and forensic medical examinations | |
| | If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |
| 115.21 (b) | Evidence protocol and forensic medical examinations | |
| | Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |
| | Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |

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| 115.21 (c) | Evidence protocol and forensic medical examinations | |
| | Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate? | yes |
| | Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? | yes |
| | If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? | yes |
| | Has the agency documented its efforts to provide SAFEs or SANEs? | yes |
| 115.21 (d) | Evidence protocol and forensic medical examinations | |
| | Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? | yes |
| | If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.) | yes |
| | Has the agency documented its efforts to secure services from rape crisis centers? | yes |
| 115.21 (e) | Evidence protocol and forensic medical examinations | |
| | As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? | yes |
| | As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? | yes |
| 115.21 (f) | Evidence protocol and forensic medical examinations | |
| | If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) | yes |
| 115.21 (h) | Evidence protocol and forensic medical examinations | |
| | If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.) | na |
| 115.22 (a) | Policies to ensure referrals of allegations for investigations | |
| | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? | yes |
| | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? | yes |

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| 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 |

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| 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 |

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| 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 |

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| 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 |

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| 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 |

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| 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 |

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| 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 |

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| 115.43 (b) | Protective Custody | |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? | yes |
| | If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| 115.43 (c) | Protective Custody | |
| | Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? | yes |
| | Does such an assignment not ordinarily exceed a period of 30 days? | yes |
| 115.43 (d) | Protective Custody | |
| | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety? | yes |
| | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? | yes |
| 115.43 (e) | Protective Custody | |
| | In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? | yes |
| 115.51 (a) | Inmate reporting | |
| | Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? | yes |
| | Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? | yes |
| | Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? | yes |

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

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| 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 |

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

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| 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 |

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| 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 |

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| 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 |

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| 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 |

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| 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 |

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| 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 |

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| 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 |

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| 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 |

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| 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 |

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| 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.) | yes |

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