

PREA Facility Audit Report: Final

Name of Facility: Kane County Corrections Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 06/06/2025

Auditor Certification

The contents of this report are accurate to the best of my knowledge.



No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.



I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.



Auditor Full Name as Signed: Robert Manville

Date of Signature: 06/06/2025

AUDITOR INFORMATION

Auditor name: Manville, Robert

Email: robertmanville9@gmail.com

Start Date of On-Site Audit: 04/07/2025

End Date of On-Site Audit: 04/09/2025

FACILITY INFORMATION

Facility name: Kane County Corrections Facility

Facility physical address: 37W755 Route 38, St. Charles, Illinois - 60175

Facility mailing address:

Primary Contact

Name:	Luis Aguirre
Email Address:	AguirreLuis@co.kane.il.us
Telephone Number:	6307622727

Warden/Jail Administrator/Sheriff/Director

Name:	Commander Pete Osmani
Email Address:	OsmaniPerparim@KaneCountyIL.gov
Telephone Number:	6304441130

Facility PREA Compliance Manager

Name:	Scott McKanna
Email Address:	McKannaScott@KaneCountyIL.gov
Telephone Number:	6304441147

Facility Health Service Administrator On-site

Name:	Brandie Smith
Email Address:	BrandieSmith@Wellpath.us
Telephone Number:	6302082079

Facility Characteristics

Designed facility capacity:	640
Current population of facility:	421
Average daily population for the past 12 months:	418
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both women/girls and men/boys

In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	18-87
Facility security levels/inmate custody levels:	0,1,2,3
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	125
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	279
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	119

AGENCY INFORMATION	
Name of agency:	Kane County Sheriff's Office
Governing authority or parent agency (if applicable):	
Physical Address:	37 West 755 Route 38, St. Charles, Illinois - 60175
Mailing Address:	
Telephone number:	6307622727

Agency Chief Executive Officer Information:
--

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Luis Aguirre	Email Address:	AguirreLuis@KaneCountyIL.gov

Facility AUDIT FINDINGS	
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:	
3	<ul style="list-style-type: none"> • 115.31 - Employee training • 115.34 - Specialized training: Investigations • 115.42 - Use of screening information
Number of standards met:	
42	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-04-07
2. End date of the onsite portion of the audit:	2025-04-09

Outreach

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

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	640
15. Average daily population for the past 12 months:	415
16. Number of inmate/resident/detainee housing units:	10
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" 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

18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	315
19. 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:	4
20. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	1
21. 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:	2
22. 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:	2
23. 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:	2
24. 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

25. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
26. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	1
27. 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:	6
28. 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
29. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
30. 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:	125
31. 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:	119

32. 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:	279
33. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	16
35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<div> <input checked="" type="checkbox"/> Age </div> <div> <input checked="" type="checkbox"/> Race </div> <div> <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input checked="" type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input checked="" type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div>
36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	I interviewed detainees from each of the housing units.
37. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<div> <input checked="" type="radio"/> Yes </div> <div> <input type="radio"/> No </div>

38. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	12
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
40. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2
41. 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:	1
42. 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:	1

43. 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:	1
44. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	2
45. 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:	2
46. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
46. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>46. 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>In interviews with the classification Sgt., PREA coordinator, PREA compliance manager, Medical and Mental health staff it was noted there were no transgender at the jail at the present time. I reviewed the data base of all residents and noted there were no transgender in the data base. I asked several of the officers during the tour of the facility if they knew of any transgender inmates. I also asked several of the inmates that were interviewed if there were any transgender inmates.</p>
<p>47. 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>48. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>2</p>
<p>49. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>49. 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>

49. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	I reviewed the segregation housing population, interviewed the Lt. in charge of the segregation unit, discussed the use of segregation with the Classification Sgt. Reviewed the daily population of the facility and the PAQ.
50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
51. Enter the total number of RANDOM STAFF who were interviewed:	14
52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<div> <input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None </div>
53. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<div> <input checked="" type="radio"/> Yes <input type="radio"/> No </div>
54. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.

Specialized Staff, Volunteers, and Contractor Interviews

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

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

12

56. Were you able to interview the Agency Head?

☒ Yes

☐ No

57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?

☒ Yes

☐ No

58. Were you able to interview the PREA Coordinator?

☒ Yes

☐ No

59. Were you able to interview the PREA Compliance Manager?

☒ Yes

☐ No

☐ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input type="checkbox"/> Other
61. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
61. Enter the total number of VOLUNTEERS who were interviewed:	4
61. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
62. Enter the total number of CONTRACTORS who were interviewed:	8
62. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
63. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

☒ Yes

☐ No

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

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

69. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).

The Kane Conty Correctional Facility is a 640-jail located in St. Charles, Ill. After clearing the security system, visitors can go to the control room located in the administrative building and show proper credentials, receive a visitor pass. All visitors' passes are for escort only. The control room is manned by two staff. It controls the movement of all inmates and staff and monitors the security system, including the body scanners that all staff wear when in the secure area of the facility.

There are 10 housing units. There is also a 32 Segregation beds. The intake area is located on each side of the center and includes holding rooms, offices and eight officer station. During the intake the detainee undergoes the process. They received a PREA screening, signed for a handbook, signed a statement that they know their rights to be free from sexual abuse, ways to report sexual abuse, and are given a brochure about PREA and a Tablet which also includes PREA information. The tablet can also be used to make a report of sexual abuse or sexual harassment. While in the intake area, residents also watch the PREA video.

There is a day room area located in each unit. This area included telephones, bulletin boards, televisions, and kiosk

By each telephone, there is laminated reporting information for outside reporting and reporting to the victim advocate. The auditor called Mutual Ground and asked if he could make a report of sexual abuse or harassment. The person answering the telephone indicated I could, and she would advise the sheriff's office. She also indicated I could make an anonymous report. I then asked to speak to a person about emotional support and talked to a counselor with Mutual Grounds.

I then talked to the Chief Executive Officer of Mutual Grounds and asked if they would take reports and would they notify the jail and could the report be anonymous. She indicated that she thought I could. When I probed about

any Federal Funding and requirement of confidentiality, she indicated that they did receive indirect federal funds. At her request, I sent the FAQ about outside reporters for her to review. She called me back and indicated that Mutual Ground would not be able to continue as an outside reporting entity. The PREA coordinator advised that the jail would need to establish another outside reporting entity. He is attempting to secure these services at this time.

Toilets and washbasins are in each cell and each housing pod has a shower room with a partial concrete wall surrounding the shower room and partial swing doors in the entrance of the shower room.

When entering the housing units there is an office and a multipurpose room. There is a housing control station in the housing units where staff posted in this area monitor movement in and out of the individual pods. There are drop boxes located in each housing unit that include grievance, mail, and staff communication notes. The inmate population indicated during the tour that the facility provided grievance forms and staff request forms. Inmates also indicated they are allowed to have paper and pencils. A grievance was placed in the grievance box and was delivered the following morning to the auditor by the PREA -compliance manager.

The correctional staff interviewed during the tour are provided weekly briefings about PREA. Each was able to articulate their first responder duties. Three pulled their PREA card to respond to the question. When asked to just tell the auditor what they would do, all were able to respond without the aid of the PREA card.

The recreation yards have cameras, basketball hoops and covered tables. There is also a large gymnasium located on this compound. These recreational areas also include an activity center, exercise equipment, and an outside recreation area. Zero-tolerance posters are located throughout

the recreation area. The bathroom areas in each of the recreational areas include partitions to provide privacy.

The segregation unit includes segregation and disciplinary isolation. Inmates in these units receive daily visits from medical and mental health staff, outside recreation, access to their tablets and also provided access to a grievance forms.

The medical unit includes single cells, observation rooms and one dormitory style room. There are offices located in this area which allow private interviews to be conducted.

The classification area has a large board with differing-colored chips that is managed by the Classification Sgt. and additional custodial staff. The colored chip are utilized to identify security risk, misdemeanors or felony status, and at risk of sexual abuse or predator sexual abusers. .

Staff interviewed during the tour were aware of their responsibilities for PREA and knew how to report including reporting privately.

Detainees interviewed during the tour were aware a PREA and how to report sexual abuse or sexual harassment.

During the tour staff were engaged with detainees.

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.

70. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?

☒ Yes

☐ No

71. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

Document sampling was applied to staff, contractor, and inmate files. Personnel files included new hires and those promoted within the past year, those who had five year tenure at the facility. Files were reviewed to ensure background checks were conducted and or consideration of any sexual abuse or sexual harassment allegations were considered in hiring and or promoting staff. The auditor documented the information that was requested, and the facility uploaded the information in the OAS portal. Two contracting and one volunteer files were reviewed. Reviewed 10 staff training files including 10 direct care and 9 support staff including medical and investigator and contract staff. All training has been completed in the last 12 months: Interviews with random staff indicated they had received refresher training during the last quarter. Inmate Files Reviewed: 14 inmate records were reviewed. These records included the following information . • Identification Number • Date of Birth • Date of Arrival • Date of Screening • Date of Follow-up Screening • Date of Initial PREA notification • Date of PREA orientation/ education: referral to mental health and mental health intake documentation. All screening, rescreening, orientation and comprehensive education acknowledgements were located in the inmates' file. The auditor reviewed all allegation of sexual abuse found in the spread sheet. There was a total of four allegations of sexual abuse or sexual harassment that were determined to be PREA related. Each of the investigative files were reviewed.

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.

72. 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	2	2	2	2
Staff-on-inmate sexual abuse	0	0	0	0
Total	2	2	2	2

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	2	1	2	1
Staff-on-inmate sexual harassment	0	0	0	0
Total	2	1	2	1

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.

74. 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	2	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	2	0	0	0

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

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

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.

76. 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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

2

79. 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	
80. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	2
81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal 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)
82. 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	
83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	2
87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
88. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

91. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

1

92. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☒ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

93. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

94. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

The one unsubstantiated sexual abuse was referred for prosecution for simple battery.

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

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

☐ Yes

☒ No

Non-certified Support Staff

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

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

97. Who paid you to conduct this audit?

☐ The audited facility or its parent agency

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

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

☐ Other

Identify the name of the third-party auditing entity

Diversified Counseling Services

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>Kane County Correctional Facility (KCCF) Policy 605 Prison Rape Elimination Act (PREA)</p> <p>Kane County Sheriff's Office Organizational Chart</p> <p>Kane County Correctional Facility Organizational Chart</p> <p>Interviews Facility administrator</p> <p>PREA Coordinator</p> <p>PREA Compliance Manager</p> <p>PAQ</p> <p>1. The agency has a written policy mandating zero tolerance toward all forms of</p>

sexual abuse and sexual harassment in facilities it operates directly or under contract.

2. The facility has a policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment.

3. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment.

4. The policy includes sanctions for those found to have participated in prohibited behaviors.

5. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates

The facility provided the Policy 605 Prison Rape Elimination Act, Kane County Sheriff's Office Organizational

Policy 605 Prison Rape Elimination Act mandates zero tolerance towards all forms of sexual abuse and sexual harassment in all its facilities. It is the policy of KCCF that sexual conduct between employees, volunteers, or contractors and individuals in a KCCF facility, regardless of consensual status, is prohibited and subject to administrative and criminal disciplinary sanctions. This prohibition includes conversations or correspondence of a romantic and/or sexual nature. All employees, contractors, and volunteers are expected to have a clear understanding that KCCF strictly prohibits any type of sexual relationship with individuals in a KCCF facility. These relationships will not be tolerated and shall be considered a serious breach of KCCF policies. Engaging in a romantic and/or sexual relationship with individuals in a KCCF facility may result in employment termination, termination of the contract or volunteer status, and/or criminal charges. KCCF staff must take prudent measures to ensure the safety of employees, contractors, volunteers, and individuals in a KCCF facility. All employees, contractors and volunteers have an affirmative duty to immediately report all allegations or knowledge, suspicion or information of sexual abuse, sexual harassment, romantic, or sexual contact that takes place within any KCCF facility. All cases of alleged sexual conduct shall be thoroughly investigated. Retaliation against individuals for filing a complaint and/or cooperating with an investigation will not be tolerated. Upon taken against employees, contractors or volunteers, including possible criminal prosecution.

115.11 (a):

The PAQ requires the agency's zero tolerance against sexual abuse is clearly established and the policy outlines the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment allegations. The agency and institution policies outline a zero-tolerance policy for all forms of sexual abuse and sexual harassment.

KCCF Policies includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment and sanctions for those found to have participated in prohibited behaviors. Inmates are informed orally about the zero-tolerance policy and the PREA program during in-processing and additional admission and orientation presentations. The orientation is offered in English and in Spanish. Additional program information is

	<p>contained in the Inmate manual, and postings distributed throughout the facility (observed during the tour). All written documents are available in English and Spanish. Additional interpretive services are available for Inmates who do not speak or read English. Both institution staff and inmates are provided with a wealth of opportunities to become aware of PREA policies and procedures. All employees receive initial training and annual training, as well as updates throughout the year.</p> <p>115.11 (b):</p> <p>The PAQ requires the agency shall employ or designate an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities. The facility provided the Policy 605 Prison Rape Elimination Act, and Kane County Sheriff's office Organizational Chart,</p> <p>The agency's organizational chart depicts the position within the agency. The PREA Coordinator oversees the agency's efforts to comply with the PREA standards.</p> <p>The PREA coordinator interviewed indicated: I have enough time to complete the tasks associated with PREA. We have a PREA compliance manager and a Compliance manager that work as a team to implement and monitor PREA standards.</p> <p>115.11 (c):</p> <p>The PAQ requires where an agency operates more than one facility, each facility shall designate a PREA compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.</p> <p>The facility provided the KCCF Policy 605 and KCCF Organizational Chart,</p> <p>While the jail only operates one facility, the facility does have a PREA compliance manger.</p> <p>The facility's organizational chart illustrates the PREA Compliance Manager's position within the facility. At KCCF the PREA compliance manager is supervised by the jail administrator.</p> <p>The facility also provides support staff assisting the PREA compliance manager with his task in carrying out the PREA mandates.</p> <p>The PREA compliance manger interview indicated he has time to carry out their PREA responsibilities. This is their major role at the facility.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

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

	<p>Auditor Discussion</p> <p>Evidence relied upon in making the compliance determinations</p> <p>KCCF Policy 605 Prison Rape Elimination Act</p> <p>Five Contracts for housing detainees</p> <p>PAQ</p> <p>Interview with</p> <p>Contracting staff</p> <p>PREA coordinator</p> <p>115.12 (a) (b)</p> <p>The PAQ requires that 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 agency includes the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012. 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.</p> <p>The facility provided policy 605 and five (5) Contract with other jails. Policy 605 mandates that any contract for the confinement of Kane County Sheriff's Office detainees or inmates includes the requirement to adopt and comply with the PREA standards including obtaining incident-based and aggregated data, as required in 28 CFR 115.187. Any new contract or contract renewal shall provide for office contract monitoring to ensure that the contractor is complying with the PREA standards (28 CFR 115.12).</p> <p>The Contracting staff indicated that the facility has renewed all contracts during the last five years and have added the stipulation required in the PREA standards.</p> <p>The PREA coordinator interviewed indicated that we have a working relationship with our regional jails and have contracts with local jails. All contracts stipulate that the jail are required to be PREA certified.</p> <p>The auditor reviewed the auditor completed a internet search and found each of the jails had received a PREA audit in the last three years. The auditor himself had completed 3 of the audits.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.13	Supervision and monitoring
---------------	-----------------------------------

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>Daily unit logbooks</p> <p>Staff Rosters</p> <p>PREA Annual Facility Assessment 2024</p> <p>Interviews</p> <p>Facility Administrator</p> <p>PREA Coordinator</p> <p>Intermediate Staff</p> <p>115.13 (a)(b):</p> <p>The PAQ requires the agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration: (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors.</p> <p>Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of detainees: 537</p> <p>The annual average daily number of detainee that is utilized to develop a staffing plan was 640 detainees.</p> <p>The facility provided Policy 605, 2025 staffing plan and annual assessment</p> <p>Policy 605 requires the The PREA coordinator's responsibilities shall include d as reviewing the staffing plan a minimum of once per year. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration Generally accepted detention and correctional practices. - Judicial findings of inadequacy. - Findings of inadequacy from Federal investigative agencies. - Findings of inadequacy from internal or external oversight bodies. - All components of</p>

the facility's physical plant. - The composition of the detainee population. - The number and placement of supervisory staff. - Institution programs occurring on a particular shift. - Applicable State or local laws, regulations, or standards. - The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and - Other relevant factors. Developing a staffing plan to provide adequate levels of staffing and video monitoring, where applicable, in order to protect detainees from sexual abuse. The staffing plan was a detailed description of each of the above-mentioned criteria. It included a recommendation for additional staff for military leave, sick leave, and vacations. This is the first year that the jail has implemented PREA standards and there was no assessment for the preceding years to review. The present population at the facility was 257 inmates while the staffing plan utilized a population of 640 inmates.

115.13 (c):

The PAQ requires Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan.

The facility provided policy ECDF Policy 605 and annual assessment for the past year. KCCF Policy 605 requires that whenever necessary and no less than annually, the staffing plan is reviewed and documented during the Annual PREA Facility Assessment. The annual assessment is developed by the PREA coordinator and his team and submitted to the warden, and chief deputy sheriff for review and approval. The annual assessment for the last 12 months was thorough and provided an assessment of each components of the PAQ.

115.13 (d)

Each agency operating a facility shall implement 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. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit staff from alerting other staff members that these supervisory rounds are occurring, unless such an announcement is related to the legitimate operational functions of the facility.

The facility provided policy 605 and documentation of unannounced rounds According to facility policy and practice requiring department heads, facility executive staff and intermediate and higher-level custody supervisors conduct and document unannounced rounds on all shifts within their respective areas to identify and deter employee sexual abuse and sexual harassment. Policy also mandates that other staff are prohibited from telling other staff when supervisors are making unannounced rounds. The review of Institution Duty Officer (ADO) unannounced PREA rounds. The facility housing unit computerized logs confirmed that intermediate-level or higher-

	<p>level supervisors, including shift supervisors and department heads, conduct and document such visits throughout the institution, during the day, at night and on the weekends. Additionally, the intermediate staff were interviewed. Each shift supervisor visits areas of the facility during the days, evenings, and weekend. The Shift Supervisor documents the visits on logbooks located in respective areas including housing units. Staff members are prohibited from alerting other employees regarding unannounced rounds. Interviews with housing unit officers also confirmed that supervisory staff document these visits on the unit log. The auditor reviewed the computerized logbooks during the tour and found multiple signs in documentation on each shift. While touring the control room, the control room officers showed her PREA rounds documentation. The facility provided several pages of supervisor rounds.</p> <p>Two intermediate staff were interviewed. All interviewed indicated they make a round on each shift. Staff are not allowed to tell other staff that the supervisor is making rounds and the supervisor knows based on clicking radios that someone is alerting staff. Intermediate staff indicated they vary their times and how they enter the housing units to keep staff from knowing they are in the area. All admitted that it is mostly impossible not to alert staff due to the number of cameras throughout the facility. There has been no deviation from the contracted staffing plan. Staff assigned to a Post must remain until properly relieved. If there were a deviation staff would remain on post and volunteer layover staff or call-in staff would be used to cover the post.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required. Recommendations: The center needs to complete additional assessments during this first year of fully implementing PREA.</p> <p>While the computerized unannounced rounds were thorough, there was no mention of PREA related information such as testing the kiosk, telephone system, grievance forms or presents of all Posters. It is recommended that all of these be checked on a regular basis and added to the unannounced rounds.</p> <p>The other alternative is to conduct unannounced PREA rounds.</p>
--	--

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>Policy 605 PREA</p> <p>Statement of Fact</p> <p>Interviews:</p>

	<p>Facility Warden</p> <p>Intake Staff</p> <p>Kane County Correctional Facility does not house youthful detainees.</p> <p>Compliance was determined by policy and interviews with intake staff, facility warden and agency head designee.</p> <p>The facility administrator provided a statement that the facility is not allowed to house youthful offenders.</p> <p>The Agency head indicated they do not house youthful offenders.</p> <p>The intake staff indicated that if a juvenile were to be brought to the facility, they would be placed in a holding room and immediately be transported to the local juvenile detention center.</p> <p>A review of the database provided by the facility, there were no youthful offenders housed at the facility found on the database.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>KCCF Policy 514 Search</p> <p>Video Camera/Housing Unit</p> <p>Fixed Camera Digital Video Maintenance and Retention</p> <p>Training Curriculum</p> <p>KCCF Staff Training</p> <p>Shift Logs- Announced gender presence Housing Unit Logbooks</p> <p>PAQ</p> <p>Interviews</p> <p>Random Staff</p>

Inmates

PAQ

115.15 (a):

The PAQ requires facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.

The facility provided KCCF Policy 514 and PAQ

Policy provides that the facility has Body Scan machines located throughout the facility. Policy and procedure dictate that staff will utilize the Body Scan machine unless the machine is not operational.

Strip searches will be performed by staff of the same gender identity as detainee in other than emergent situations. Strip searches will not be conducted in "public" places, showers, gyms, dayrooms or in sight of staff or detainees not involved in the search, or in any area subject to video surveillance in other than emergent situations

Statement of fact indicated during this audit period, KCCF has not had any cross gender strip searches, cross-gender visual body cavity searches or cross-gender pat down searches. KCCF has not had medical practitioners perform cross-gender strip searches or cross-gender visual body cavity searches.

During this audit period, KCCF has not conducted any cross-gender pat-down searches of female inmates. There has been no search or physical examining of transgender inmates for the sole purpose of determining the inmates' genital status.

Resident Interview indicated that no female detainee has been searched by male staff. No female resident has been denied services due to lack of female staff to conduct the search. All detainees indicated they are able to change clothes, take shower and use the toilet without being viewed by staff. They all indicated there were partitions and curtains around the showers and toilets and the facility did not have any group showers.

Staff interviewed indicated all staff announce their presence when entering the opposite gender housing units. All staff indicated they had received training on cross gender and transgender searches however all staff said they had not conducted a cross-gender search. All staff said that detainees are able to change their clothes, use the toilet and take showers without being viewed by any staff.

Twenty-two of the twenty-eight inmates interviewed indicated that staff announce their presence when entering their living unit.

KCCF Policy 605 mandates that an instrument or manual body cavity search can be conducted only when there is reason to do so and when authorized by the Facility Administrator or designee.

The search will only be conducted by off-site medical professional in a clinical setting

(hospital, infirmary, etc.), and in private.

All security staff receive training on how to conduct cross-gender pat searches and searches of transgender and intersex detainees in a professional and respectful manner. The lesson plan of this training was provided for review. Staff sign a PREA Basic Acknowledgement form acknowledging receipt and understanding of the training received.

Review of random staff training records and in interview with security staff, revealed staff are receiving this training at pre-service and annually. Interviews with staff confirmed that they were aware of the prohibition of visual body cavity or strip searches of the detainees of the opposite sex except in exigent circumstances.

115.15 (b):

PAQ indicates the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Facilities shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.

The facility houses male and female detainees. Resident Interview indicated that no female detainee has been searched by male staff. No female resident has been denied services due to lack of female staff to conduct the search. Staff interviewed indicated they had received training on cross gender and transgender searches. All staff indicated they had not conducted a cross gender search.

115.15 (c):

PAQ indicates the facility shall document all cross-gender strip searches and cross-gender visual body cavity searches and shall document all cross-gender pat-down searches of female inmates.

The facility provided Policy 605 and statement of fact

All staff are required to document all cross-gender strip searches and cross-gender visual body cavity searches. The facility also maintains a log of all strip searches. This log indicates date, time, purpose and detainee's gender and gender of persons conducting the strip searches.

The facility provided a statement of fact that there was no cross gender or transgender searches during the last 12 months.

115.15 (d)

PAQ indicates the facility has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera).

The facility provided Policy 605 and signage located through out the facility.

KCCF Policy 605 Prison Rape Elimination Act enables detainees 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.

The living areas showers have curtains that provide for detainee privacy while showering. Toilet areas have partitions with doors to allow detainees to use the restroom without being viewed by staff. The medical area has a wraparound curtain for privacy during examinations. All toilets in the living units have partitions and a wall in front of the toilet to provide privacy. All other areas that were reviewed during the tour had partitioned or single toilets with a door to provide privacy. All residents stated they can shower, use the toilet, and change clothes without being seen by staff members.

The facility has implemented a policy that all opposite gender staff working the units will announce themselves prior to walking the range to allow detainees the opportunity to prepare themselves from a privacy perspective. Detainees interviewed acknowledged they were allowed to shower, dress, and use the toilet without being viewed by staff of the opposite gender.

Postings are located throughout the living units that female staff are assigned to work in housing units.

During the tour of the facility and in reviewing the facility's camera system, the auditor did not find any areas in which detainees would be viewed by staff while taking showers, using toilet or dressing.

115.15 (e):

PAQ requires the facility has a policy prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.

KCCF Policy 514 address searches of transgender and intersex detainees. In the case of searches of transgender inmates, for purposes of conducting such searches, gender will be determined exclusively by genitalia. Secondary characteristics, specifically the presence of breasts, will not be used to determine gender. Transgender inmates will be searched by the staff with the same genitalia. Pat searches and strip searches of transgender inmates will be conducted in the same manner as a search of a non-transgender inmate and must be conducted with dignity and professionalism.

(a) Under no circumstances should two staff members of the opposite gender perform searches of transgender inmates (i.e., male staff search lower body with male genitalia and female staff search upper body if the inmate has breasts).

(b) Transgender searches are to be done in a respectful manner, and in the least intrusive manner possible, consistent with facility security needs.

(c) If an inmate represents themselves as one gender, but a staff member

discovers during the search that the inmate is of the opposite gender, the search will immediately stop, and the area supervisor will be notified. A staff member with the same genitalia as the inmate will complete the search.

(d) A report will be generated when a transgender inmate is identified through self-identification, or as a result of a search. The Medical staff and the Classification staff will also be notified.

(e) Questions related to an inmate's gender will only be asked to protect the inmate's confidentiality and human dignity, and to avoid subjecting the inmate to abuse, humiliation, ridicule, and assault.

Searches shall not be performed for the sole purpose of determining genital status. If genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records or, if necessary, by obtaining that information as part of a broader medical examination conducted in private by a qualified health care professional.

Staff interviews: All staff have received training in conducting cross gender and transgender pat searches in the last 12 months. All were aware they agency prohibits the search of a transgender or intersex detainee to determine their sexual gender.

115.15 (f):

The PAQ indicates 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. All staff at KCCF receive training on how to conduct cross-gender pat searches and searches of transgender and intersex detainees in a professional and respectful manner. Staff receive Limits to Cross Gender Viewing & Searches training during basic PREA training.

Review of random staff training records and interviews with security staff, revealed staff are receiving this training at pre-service and annually. Interviews with staff confirmed that they were aware of the prohibition of visual body cavity or strip searches of the detainees of a different sex except in exigent circumstances.

Site Review:

During the review all staff announce their presence when entering the housing units. There were shower curtains and partitions in all bathroom areas. A review of the camera did not reveal any camera that provided a view of detainees in showers or toilets.

General interviews with staff indicated they are mindful of shower times and avoid being in that area if at all possible. Male staff indicated they don't go in the female housing units during showers unless there were a pressing security need such as a group fight.

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>KCCF Policy 605 Prison Rape Elimination Act</p> <p>PREA Posters English and Spanish,</p> <p>PREA Video Script</p> <p>Detainee Handbook</p> <p>Detainee PREA Brochure</p> <p>TTY Tablet</p> <p>Contract with Language Solutions</p> <p>PAQ</p> <p>Interviews LEP</p> <p>Low Vision</p> <p>Hard of Hearing</p> <p>Random Staff</p> <p>Intake staff</p> <p>115.16 (a):</p> <p>PAQ requires that the agency has established procedures to provide disabled detainees 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.</p> <p>The facility provided policy 605 Prison Rape Elimination Act, PREA Posters, PREA Video Script, Detainee Handbook, PREA Brochure, TTY Tablet, and Contract with Language Solutions.</p> <p>KCCF Policy 605 mandates that the facility shall not discriminate against detainee with known disabilities and shall provide reasonable accommodations to ensure access to programs, activities, and services in accordance with the Americans with Disabilities Act and the provisions established in this policy. The facility has several bilingual staff at the facility. The facility is an extension of the Kane County Sheriff's office that has paid interpreter that are available to interview, provide training, and</p>

assist in filing allegations of sexual abuse or sexual harassment.

Through policy and practice, the facility staff ensures that detainees with all disabilities listed in 115.16a have an equal opportunity to participate in and benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment. The facility has TTY machines for hard of hearing detainees.

The auditor utilized the language line to conduct one LEP inmate interview and the County paid interpreter to interview a Spanish speaking inmate. The hard of hearing detainee was aware of the TTY machine, however, he indicated he always used his hearing aids.

115.16 (b)(c):

The PAQ requires that the agency has established procedures to provide inmates with limited English proficiency 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.

The facility provided Policy 605

Policy mandates the agency 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 § 115.64, or the investigation of the inmate's allegations.

The targeted detainees interviewed stated they were instructed about PREA compliance and felt safe from sexual abuse. All PREA related information (written information), including postings, Brochures and handouts are available in English, and Spanish. The facility has access to translation services and written access in other languages. Staff also may read information to detainees when necessary. Agency and facility policies prohibit detainees from being relied on as readers or any types of assistants, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety. The facility maintains a list of staff that are bilingual. During the onsite audit there was one hard of hearing, one low vision and one cognitive disabled detainee. The hard of hearing detainee utilizes hearing aids which enable him to hear. The low vision detainee indicated he can read the posting on the wall and can use the telephone with high-volume control. The cognitive (artistic) detainees indicated that mental health staff helped him understand PREA and count on the mental health staff for any problems he would have.

Fourteen random staff were interviewed. All staff interviewed indicated they would not use detainees to make any allegations or provide any training to other detainees. Eight of the staff interviewed indicated they would utilize other staff. Five of the staff interviewed would use the language line and three new the county had two interpreters that he facility utilized.

	<p>Site Review</p> <p>All posters were found to be in English and Spanish</p> <p>TTY phones are centralized in intake for facility use as needed.</p> <p>The agency head indicated that in all of KCCF has developed PREA education materials in various formats to ensure that those individuals with disabilities and those who are limited English proficient can equally benefit from the PREA program. We have developed posters, pamphlets, videos, large print materials, etc. as well as providing TTY phones, access to language lines and designated staff interpreters to ensure we can effectively communicate the PREA procedures and available services to the individuals we house.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Evidence relied upon in making the compliance determinations KCCF Policy 304 Background checks</p> <p>KCCF Policy 108.4 Background Investigations</p> <p>KCCF Policy 605</p> <p>KCCF on-line application form</p> <p>PREA promotional disclosure waiver</p> <p>Promotion Letter PREA</p> <p>Promotion Disclosure Waiver</p> <p>Personnel Records</p> <p>Interview with</p> <p>Background Investigative Lt.</p> <p>Human Resources Director</p> <p>Agency Head</p>

PREA Coordinator

115.17 (a)(b):

The PAQ requires agency policy prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who: (1) 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); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

Agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

108.2.1 DISQUALIFICATION

The Kane County Sheriff's Office shall not promote, assign or transfer any member to a position that may allow contact with inmates if the member has (28 CFR 115.17):

(a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution as defined in 42 USC § 1997.

(b) Been convicted of engaging or attempting to engage in sexual activity that was facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent or was unable to consent or refuse.

(c) Been civilly or administratively adjudicated to have engaged in the activity described in paragraph (b) of this section.

The Office shall either conduct criminal background records checks at least every five years on members or contractors who may have contact with inmates or have in place a system for otherwise capturing such information.

Employees who may have contact with inmates shall disclose any conduct described above in written applications or interviews for promotion or specialized assignment.

KCCF Policy 108 Mandate the following:

a. KCCF is prohibited from hiring or promoting anyone (who may have contact with prisoners) who has engaged in, been convicted of, or been civilly or administratively adjudicated for engaging in sexual abuse in confinement settings or the community.

b. KCCF shall consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with prisoners.

KCCF shall conduct criminal background checks and do its best to contact prior

institutional employers to obtain information on substantiated allegations of sexual abuse, harassment or any resignation pending investigation of an allegation of sexual abuse or harassment, prior to hiring new employees. Background checks shall be repeated for all employees at least every five years.

d. KCCF shall ask all applicants and employees who may have contact with prisoners directly about previous sexual misconduct as part of its hiring and promotional processes and during annual performance reviews for current employees. KCCF shall also impose upon employees a continuing affirmative duty to disclose any such conduct.

e. Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

f. Unless prohibited by law, KCCF shall 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.

115.17 (c):

PAQ requires agency policy requires that before it hires any new employees who may have contact with inmates, it conducts criminal background record checks, and consistent with federal, state, and local law, makes 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.

The agency requires that all applicants and employees who may have contact with detainees have a criminal background check. Criminal background checks for all potential employees are completed through the Kane County Sheriff's office. For those considered for promotions or who transfer from another facility, an internal KCCF PREA verification and a background check through the Kane Sheriff's office. If an applicant answers on their application, they are a prior institutional employee, information from prior institutional employers shall be requested. According to the PAQ in the past 12 months, there were 20 background checks completed.

Background checks include a review of applicant internet, family interviews, NCIC, interviews with friends and review of all sexual abuse or child registry. This information is gathered by the Background Investigative Lt. The Lt. prepares a summary of all information gathered, copy of NCIC and recommendation for hiring.

115.17 (d):

PAQ requires agency policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates.

The facility performs criminal background checks through the Kane County Sheriff's office before enlisting the services of any contractor or volunteer. In the information provided on the Pre-Audit Questionnaire, in the past 12 months there was no

background check for a contractor.

115.17 (e):

PAQ requires agency policy requires that either criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with inmates, or that a system is in place for otherwise capturing such information for current employees.

Agency policy requires that criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with detainees.

In an interview with the human resource director, the facility maintains a spread sheet on all staff hiring dates and completes a background check prior to the staff five-year tenure. This was verified by reviewing staff with five-year tenure personnel files.

115.17 (f):

PAQ requires Agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

KCCF Policy 108 indicates KCCF shall ask all applicants and employees who may have contact with prisoners directly about previous sexual misconduct as part of its hiring and promotional processes and during annual performance reviews for current employees. KCCF shall also impose upon employees a continuing affirmative duty to disclose any such conduct.

Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

115.17 (g):

PAQ requires Agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

KCCF Policy 605 mandates that Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

Employees and contractors interviewed were aware of their duty to disclose such misconduct referenced in this standard.

Interview with Human Resources: All people applying for employment with Kane County Sheriff's office must submit an application through the KCCF Sheriff's office. The application asks the question as noted in the questionnaire.

115.17 (h):

	<p>The PAQ Requires that unless prohibited by law, the agency shall 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.</p> <p>KCCF Policy 605 indicates unless prohibited by law, KCCF will 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 the individual has applied for work.</p> <p>The human resource staff indicated in interview that if a person applies to work at another facility, we complete a form for the applicant or agency to send to my office or cooperate office. The cooperate office maintains our investigative database and they will respond to the request. I am pretty sure the person making the application must sign a statement to release this information.</p> <p>Based on this analysis, the facility was not substantially compliant with this provision and corrective action was required.</p> <p>While the agency policy requires yearly appraisal and promotion consider the following:</p> <ul style="list-style-type: none"> (a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution as defined in 42 USC § 1997. (b) Been convicted of engaging or attempting to engage in sexual activity that was facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent or was unable to consent or refuse. (c) Been civilly or administratively adjudicated to have engaged in the activity described in paragraph (b) of this section. <p>The interview with the Human Resources and review of random personal files it was noted that the center had not asked about A – C in yearly appraisal or promotions.</p> <p>A corrective action plan was implemented by the facility during the onsite audit. The staff responsible for background checks and personnel staff revised the promotion board application and sent out a memo to all supervisors to conduct the annual appraisal of A-C.</p> <p>It was recommended that the facility review the questionnaire as the questions are asked in different parts of the personnel file. It was recommended that the questionnaire be on one form for ease of capturing the information and conducting quality assurance that the questions are asked.</p> <p>Based on the implementation of the corrective action plan, the facility is substantially compliant with this provision and further corrective action is not required.</p>
--	--

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations</p> <p>Facility Camera System</p> <p>Statement of Fact</p> <p>There have been no additional modifications or expansions to KCCF during the last audit period. The facility has not made any upgrades to the camera system. The facility had a major upgrade in 2020 utilizing advanced enhanced cameras and monitoring programs. Compliance was determined by review of facility camera coverage and interviews with agency head designee, and facility director. The new high-definition cameras provided the ability to zoom in and out, scan the areas, and are truly high definition.</p> <p>In interview with the agency head designee he stated that the agency uses technology to assist the facilities in keeping detainees safe from sexual abuse. If new facilities are designed or there are modifications to existing facility, the agency's PREA Coordinator works closely with the warden.</p> <p>The facility administrator indicated that the facility has begun conducting yearly assessment of staffing and camera coverage.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations.</p> <p>MOU with Mutual Grounds</p> <p>KCCF Policy 605.07 PREA Investigations</p> <p>Statement of Fact</p> <p>Interviews:</p> <p>PREA compliance manager</p>

Facility investigator

Mutual Grounds

PAQ

115.21 (a):

The PAQ requires

The agency/facility is responsible for conducting administrative sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct).

The facility provided Policy 605.7 ensures that all allegations of sexual abuse or sexual harassment are referred for investigation to a law enforcement agency with legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The facility shall document all referrals.

KCCF shall ensure that:

- Allegations of sexually abusive behavior receive prompt intervention upon report; and,
- Perpetrators of sexually abusive behavior are disciplined and, when appropriate, referred for prosecution in accordance with KCCF policy and federal, state or local laws.

Kane County Sheriff's Office Major Crime division is responsible for conducting criminal sexual abuse investigations and sexual harassment allegations that have the possibility of being criminal in nature. KCCF trained investigators will conduct administrative investigations.

115.21 (b):

To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

Policy 605.7 indicates that evidence collection shall be based on a uniform evidence protocol that is developmentally appropriate for youth, if applicable, and adapted from or otherwise based on the most recent edition of the DOJ'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 (28 CFR 115.21). LCCF does not house youthful offenders.

115.21 (c):

The PAQ requires The agency shall 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. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs.

The facility provided policy 605.10 which mandates that forensic medical examinations shall be performed as evidentiarily or medically appropriate, without financial cost to the victim. Where possible, these examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANE)s. If neither SAFEs nor SANEs are available, other qualified medical practitioners can perform the examination. The Office shall document its efforts to provide SAFEs or SANEs.

According to the PAQ, in the last 12 months no SANE exams were performed.

115.21 (d):

The PAQ requires

The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency makes available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42

U.S.C.14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.

KCCF has a MOU with Mutual Grounds victim advocate services. Detainees are made aware of the victim Advocacy support services available to them and how to access them in the Detainee Handbook and on PREA posters displayed throughout the facility in English and Spanish.

Mutual Grounds staff interviewed indicated that the center does have trained victim advocates and a working relationship with the medical center to provide victim advocates. All staff that provide victim advocacy services undergo forty hours of training.

115.21 (e):

The PAQ requires 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,

	<p>information, and referrals.</p> <p>The terms of the MOU require an advocate to accompany and support the victim through the forensic medical exam process and the investigatory process and provide additional emotional support services. The SANE staff indicated they include a victim advocate to meet with the victim prior to the examination.</p> <p>During the interview the program staff indicated that the center provides the service for all inmates and work with local law enforcement and the facility to provide victim advocates during the investigative process for victims of sexual abuse.15.21 (f):</p> <p>The PAQ requires to the extent that the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section.</p> <p>Kane County Sheriff's office's major crime division conducts all criminal investigations at the facility. In interview with the chief deputy sheriff, the major crime division staff have received extensive training and follow the national standard for investigation including the collection of evidence. The facility trained investigative staff conduct all sexual harassment or non-criminal administrative investigations. Incident that includes allegations of sexual harassment or non-criminal sexual abuse is also referred to KCCF Office of Professional Responsibility.</p> <p>115.21 (h)</p> <p>The PAQ requires that a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general.</p> <p>Staff at Northwest Illinois Medical Center and staff from the Mutual Grounds that SANE staff are trained on conducting forensic examination. The Mutual indicated that their staff train with the SANE staff in order to establish a cohesive team in working with victims of sexual abuse, assaults or incest.</p> <p>Compliance was based on interviews with the SANE, Victim Advocate, Investigator (PCM) and facility administrator.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

KCCF 605 Prison Rape Elimination Act

Investigative Procedures

KCCF Website Monthly PREA tracking report.

Interviews with

Agency head

Facility investigator

115.22 (a):

PAQ requires the agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

KCCF Policy 605 establishes responsibility for investigations. An administrative investigation, criminal investigation or both shall be completed for all allegations of sexual abuse and sexual harassment (28

Administrative investigations shall include an effort to determine whether the staffs actions or inaction contributed to the abuse. All administrative and/or criminal investigations 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. Only investigators who have completed office-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases

A review of documentation and investigator staff interviews confirmed compliance with this standard. A review of training documents confirmed that all investigators received instruction in conducting sexual assault investigations in confined spaces/prisons. Interviews with staff, as well as an examination of policy/ supporting documentation, confirm compliance with this standard.

A review of training documents confirmed that KCCF investigator received training in conducting sexual assault investigations in confined spaces/prisons.

Interviews with staff as well as an examination of supporting documentation confirm the facility's compliance with this standard.

The agency head interview indicated that based on client contract requirements, an investigation would be conducted by either the client investigative unit, local law enforcement (if criminal) or a trained KCCF facility investigator (administrative only).

KCCF has designated staff at each facility that have received PREA Specialized Investigations training.

Regardless of who does the investigation, all PREA allegations are documented and

	<p>referred to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve criminal behavior.</p> <p>115.22 (b):</p> <p>The PAQ requires;</p> <p>The agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior.</p> <p>KCCF policy 605.2 ensures that allegations of sexual abuse or sexual harassment that appear to be criminal be referred for investigation to an agency that has the legal authority to conduct criminal investigations. Based on statement of fact by KCCF facility administrator, KCCF refers all allegations of sexual abuse that are criminal in nature to Kane County Sheriff's office Major Crime division for investigation. The facility documents all referrals of allegations of sexual abuse or sexual harassment. All allegations are documented and tracked on the PREA Case Tracking Log. Interview with facility investigators confirmed this procedure. The agency policy regarding the administrative investigation of allegations of sexual abuse or sexual harassment and referrals for criminal investigations is published on the agency website and can be accessed at https://www.kanesherriff.com/.</p> <p>115.22 (c):</p> <p>The PAQ requires:</p> <p>If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity.</p> <p>Information published on the KCCF website describes the responsibilities of the agency and the investigating agency in the investigation of allegations of sexual abuse and sexual harassment.</p> <p>The facility refers criminal investigations to the Major Crime division of the Kane County Sheriff's office. If the incident involved a law enforcement staff it would be transferred to Illinois State Police.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.31	Employee training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

KCCF Policy 605 PREA

KCCF Policy 307 Training Requirements

Training and roll call meetings. Annual Refresher Training

KCCF Pre Service training

Power Point Training Curriculum

Staff attendance Record

Random staff training records.

Interview with random staff

115.31 (a):

The PAQ requires The agency shall train all employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' rights to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

The facility provided the following.

All staff are provided training that includes all areas of PREA training and protocol for sexual abuse prevention, intervention, reporting, and protecting the detainees and preserving the possible crime scene. Staff go through pre-service training at the facility prior to having any contact with detainees.

The preservice and policy 307 and training curriculum

Policy 307 mandates All staff, volunteers and contractors who may have contact with inmates shall receive office-approved training on the prevention and detection of sexual abuse and sexual harassment within this facility. The Training Sergeant shall ensure that the staff receives training and testing in prevention and intervention techniques, that they have sufficient knowledge to answer any questions the arrestees and inmates may have regarding sexual assault or abuse, and that they are familiar enough with the reporting process to take an initial report of a sexual assault

or abuse. The PREA Coordinator shall be responsible for developing and administering this training, covering at minimum (28 CFR 115.31; 28 CFR 115.32):

- (a) The zero-tolerance policy for sexual abuse and sexual harassment and how to report such incidents.
- (b) The dynamics of sexual abuse and sexual harassment in confinement.
- (c) The common reactions of sexual abuse and sexual harassment victims.
- (d) Prevention and intervention techniques to avoid sexual abuse and sexual harassment in the jail.
- (e) Procedures for the investigation of a report of sexual abuse and/or sexual harassment.
- (f) Individual responsibilities under sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures.
- (g) An individual's right to be free from sexual abuse and sexual harassment.
- (h) The right of inmates to be free from retaliation for reporting sexual abuse and sexual harassment.
- (i) How to detect and respond to signs of threatened and actual sexual abuse.
- (j) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex or gender non-conforming inmates.
- (k) How to comply with relevant laws related to mandatory reporting of sexual abuse and sexual harassment to outside authorities.
- (l) How to conduct cross gender pat down searches:
- (m) how to conduct cross gender pat searches:

Fourteen random staff were interviewed. All staff attended pre-service and annual in-service training based on interviews and review of their training files.

115.31 (b):

The PAQ requires that training is tailored to the gender of the inmates at the facility.

KCCF and KCCF policies recognize that the facility houses male and female inmates. Policy mandates that the facility will be required to modify training to meet the needs of a different population. All staff at the facility received training that is tailored to male and female inmates. Staff assigned to specialized Post such as transportation officers, supervisors and investigators receive additional training.

115.31 (c):

The PAQ requires:

All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall 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. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.

The facility provided: According to the computer database for training, all staff have received training in the last 12 months. Staff interviewed indicated they had received additional refresher training during the last six months. At KCCF staff receive annual in- service training.

Policy 307. 03 mandates that the PREA Coordinator shall document, through signature or electronic verification, that staff, volunteers and contractors have received and understand the training. The Training Division will maintain training records on all those receiving training in accordance with procedures developed by the PREA Coordinator.

According to the PAQ and in interviews with staff between pre- service and in-service training, the facility provides additional training on a monthly basis through staff meetings and employees receive emails regarding PREA updates and information.

Training Posters are displayed in various locations throughout the facility.

The facility provides training on a monthly basis of each of the required training along with a test based on one of the 12 components of the training. This information is then filed in staff training files and documented on a training tracker maintained by the PREA compliance manager.

115.31(d):

The agency documents that employees who may have contact with inmates understand the training they have received through employee signature or electronic verification.

The facility provides a training tracker that indicates the staff took the course and passed the test associated with each course. Documentation of annual PREA training for employees is recorded on individual training records maintained by the training coordinator.

Staff interviewed indicated that the course usually involves a video or power point that includes differing topics. The course is taught by the Training Sgt. or PREA compliance manager. Each staff indicated that then are mandated to take the course each month.

A sample of nineteen (19) staff training files were reviewed and contained documentation supporting compliance with this standard. All staff interviewed indicated that they received the required PREA training initially and annually. Officers receive additional PREA training/updates when needed and officers assigned to the

	<p>restrictive housing unit also receive additional training. The extensive training provided and the staff's knowledge of PREA requirements confirmed that the facility is compliant with this standard. A review of documentation and staff interviews further confirmed that the facility is compliant with this standard.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>KCCF Policy 307.03 Training Requirements</p> <p>Documentation of Contractor Training</p> <p>Document of Volunteer Training</p> <p>Interviews with 10 volunteers</p> <p>Interviews with four contracting staff (Medical, food service)</p> <p>115.32 (a):</p> <p>The PAQ requires:</p> <p>All volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.</p> <p>The facility provided KCCF Policy 307.03 which mandates All staff, volunteers and contractors who may have contact with inmates shall receive office-approved training on the prevention and detection of sexual abuse and sexual harassment within this facility. The Training Sergeant shall ensure that the staff receives training and testing in prevention and intervention techniques, that they have sufficient knowledge to answer any questions the arrestees and inmates may have regarding sexual assault or abuse, and that they are familiar enough with the reporting process to take an initial report of a sexual assault or abuse. The PREA Coordinator shall be responsible for developing and administering this training.</p> <p>The facility employees 18 contractor. The facility has one volunteer that has received volunteer training in the last 12 months.</p>

	<p>115.32 (b)(c):</p> <p>The PAQ requires: The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates.</p> <p>The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.</p> <p>All contractors receive the same PREA training as employees prior to assignment</p> <p>The volunteer training curriculum was provided for review. The training is provided by video and include 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. Volunteers receive this training annually and sign a Documentation of Volunteer Training Form. Volunteer and contractor training is maintained in the volunteer electronic files.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

115.33	Inmate education
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Evidence relied upon in making the compliance determinations:</p> <p>KCCF Policy 503 Inmate Training</p> <p>KCCF Policy 605 Prison Rape Elimination</p> <p>Inmate Handbook</p> <p>Receipt of orientation training for new arrivals</p> <p>Inmate PREA Brochure</p> <p>Facility PREA Postings</p> <p>Inmate Receipt of PREA Comprehensive Education</p> <p>Fourteen inmate training files reviewed.</p> <p>115.33 (a):</p> <p>The PAQ requires:</p>

During the intake process, inmates shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

The facility provided

KCCF Policy 503A and KCCF Policy 605 mandates all inmates receive information at time of intake and if transferred from another facility about the zero- tolerance policy and how to report incidents of sexual abuse or sexual harassment, their rights to be free from retaliation for reporting such incidents and are informed of the agency/ facility policies and procedures for responding to such incidents. In interview with intake staff, on the day of arrival, inmate receive a tablet that includes the inmate Handbook, and a Sexual Assault Prevention and Reporting Inmate information brochure and sign a Receipt. This was observed by the audit during the intake of 5 arrestees.

115.33 (b)(c):

The PAQ requires

Within 30 days of intake, the agency shall provide comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.

The facility provided:

Inmates receive comprehensive PREA training as part of the orientation process. Based on interviews with the intake staff and PREA compliance manager, the comprehensive education occurs within the first 24 hours of arrival at the facility.

The facility has inmates watch the PREA Resource Center PREA video before leaving the intake center. The facility was not having the inmates sign acknowledgement of them watching the video. A corrective action plan was implemented. (see below)
When entering the Intake area all inmates are provided with a poster that includes all required orientation requirements. The inmate watches the PREA information video during the intake process. They are provided with a brochure and handbook during the intake process.

The intake staff and PREA compliance manager stated that all inmates have received the training.

The intake staff interviewed and provided the process of new arrivals. They indicated that the video is in the holding room and continuously plays during the intake process. The intake staff indicated that the inmate is provided with a brochure in the language they prefer and are given a tablet that includes the inmate handbook and PREA information during this process. The intake staff indicated they work with mental health staff if they feel the inmate is not comprehending the information they are being provided to determine if they need to read the information to the inmates.

The intake staff indicated that usually mental health will conduct the orientation of cognitive disabled inmates.

115.33 (d):

The PAQ requires that the agency shall provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled, as well as to inmates who have limited reading skills.

The facility provided:

All PREA education provided to inmates is in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled, or have limited reading skills. The inmate handbook, the PREA brochure and all verbal information given is provided in both English and Spanish. A contract for translation services is provided for ESL inmates to provide translation of any other languages. Many of the staff at the center are bilingual and provided training as needed. All of the staff assigned to the Intake area are bilingual. TTY machine is available for hard of hearing. Vision Impaired inmate that was interviewed indicated he understood the training and could read the large posters throughout the facility.

115.33 (e):

The PAQ requires the agency shall maintain documentation of inmate participation in these education sessions. The facility maintains documentation of inmate's participation in PREA education.

In review of 14 random inmate files reviewed, all had the documentation of receipt of written PREA education material. Additionally, over forty inmates were interviewed and stated they had received orientation training and PREA handbooks as well as comprehensive training when they arrived at the facility.

115.33 (f):

The PAQ requires In addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.

The facility provided posters including Sexual Assault Prevention and Reporting Posters; KCCF Zero Tolerance Posters, End the Silence Posters. PREA Brochure and Victim Advocacy Services. These posters were informative and included telephone numbers and addresses. Also Notice of Audit was posted throughout the facility.

Per interviews with the PCM and case manager they stated PREA education provided to inmates is in formats accessible to all inmates, including those who are limited English proficient, or have limited reading skills. The facility has PREA pamphlets, posters handbooks and form available in both English and Spanish. The facility has bilingual staff that is used as interpreters. A contract with the Language Line Services provides translation of any other languages. The limited English proficient offenders

	<p>interviewed acknowledged the information was provided in formats that could be understood.</p> <p>On information reported on the PAQ, there were 4055 inmates admitted to the facility in the past 12 months and 100% of the offenders were given PREA information at intake. There were 604 inmates whose length of stay in the facility was for 30 days or more. However, all inmates that arrive to the jail and complete intake received the comprehensive education program which includes the PREA Video https://www.pre-aresourcecenter.org/resource/new-prea-education-videos-adult-and-juvenile-people-confinement.</p> <p>All inmates indicated they had received training when they first arrived at the facility. The interviewed inmates indicated they watched a video and was given information. Five of the inmates indicated they did not read the information. All other inmates indicated they read and understood the information they received when they arrived. Four inmates interviewed were LEP and indicated that staff at the intake were bilingual and provided information in their language.</p> <p>Based on this analysis, the facility was not substantially compliant with this provision and corrective action was required.</p> <p>Inmates are shown the PREA video and asked if they have any questions prior to leaving the intake center. However, inmates do not sign an acknowledgement that they watch the video and were provided with an opportunity to ask any questions.</p> <p>The facility has implemented an acknowledgement form the inmates sign indicating they saw and understood the video.</p> <p>Based on review of the corrective action plan, the facility is substantially compliant with this provision and corrective action was required.</p>
--	--

115.34	Specialized training: Investigations
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>KCCF Policy 307 Staff Training</p> <p>Investigative Training Curriculum</p> <p>Interview with facility investigator</p> <p>115.34 (a):</p> <p>The PAQ requires in addition to the general training provided to all employees pursuant to § 115.31, the agency shall ensure that, to the extent the agency itself</p>

conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement setting.

The facility provided KCCF policy 307 mandates that in addition to the general training provided to all employees pursuant to §115.31, the agency ensures that, to the extent the agency conducts or assist in conducting investigation they will have been trained to conduct sexual abuse investigation in a correction setting.

Policy 307 also requires that specialized investigative training for investigators shall include the uniform evidence protocol to maximize potential for obtaining useable physical evidence; techniques for interviewing sexual abuse victims; proper use of Miranda and Garrity warnings; sexual abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case for administrative action or referral for prosecution

115.34 (b):

The PAQ requires specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

The facility provided:

The facility Investigators have completed investigating sexual abuse in a confinement setting and additional online training on investigating sexual abuse. Training includes Investigating Sexual Abuse through NIC. The training curriculum was reviewed and included interviewing sexual abuse victims, proper use of the Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. A copy of the training curriculum was provided for review.

115.34 (d):

The PAQ requires the agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

The facility provided:

The facility has one trained investigator. The agency maintains documentation that investigators have received specialized training on conducting sexual abuse investigations in confinement settings. Upon completion of the training, investigators receive a certificate of completion. In review of investigators' training files, investigators have completed this specialized training, as well as general training provided to all employees and documentation is maintained by the facility.

In the interview with the facility investigator, he confirmed receiving specialized training and general PREA education provided to all employees and were able to confirm the topics included in the specialized training they received. A review of the

	<p>training that is provided for law enforcement sexual assault investigators and administrative investigators exceeds expectations.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>Training Curriculum</p> <p>Interviews with Medical and mental health staff</p> <p>115.35 (a):</p> <p>The PAQ require the agency ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>All medical and mental health staff at the center or contracted through Wellpath medical services. The medical staff at KCCF received generalized training through the KCCF trainer and specialized training through Wellpath. The training curriculum includes how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, how and to whom to report allegations or suspicions of sexual abuse and sexual harassment as well of many other medical and mental health topics such as clinical interventions, and local policies.</p> <p>Based on the PAQ there are 39 medical and mental health staff that are contracted by Wellpath to provide medical and mental health services. Thirty eight of the staff have received specialized training.</p> <p>115.35 (b):</p> <p>The PAQ requires that If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations.</p>

	<p>The facility provided:</p> <p>The medical and mental health staff do not conduct forensic examinations.</p> <p>115.35 (c):</p> <p>The PAQ requires the agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.</p> <p>The facility provided:</p> <p>Contracting staff specialized training is provided by Wellpath and the documentation is maintained by Wellpath.</p> <p>In interviews with medical and mental health staff the staff indicated the training included (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>115.35 (d):</p> <p>The PAQ requires all medical staff assigned to the facility attend the same training as required mandated for employees by §115.31.</p> <p>The facility provided:</p> <p>The staff provided an acknowledgement that medical and mental health staff statement that they received contractor training. In addition to this training the staff that were assigned to the facility through a contractor received specialized training through Wellpath.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations: PAQ</p> <p>KCCF Policy 710 Inmate classification</p> <p>KCCF Policy 508 Classification Division</p>

Intake screening by medical/mental health staff

Completed KCCF Victim/Aggressor Classification screening form

Mental health referrals.

115.41 (a): The PAQ requires 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.

The facility provided KCCF policy 712 states The Commander of Corrections or the authorized designee should create and maintain a classification plan to guide staff in the processing of individuals brought into the facility. The plan should include an initial screening process, as well as a process for determining appropriate housing assignments. The plan should include use of an objective screening instrument, procedures for making decisions about classification and housing assignments, intake and housing forms and a process to ensure that all classification and housing records are maintained in each inmate's permanent file. To the extent that the information is available, the plan should include an evaluation of the following criteria:

- Age
- Gender
- Current charges
- Behavior during arrest and intake process
- Pretrial, awaiting sentence or sentenced status
- Probation or parole status
- Criminal and incarceration history
- Emotional and mental condition
- Self-attitude and future prospects
- Physical size and stature
- Potential risk of safety to others or self
- Gang activity
- Special management inmate status
- Special needs assessment for vulnerable inmates
- Behavioral or physical limitations or disabilities
- Medical condition
- Level of sobriety at booking

- History of substance abuse
- Suicidal ideation
- Escape history and degree of escape risk
- Prior assaultive or violent behavior
- The need to be separated from other classifications of inmates (e.g., juvenile offenders gang affiliation, confidential informant, former law enforcement, sexual orientation)
- Academic and vocational needs
- Special services and program needs
- Prior convictions for sex offenses against an adult or child
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender non-conforming (see Prison Rape Elimination Act Policy for transgender and intersex definitions)
- Previous sexual victimization
- The inmate's own perception of his/her vulnerability
- Whether the inmate is detained solely for civil immigration purposes
- Whether the inmate is a foreign national and if so from what country (see Foreign Nationals and Diplomats Policy)
- Prior acts of sexual abuse, prior convictions for violent offenses and history of prior institutional violence or sexual abuse, as known to the Office (28 CFR 115.41)
- Any other criteria as deemed appropriate by the Sheriff or the authorized designee or the authorized designee

This screening shall take place as soon as the arrestee is brought to the intake center.

In addition to the screening instrument, people tasked with screening shall conduct a thorough review of any available records (i.e., medical files or pre-sentence investigation reports, etc.) which can assist them with risk assessment.

The facility conducts initial and reassessments utilizing the PREA/Sexual Abuse and Assault Prevention and Intervention (SAPPI) Risk Assessment which is an objective and standardized screening instrument by a trained classification/intake staff member. The instrument and related reviews of documents provided at intake has been designed to identify the potential risk each inmate presents for predatory behavior or their potential risk to be preyed upon by other inmates.

According to information provided on the PAQ, in the past 12 months, 1410 inmates

that entered the facility were assessed for their risk of victimization or abusiveness upon arrival. Random sampling of inmate files and inmate interviews confirm inmates were typically screened within 24 hours of arrival.

There were twenty-eight inmates interviewed during the onsite audit. All inmates interviewed indicated they had received the screening the same day they arrived to the intake center.

115.41 (b):

The PAQ requires Intake screening shall ordinarily take place within 72 hours of arrival at the facility.

The facility provided: Intake screening takes place as soon as the arrestee is booked into the intake center. The process that is utilized includes part of the initial intake. Once the inmate goes through the body scan, they are placed in a holding cell by themselves and then escorted to one of the several intake modules. The intake staff runs a data based and pull all prior admission information and then conducts the screening with the inmate.

During this intake screening staff introduce PREA to the inmate and explain the purpose of the screening with the inmate. If the inmate has past history of victimization or predator behavior or if the inmate admits to being transgender, the screening staff completes a referral that is sent to the mental health staff to set up an interview with the resident. Medical and mental health staff are available during the screening process conducting a medical review and suicide screening. Most often the mental health staff will meet with the inmate prior to the referral, however according to the screening staff a referral is still completed as required by the database for tracking.

The facility also utilizes a medical screening form that includes some of the same information found in the screening instrument.

All of this information is then provided to the Classification division that reviews the screening, intake, and medical screening and interview the inmates prior to determining the inmates housing plan.

115.41 (c):

The PAQ requires Risk assessment is conducted using an objective screening instrument.

The facility provided: The PREA screening instrument is an objective and standardized screening instrument that is conducted by a trained classification/intake staff member. A review of the screening instrument provides confirmation that it is an objective screening instrument.

115.41 (d)(e):

The PAQ requires 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; (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.

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 agency, in assessing inmates for risk of being sexually abusive.

The screening includes the screener's thorough review of any available records available to assist with determining the inmate's risk assessment. The Sexual Risk Indicator Tool was reviewed.

It contains:

- Whether the inmate has a mental, physical, or developmental disability?
- The age of the inmate?
- The physical build of the inmate?
- Whether the inmate has previously been incarcerated?
- Whether the inmates' criminal history is exclusively nonviolent?
- Whether the inmate has prior convictions for sex offenses against an adult or child?
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming?
- Whether the inmate has previously experienced sexual victimization?
- The inmate's own perception of vulnerability?
- Perpetrators of sexual abuse during incarceration?
- Prior conviction of violent offenses?
- History of Assaultive Conduct in the past 5 years?

115.41 (f):

The PAQ requires 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.

The facility provided policy 710 which requires within a set time, not to exceed 30 days of inmate' arrival to the facility, inmates are reassessed by their assigned Case Manager for their risk for victimization and abusiveness using the Follow-up, PREA Vulnerability Reassessment Questionnaire. In information provided on the Pre- Audit Questionnaire, 605 inmates were reassessed within 30 days of arrival.

In interview with the Classification Sgt., he indicated that the classification staff at the jail reassess detainees within the first 20 days or less.

There were twenty-eight inmates that were interviewed. Twenty-two of these inmates had been at the facility more than ten days Each of these inmates indicated they had been reassessed by the classification Sgt.

115.41 (g):

The PAQ requires that 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.

The facility provided policy 710 which requires an inmate's risk level will also be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information. Annually during annual classification review assessments, inmates are reassessed for risk of victimization or abusiveness using the PREA Vulnerability Reassessment Questionnaire. Transgender inmates are reassessed within the first 30 days and a minimum of every six months.

115.41(h):

The PAQ requires that the policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) questions regarding: (a) whether or not the inmate has a mental, physical, or developmental disability; (b) whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) whether or not the inmate has previously experienced sexual victimization; and (d) the inmate's own perception of vulnerability.

The facility provided Policy 710 which mandates that inmates are not disciplined for refusing to answer any questions or for not disclosing complete information.

Interviews with screening staff confirmed they would not discipline or coerce an inmate to answer screening questions.

115.41 (i):

The PAQ requires the agency 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.

KCCF implemented appropriate controls on dissemination of responses to questions asked related to sexual victimization or abusiveness in order to ensure sensitive

	<p>information is not exploited by employees or other individuals. Sensitive information is limited to need-to-know employees only.</p> <p>The PREA coordinator indicated that only people that need to know in order to make housing assignments have access to the screening instruments.</p> <p>Staff that conduct screening indicate they would provide a copy to Mental health as part of the referral process, intake staff, and PCM.</p> <p>The facility PREA compliance manager indicated that only the classification office, mental health, medical and PCM have access to the inmate's screening information.</p> <p>During the on-site assessment, the inmate files were reviewed. They were locked in a sliding cabinet in the records office and can only be accessed through going into the office and unlocking the sliding cabinet.</p> <p>All inmates are screened when they transfer into the facility, including inmates that leave the facility for court appearance or other administrative transfer from the facility for more than a day.</p> <p>A corrective action plan was required due to the screening instrument not including "Whether the inmate is detained solely for civil immigration purposes".</p> <p>The facility updated the screening instrument to include this statement.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is no longer required.</p>
--	--

115.42	Use of screening information
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>Risk assessment log</p> <p>KCCF Policy 710</p> <p>KCCF Policy 508 Classification</p> <p>KCCF Policy 805 Inmate Showers</p> <p>Interview</p> <p>Targeted inmates</p> <p>PCM</p>

Staff that conduct screening

Classification Sgt.

115.42 (a):

The PAQ requires that the agency shall use information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

The facility provided:

KCCF policy 710 and KCCF Policy 508 explain the use of PREA screening information. The agency uses the information from the risk screening form to make housing assignments with the goal of separating inmates at high risk of being sexually victimized from inmates with those at high risk of being sexually abusive. The facility maintains a Bed Location chart that determines the at-risk inmates and possible predator inmates. The classification Sgt. and PREA compliance managers explained that prior to assigning an inmate to a bed the intake staff provide all of the intake documentation to the Classification Office. The classification office reviews the information, interviews the inmates and makes a initial placement from this information. The placement is reviewed within 20 days and the inmate is reassessed and the housing plan would be revised as required.

115.42 (b):

The PAQ requires the agency shall make individualized determinations about how to ensure the safety of each inmate.

The facility provided policy 508 which states individualized determinations are made about how to ensure the safety of each offender. Inmates who score at risk of victimization or abusiveness are referred for further evaluation with the Mental Health provider. Inmates have an option of refusing these services.

The facility does not have any specialized housing based on sexual orientation. It does have housing plan for housing inmates based on risk assessment.

115.42 (c):

The PAQ requires In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency 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.

The facility provided: KCCF policy mandates that making housing and programming assignments for transgender or intersex inmates, the facility will consider on a case-by-case basis whether the placement would present management or security problems. Inmates who self-disclose being gay, bisexual, transgender or intersex are

tracked on a LGBTI List that is maintained by the PREA Compliance Manager. Transgender and intersex inmates are housed after meeting with the Transgender Care Committee (TCC). The Facility Administrator, and/or Assistant Facility Administrator, PREA Compliance Manager, Chief of Security, Classification Supervisor and Health Services Director make up the TCC. The TCC would meet with the inmate, complete a KCCF Statement of Search/Shower/Pronoun Preference Form and documents the meeting on the Transgender Care Committee Summary. At the time of the on-site audit visit, there was one inmate who self-disclosed being transgender or intersex assigned to the facility. Based on interviews with classification staff the inmate was asked about their safety during the intake process and again during the meeting with the classification interview.

115.42 (d) - (f)

The PAQ requires 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.

A transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration.

Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

The facility provided: KCCF Policy 508 requires that a transgender or intersex inmate's housing and program assignments will be reassessed every six months to review any threats to safety experienced by the offender. Transgender and intersex inmate placement and programming are reviewed as needed, but at least every six months. A transgender or intersex inmates' own views of their safety is taken into consideration. When the classification team meets with transgender or intersex inmates, they are given an opportunity to express their views. In conversation with the classification Sgt. indicated that the agency and facility would house inmates based on his/ her views unless it would jeopardize the safety and security of the facility.

Policy 805.9 Inmate Showers mandates that transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

KCCF does not place lesbian, gay, bisexual, transgender or intersex inmates in dedicated units or wings solely based on such identification. In interview 3 inmates who self-disclosed being lesbian/gay, they did not feel they were housed any differently because of their sexual orientation.

PREA compliance manager interview: We have a Classification division that meets on inmates that indicate they are transgender or intersex upon arrival at the facility. The team and inmate review housing options and their own view of their housing options. The facility has single showers, and the transgender are allowed to shower by themselves. We would not let any other inmates out of their rooms during this time.

	<p>Staff that conduct screening interviews included the intake staff and classification Sgt. The classification Sgt. indicated that transgender or intersex inmates are allowed to shower by themselves.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>KCCF Policy 605 PREA</p> <p>KCCF Policy 508 Classification</p> <p>PAQ</p> <p>115.43 (a):</p> <p>The PAQ requires that the agency has a policy prohibiting the placement of 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.</p> <p>The facility provided:</p> <p>KCCF Policy 508 Classification which mandates Inmates at high risk for sexual victimization shall not be placed in involuntary protective custody unless an assessment of available alternatives has been made and it has been determined that there is no reasonably available alternative means of separation. Inmates may be held in involuntary protective custody for less than 24 hours while an assessment is completed.</p> <p>If an involuntary protective custody assignment is made because of a high risk for victimization, the Commander of Corrections or the authorized designee shall clearly document the basis for the concern for the inmate's safety and the reasons why no alternative means of separation can be arranged.</p> <p>The facility administrator provided a state of fact that the facility has not placed a inmate in involuntary segregation in restrictive housing during the last 12 months.</p> <p>The auditor reviewed the housing assignments database, the investigative files and segregation daily roster to cornify the statement of fact. In the investigative file there was one inmate that inappropriately touched a female inmate during the intake process. He was placed in administrative segregation pending classification and</p>

investigation. The victim was processed into jail. However, was released on bail within 24 hours.

The Lt. that supervises segregation indicated he has never known of anyone being placed in restrictive housing unit for fear of sexual abuse or harassment or for making an allegation of sexual abuse. They did report that a preliminary investigation of the sexual abuse was conducted and the inmate that was accused of inappropriate touching was placed in segregation.

115.43 (b):

The PAQ requires inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) The reasons for such limitations.

The facility provided: Policy 508 mandates The facility shall assign these inmates to involuntary protective custody only until an alternative means of separation from likely abusers can be arranged, not ordinarily in excess of 30 days.

Inmates placed in temporary protective custody shall continue to have reasonable access to programs, privileges, education and work opportunities. If restrictions are put in place, the Commander of Corrections or the authorized designee shall document the following:

(a) The opportunities that have been limited

(b) The duration of the limitation

(c) The reasons for such limitations

Every 30 days, the Commander of Corrections or the authorized designee shall afford each such inmate a review to determine whether there is a continuing need for protective custody.

115.43 (c):

The PAQ requires the facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

The facility provided:

Based on interviews, when there is a situation of an inmate alleging risk of victimization and needing to be separated from the alleged abuser, segregation would be utilized as a last alternative. If this placement was necessary, staff stated that the inmate would have access to the appropriate privileges and the justification for the placement would be documented. The inmate would be reviewed by the Institution Classification Team every 30 days.

	<p>115.43 (d):</p> <p>The PAQ requires If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document: (1) The basis for the facility's concern for the inmate's safety; and (2) The reason why no alternative means of separation can be arranged.</p> <p>The facility provided: Policy 605 which states the facility will document the basis for the facility's concern for the inmate's safety and the reason no alternate means of separation can be arranged.</p> <p>115.43 (e):</p> <p>The PAQ requires in cases where involuntary segregated housing is used for longer than the initial 30 days, the facility will review the status every 30 days to determine if ongoing involuntary housing is needed.</p> <p>The facility provided:</p> <p>According to information provided on the Pre-Audit Questionnaire and in interview with the Facility Administrator and security staff who supervise inmate in Segregation Unit, in the past 12 months there has not been a time that an inmate found at high risk of victimization or an inmate who alleged sexual abuse was placed in involuntary segregated housing.</p> <p>Policy 508 mandates housing, bed, work and program assignments should be made to separate inmates at high risk of being sexually victimized from those at high risk of being sexually abusive (28 CFR 115.42). Inmates identified as being at high risk for sexually aggressive behavior will be monitored and housed in an area that will minimize the risk to other inmates and staff. All inmates identified as being at risk of victimization shall be monitored and housed in an area to minimize the risk to their safety. However, inmates at high risk for sexual victimization shall not be placed in involuntary protective custody unless an assessment of all available alternatives has been made and it has been determined that there is no available alternative means of separation from likely abusers.</p> <p>KCCF Policy 605 mandates that in cases where involuntary segregated housing is needed for longer than the initial 30 days, the facility shall review the status every 30 days to determine if ongoing involuntary segregated housing is necessary.</p> <p>Compliance with this standard was determined through review of procedures, observation during tour and interviews.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>PAQ</p> <p>KCCF Policy 605.4 PREA – Reporting</p> <p>Sexual Assault Awareness Program brochure</p> <p>Break the Silence PREA posters</p> <p>PREA reporting posters Inmate Handbook</p> <p>Utilizing the Inmate phone system to call reporting</p> <p>KCCF website</p> <p>Kiosk Reporting</p> <p>Corrective Action Plan</p> <p>115.51 (a):</p> <p>The PAQ requires the agency has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p>The facility provided</p> <p>KCCF policy 605 mandate that facilities provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, provide multiple internal ways for inmates to privately report retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, provide multiple internal ways for inmates to privately report staff neglect or violation of responsibilities that may have contributed to such incidents. Policies also mandate that a private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials and that the private entity or office allow the inmate to remain anonymous upon request.</p> <p>Inmates are informed in the Inmate Handbook, Brochure, intake acknowledgement, Tablet and on posters located throughout the facility and by almost all inmate telephones.</p> <p>KCCF provides multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse</p>

and sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. Inmates are provided with the Sexual Assault Awareness Program brochure, the inmate handbook. Various PREA posters and notification posted by all phones provide reporting options. Interviews with inmates verified that inmates knew of multiple internal ways to report.

The handbook provides the following information to inmates. The same information is found on posters throughout the facility:

Inmates may report sexual abuse or sexual harassment incidents anonymously or to any staff member they choose. Staff shall accommodate all inmate requests to report allegations of sexual abuse or harassment. Staff shall accept reports made verbally, in writing, anonymously or from third parties and shall promptly document all verbal reports.

You may report the following ways:

- In Person to any Officer, Mental Health Clinician, Medical Personnel
- In writing by sending a request to any of the above listed staff members or any Supervisor
- Write to Mutual Ground @ 418 Oak Ave, Aurora Illinois 60175
- On the Kiosk you can message Medical/Mental Health/Grievances/Classification
- By phone by contacting Mutual Ground at 630-897-8383 does not require a PIN and there are no charges for these calls. (PREA related calls only)The auditor tested the telephone system from several telephones including the rolling telephone located in the restrictive housing unit. Whenever you pick up the phone the user is asked to indicate English or Spanish. The inmate can then press 4 for an outside line. Then the inmate calls telephone number listed as an outside reporting. The call is to the Mutual Ground Victim Advocacy Center. Staff at the center indicated when testing the telephone they were a victim advocacy program, would accept the report and would provide an anonymous third part report to the Kane County sheriff's office. When asked about talking to someone about emotional support the staff member connected the auditor to a victim advocate for emotional support.

In conversation with the Mutual Ground Victim Advocacy Center, the staff indicated they are not a reporting center; however, they do accept reports and send them to the sheriff's office. They indicated that this is explained whenever someone calls their hot line.

115.51 (b):

The PAQ requires the agency shall also provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall

be provided with information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

The facility provided the following response:

The facility also provides multiple external ways for inmates to report allegations to a public or private agency that is not part of KCCFF. Inmates are informed on posted information they can write or utilize the telephone system to call Mutual Grounds.

Based on interviews with the Mutual Grounds and PREA frequently asked questions, Mutual Ground is not an acceptable public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request.

During the tour of the facility the auditor called Mutual Ground and asked if he could make a report of sexual abuse or harassment. The person answering the telephone indicated I could, and she would advise the sheriff's office. She also indicated I could make an anonymous report. I then asked to speak to a person about emotional support and talked to a counselor with Mutual Grounds.

I then talked to the Chief Executive Officer of Mutual Grounds and asked if they would take reports and would they notify the jail and could the report be anonymous. She indicated that she thought I could. When I probed about any Federal Funding and requirement of confidentiality, she indicated that they did receive indirect federal funds. At her request, I sent the FAQ about outside reporting for her to review. She called me back and indicated that Mutual Ground would not be able to continue as an outside reporting entity. The PREA coordinator was advised that the jail would need to establish another outside reporting entity. He is attempting to secure these services at this time.

The Kane County Sheriff's Office has signed a mutual agreement to place a PREA phone in each office's dispatch center with explicit directions on dispatch staff to follow and report allegations to the calling Jail. The form that is utilized allows anonymous calls and third party calls to make a report of sexual abuse or sexual harassment.

The Kane County Correctional Facility PREA Coordinator has replaced all references to calling the Mutal Ground for report and has modified all references to Mutual Ground as a victim advocate and emotional support staff.

There are postings on how to report throughout the facility.

These include a KCCF and facility Brochure that inmate receive during intake that provides telephone numbers and the multiple ways to report.

The auditor contacted the Kendall County dispatcher and asked how they would report an allegation from Kane County Correctional Facility. The staff member read her Post order direction of how to complete a form and then send the information to the Kane County Jail and Kane County Sheriff's office dispatch center.

	<p>The facility has a large poster that provides contact information on how to report to the local consultant office and how to contact US Marshal Services.</p> <p>115.51(c):</p> <p>The PAQ requires the agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties.</p> <p>KCCF policy 605 requires employees to accept reports made verbally, in writing, anonymously and from third parties and verbal reports shall be promptly documented.</p> <p>Staff interviewed were aware of the requirement to accept reports made verbally, anonymously and from third parties. All staff interviewed indicated they would document verbal reports immediately and notify the shift supervisor by phone or in person.</p> <p>115.51 (d):</p> <p>The PAQ requires the agency has established procedures for staff to privately report sexual abuse and sexual harassment of inmates.</p> <p>A KCCF policy 605 KCCF employees may report sexual abuse or sexual harassment information to the Chief of Security or facility management privately if requested.</p> <p>Staff were aware of how they could report and felt, if necessary, they would feel comfortable reporting privately to the KCCF PREA compliance manager.</p> <p>Staff are advised of reporting privately is one of the yearly refresher courses provided each month and posters are located in the staff break area, front lobby and visitation room.</p> <p>Based on this analysis, the facility is not substantially compliant with this provision and corrective action is required.</p> <p>The facility is not compliant with standard 115.51(b). The facility indicated the Mutual Ground Victim Services serves as an outside reporting entity. Based on frequently asked question by PREA Management Office and in interview with Mutual Ground the center would not be allowed to immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request.</p> <p>Based on the successful corrective action plan and this analysis of this standard, the facility is substantially compliant with this provision and corrective action is no longer required.</p>
--	--

115.52	Exhaustion of administrative remedies
---------------	--

	<div data-bbox="256 118 959 152" data-label="Section-Header"> <p>Auditor Overall Determination: Meets Standard</p> </div> <div data-bbox="256 197 542 230" data-label="Section-Header"> <p>Auditor Discussion</p> </div> <div data-bbox="256 275 1161 309" data-label="Text"> <p>Evidence relied upon in making the compliance determinations:</p> </div> <div data-bbox="256 342 884 376" data-label="Text"> <p>KCCF policy 605 Prison Rape Elimination Act</p> </div> <div data-bbox="256 416 512 450" data-label="Text"> <p>Statement of Fact</p> </div> <div data-bbox="256 490 542 524" data-label="Text"> <p>KCCF Grievance Log</p> </div> <div data-bbox="256 564 459 598" data-label="Text"> <p>Interview with</p> </div> <div data-bbox="256 638 507 672" data-label="Text"> <p>Grievance Officer</p> </div> <div data-bbox="256 712 320 745" data-label="Text"> <p>PCM</p> </div> <div data-bbox="256 786 406 819" data-label="Text"> <p>115.52 (a)</p> </div> <div data-bbox="256 860 1412 972" data-label="Text"> <p>The PAQ requires that an agency shall be exempt from this standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse.</p> </div> <div data-bbox="256 1012 557 1046" data-label="Text"> <p>The facility provided.</p> </div> <div data-bbox="256 1086 1479 1321" data-label="Text"> <p>The PAQ indicated that the facility is exempt from this standard as it does not have an administrative procedure to address grievances regarding sexual abuse. KCCF policy provides inmates may file an emergency grievance if he/she is subject to substantial risk of imminent sexual abuse. After receiving an emergency grievance of this nature, the facility administrator or designee will ensure that immediate corrective action is taken to protect the alleged victim.</p> </div> <div data-bbox="256 1361 1452 1473" data-label="Text"> <p>According to the PAQ, detainee can utilize the grievance system to make an allegation of sexual abuse or harassment. However, all sexual abuse allegations will be forwarded to the Major Crime division for investigation and conclusion.</p> </div> <div data-bbox="256 1514 1468 1671" data-label="Text"> <p>The inmate handbook explains the process of filing a grievance. Any grievance that alleges sexual abuse, sexual harassment, retaliation for reporting an allegation or for cooperating in an investigation will be immediately forwarded to the investigative unit and, or Major Crime Unit for investigation.</p> </div> <div data-bbox="256 1711 1479 1789" data-label="Text"> <p>The grievance officer was interviewed and indicated that he notifies the detainee that the grievance has been forwarded to the Investigative unit or Major Crime division.</p> </div> <div data-bbox="256 1830 418 1863" data-label="Text"> <p>115.52 (b):</p> </div> <div data-bbox="256 1904 1479 2016" data-label="Text"> <p>The PAQ requires an agency policy or procedure allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred</p> </div> <div data-bbox="256 2056 557 2089" data-label="Text"> <p>The facility provided.</p> </div>
--	--

KCCF policy mandate there is no time limit when an inmate can submit a grievance regarding sexual abuse.

115.52 (c):

The PAQ requires The agency's policy and procedure allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint.

The facility provided:

KCCF policy provide that inmates have a right to submit grievances alleging sexual abuse to someone other than the staff member who is the subject of the complaint and the grievance will not be referred to the subject of the complaint.

115.52 (d):

The PAQ requires (1) The agency issues 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. (2) Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal. (3) The agency 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 agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made. (4) 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.

The facility provided

All allegations of sexual abuse are forwarded to the Major Crime Division or Illinois State Police for investigations. The facility has no control over these investigations.

115.52 (e):The PAQ requires Agency policy and procedure permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file requests on behalf of inmates.

Third parties such as fellow inmates, family members, attorneys or outside advocates may assist in filing requests for administrative remedies relating to allegations of sexual abuse and may file on behalf of inmates. The alleged victim must agree to have the request filed on his or her behalf; however, he/ she is not required to personally pursue any subsequent steps in the administrative remedy process. If the offender declines to have the request processed on his or her behalf, the agency shall document the offender's decision.

115.52 (f):

The PAQ requires the agency has a policy and established procedures for filing an

	<p>emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse.</p> <p>KCCF policy provides inmates may file an emergency grievance if he/she is subject to substantial risk of imminent sexual abuse. After receiving an emergency grievance of this nature, the facility administrator or designee will ensure that immediate corrective action is taken to protect the alleged victim.</p> <p>In an interview with the PREA Compliance Manager and on information provided on the Pre-Audit Questionnaire, in the past 12 months, there have been no emergency grievances alleging sexual abuse filed.</p> <p>115.52 (g):</p> <p>The PAQ requires the agency has a written policy that limits its ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the inmate filed the grievance in bad faith.</p> <p>The facility provided</p> <p>KCCF Policy 605 provides an inmate can be disciplined for filing a grievance related to alleged sexual abuse if it is determined that the inmate filed the grievance in bad faith.</p> <p>Site Review:</p> <p>There were grievance boxes located in each of the housing units. There were also grievance forms located in the same area. The facility allows inmates to have paper and pencils as noted by conversations with inmates during the initial tour.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations: KCCF</p> <p>KCCF Policy 605 – Prison Rape Elimination Act</p> <p>Acknowledgement of Receipt of Orientation</p> <p>Inmate PREA Handbook</p>

Victim Advocate Posters

KCCF PREA Pamphlets

MOU between KCCF and Mutual Grounds

Interview with director of Mutual Grounds

115.53 (a)

The PAQ requires the facility shall 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, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.

The facility provided

KCCF Policy 605 – Prison Rape Elimination Act addresses the agency/facility’s policies on providing inmates with access to outside victim advocates for emotional support services related to sexual abuse. The facility enables reasonable communication between the inmates and these agencies in a confidential manner. The inmates are informed by the facility and according to interviews with the Mutual Grounds staff of the extent to which communications will be monitored. According to the PREA compliance manager and Mutual Grounds the facility would monitor only to the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

The facility provides inmates with a facility brochure that includes information on how to access the emotional support staff by dialing 2 and then 630-897-0082 on the inmate phone system. The handbook, brochure and poster include the address and telephone number of Mutual Ground. This information was located next to the inmate telephones.

Based on the PAQ and interview with the Warden the jail does not house inmates for the sole purpose for immigration purposes. i

The facility also provides inmates with a handbook that includes the same information that is in the brochures.

In interviews with Mutual Grounds, the staff indicated they have a MOU with Kane County Correctional Facility. They provide emotional support at the center and are available by calling a dedicated hotline that does not require a pin in order to contact for emotional support.

The auditor called the hotline number and spoke with an emotional support staff at the center. They were very familiar with the facility and the MOU with the facility.

115.53 (b):

	<p>The PAQ requires the facility shall 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 law</p> <p>Residents PREA Handbook provides a phone number and address of the Mutual Ground and posters located throughout the facility provide the same information. The handbook and poster indicate that the telephone call to the center is confidential, and no one will listen to their calls.</p> <p>115.53 (c):</p> <p>The PAQ requires the agency, or facility maintains memorandum of understanding (MOUs) or other agreements with community service providers that are able to provide inmates with emotional support services related to sexual abuse.</p> <p>The facility provided the following information</p> <p>As required by policy 605, KCCF maintains an MOU with Mutual Ground. The requirements of the MOU include not only access by inmates to the center via the inmate telephone system, but an agreement to respond to requests from the KCCF to provide in-person advocacy and support to survivors of sexual assault.</p> <p>Twenty- eight inmates were interviewed. Twenty - one of the inmates knew about the Victim Emotional Support program. All of the 21 knew the phone call was free, and the information was available on the walls, in the handbook and in a brochure. Only five knew the program was a victim advocacy program. All indicated they could call anytime. Twenty-seven indicated that no one would listen to their calls and the calls were private.</p> <p>The PREA compliance manager indicated that it is part of the MOU that the center has to have been trained to provide advocacy service and emotional support.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>KCCF Policy 605 Prison Rape Elimination Act</p> <p>Kane County Sheriff's website</p>

	<p>Reporting posters</p> <p>115.54 (a):</p> <p>The PAQ requires the agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.</p> <p>The facility provided;</p> <p>Reporting Posters are visible in the visitation room, lobby and is found in the inmate handbook. KCCF provides Reporting system on KCCF Website at https://www.kanesherriff.com/ provides information on ways for third party reporting including anonymous reporting. There is a form that the visitor to the website can complete and forward to the Sheriff's office.</p> <p>· Third party grievance forms are available on the website and are sent to the facility's Warden. Inmates can accomplish third- party reporting by having a friend or family member contact the Tell a family member, friend, legal counsel, or anyone outside the facility. Family, friends, legal counsel can report on your behalf by calling 630-232-6840 or email at https://www.kanesherriff.com There is a brochure located in the lobby of the jail that visitor can take that provided ways for survivors, family and friend can call a crisis line.</p> <p>Interviews with inmates demonstrated they knew how third-party reporting could be accomplished. Twenty five of the twenty-eight inmates interview knew that family and friends could make a report on their behalf.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations: KCCF KCCF Policy 605</p> <p>Staff Refresher training</p> <p>Specialized medical training.</p> <p>Mandatory reporting</p> <p>Survey of Vulnerable Persons</p> <p>Staff Report</p>

Interviews

Random staff

Medical staff

Mental health staff

Facility administrator

PREA coordinator

PAQ

115.61 (a):

PAQ requires the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse, sexual harassment or retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency.

The facility provided.

Staff, volunteers and contractors must take all allegations of sexual abuse and sexual harassment seriously and are required to report immediately any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment and any retaliation against inmate or staff who reported such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. This information is to be reported to the Shift Supervisor, the PREA Compliance Manager, or facility investigative staff.

Policy 605 also requires staff, volunteers or contractor 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.

In interviews with random staff, volunteers and contractors, they knew their reporting duties. Staff receive training in reporting. Wellpath inc. has a specialized training program for medical and mental health professionals that includes duties to report, the State's vulnerable persons' reporting duties and confidential reporting duties.

Random Staff interview that they would accept any allegation of abuse or harassment would document the allegation as soon as possible and notify the shift supervisor, PREA compliance manager. Random staff interviewed indicated they are mandatory report and must report allegation or suspicion of sexual abuse or sexual harassment regardless of when or where it may have happened.

The staff interviewed also noted that if the allegation was sexual abuse they would

implement the response plan.

- Would separate the victim and abuser
- Would notify their supervisor
- Would secure the crime scene
- Would notify medical as needed
- Would ask the victim and abuser not to wash, use the toilet, or change clothes

115.61 (b):

PAQ requires, apart from reporting to designated supervisors or officials and designated state or local services agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

The facility provided

Policy and training mandates that apart from reporting to designated supervisors, staff are not to reveal any information related to a sexual abuse report to anyone. Staff and contractors interviewed knew this information was to be kept confidential and knew whom to report allegations.

115.61 (c)(d):

PAQ requires unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.

The facility provided

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

Medical specialized medical training includes medical staff are required to report sexual abuse and to inform inmates of their duty to report and the limitations of confidentiality at the initiation of services. The training also provides reporting of a

	<p>vulnerable adult under a State or local vulnerable person's statute, under applicable mandatory reporting laws.</p> <p>The facility does not house inmates under the age of 18.</p> <p>Medical and mental health staff interviewed confirmed this practice.</p> <p>The medical and mental health staff indicated that the inmate signs a statement that includes limitation of confidentiality.</p> <p>The PREA Coordinator interview indicated that medical and mental health staff are required to report allegation of sexual abuse or sexual harassment is made by someone under the age of 18 or someone considered a vulnerable adult under state or local law.</p> <p>115.61 (e):</p> <p>PAQ requires the facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.</p> <p>The facility provided</p> <p>In interview with the facility administrator and his executive team, the KCCF reports all allegations of sexual abuse and sexual harassment, including third party and anonymous reports to KCCF facility investigators. There are staff reporting posters located throughout the facility.</p> <p>According to statements, there have been no reports from third parties, contractors, or volunteers in the last 12 months. Interviews with the Agency PREA coordinator and agency head confirmed that KCCF mandates staff, volunteers, and contractors report all allegations or suspicions of sexual abuse or sexual harassment to shift supervisor and PREA compliance manager who is also the facility investigator.</p> <p>The facility administrator interview indicated it is his expectation that staff report all allegations of sexual abuse or sexual harassment immediately to their shift supervisor.</p> <p>Site Review: During the tour of the facility, staff were asked how they would make a report of abuse or harassment. All indicated they would report to their immediate supervisor. Some indicated they would also report to the PCM. They are reporting posters throughout the facility including the staff roster room and break room.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

	<div data-bbox="256 118 959 152" data-label="Section-Header"> <p>Auditor Overall Determination: Meets Standard</p> </div> <div data-bbox="256 197 542 230" data-label="Section-Header"> <p>Auditor Discussion</p> </div> <div data-bbox="256 271 1398 344" data-label="Text"> <p>Evidence relied upon in making the compliance determinations: KCCF Policy 508 Classification - separation.</p> </div> <div data-bbox="256 385 317 418" data-label="Text"> <p>PAQ</p> </div> <div data-bbox="256 456 670 490" data-label="Text"> <p>Interviews with Agency Head</p> </div> <div data-bbox="256 528 558 562" data-label="Text"> <p>Facility Administrator</p> </div> <div data-bbox="256 600 461 633" data-label="Text"> <p>Random Staff</p> </div> <div data-bbox="256 672 509 705" data-label="Text"> <p>Classification Sgt.</p> </div> <div data-bbox="256 743 1465 902" data-label="Text"> <p>The PAQ indicates that when the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay).</p> </div> <div data-bbox="256 940 557 974" data-label="Text"> <p>The facility provided:</p> </div> <div data-bbox="256 1012 1473 1214" data-label="Text"> <p>115.62 (a): KCCF 508 mandates when the facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the alleged victim. All allegations of sexual abuse are to be handled in a confidential manner and conversations with the victim are sensitive, supportive, and nonjudgmental.</p> </div> <div data-bbox="256 1252 1479 1494" data-label="Text"> <p>The PAQ indicated in the past 12 months there were no times it was necessary for the facility to take immediate action regarding a inmate being in substantial risk of sexual abuse. The facility administrator stated that if it was suspected a inmate was at substantial risk of sexual abuse, he would immediately separate the inmate abuser or victim and investigate. Staff interviewed were aware of their responsibilities if they felt an inmate was at risk of sexual abuse.</p> </div> <div data-bbox="256 1532 1453 1650" data-label="Text"> <p>Random staff and shift supervisor indicated that the inmate that was in imminent danger would be separated from the accuser. The staff presented several options to include moving the victim to medical, intake or to the supervisor's office.</p> </div> <div data-bbox="256 1688 1423 1722" data-label="Text"> <p>All random staff indicated they would take immediate action to protect the victim.</p> </div> <div data-bbox="256 1760 1460 1879" data-label="Text"> <p>The facility administrator indicated staff will take immediate action to protect the inmate from further harm an make necessary referrals to medical and mental health as appropriate.</p> </div> <div data-bbox="256 1917 1466 2036" data-label="Text"> <p>The facility agency head indicated KCCF takes immediate action to protect the victim from further harm and refer him or her for necessary services (medical, mental health, etc.).</p> </div> <div data-bbox="256 2074 1439 2107" data-label="Text"> <p>Based on this analysis, the facility is substantially compliant with this provision and</p> </div>
--	--

	corrective action is not required.
--	------------------------------------

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>KCCF Policy 605 Prison Rape Elimination Act</p> <p>PAQ</p> <p>Interviews</p> <p>Agency head</p> <p>Facility administrator</p> <p>115.63 (a)-(c):</p> <p>PAQ requires the agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility or must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred.</p> <p>Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.</p> <p>The agency shall document that it has provided such notification.</p> <p>The facility provided policy 605</p> <p>If there is an allegation that an inmate was sexually abused while he/she was confined at another facility, the Commander of Corrections or the authorized designee shall notify the head of that facility as soon as possible but not later than 72 hours after receiving the allegation. The Commander of Corrections or the authorized designee shall ensure that the notification has been documented. A corrective action plan was required. The facility removed the “or the authorized designee” from the standard.</p> <p>According to the PAQ there have been no reports from a sending or receiving facility.</p> <p>115.63 (d)</p> <p>The PAQ requires The agency or facility policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards</p> <p>The facility provided</p>

	<p>Policy 605 requires that when the facility receives notification of alleged abuse or harassment, it is required to ensure that the allegation is investigated in accordance with the PREA standards.</p> <p>In interview with the agency head, all reports received will be reported to the sending facility administrator by the housing facility administrator within 72 hours.</p> <p>The facility administrator interviewed indicated they are aware of that responsibility. They indicated they would make notification to the sending facility and facility or local law enforcement investigator to investigate the allegation.</p> <p>According to the PAQ and statement of fact there have been no allegations by a receiving inmate that they had been sexually abused or harassed. According to an interview with the PREA compliance manager there have been no reports from another facility that an inmate made an allegation that occurred as El Centro Detention Facility.</p> <p>Based on this analysis, the facility was not substantially compliant with this provision and corrective action was required.</p> <p>The facility policy and practice were that the Commander of Corrections authorized designee could notify the sending facility.</p> <p>The facility has removed the authorized designee from the policy.</p> <p>Based on this corrective plan and further analysis, the facility was substantially compliant with this provision and no further corrective action was required.</p>
--	---

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>PAQ</p> <p>KCCF Policy 605</p> <p>PREA lesson plan</p> <p>Coordinated Response Plan</p> <p>Investigative Reports Log</p> <p>Interview</p> <p>Random Staff First Responders</p>

115.64 (a):

The PAQ requires Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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.

The facility provided

Policy 605.4 which states upon receipt of a report that a prisoner was sexual abused or sexual harassed, or if the employee sees abuse, the first security staff member to respond to the report shall:

- a. Sparate the alleged victim and abuser.
- b. Immediately notify the on- duty or on- call supervisor and remain on the scene until relieved by responding personnel.
- c. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
- d. 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.
- e. Do not let the abuser take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- f. If the first 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; remain with the alleged victim and notify security staff.
- g. It is important that all contact with the alleged victim be sensitive, supportive, and non-judgmental.
- h. Apart from reporting to designated supervisors, employees shall not reveal any information related to the incident to anyone other than to staff involved with investigating the alleged incident.

115.64 (b):

The PAQ requires If the first staff responder is not a security staff member, the

	<p>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>Based on the PAQ there was no first responder that was not a correctional staff member.</p> <p>Policy 605 requires that non correctional staff that are first responders are required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.</p> <p>All staff interviewed, including non- custody staff, were well aware of their responsibilities as first responders.</p> <p>All non-contact staff that were interviewed knew their duties and reported they received the training during yearly in service and on reminder training that is sent out by the PREA compliance managers from time to time. During the last 12 months there were 1 allegations of sexual abuse that were reported. This incident was reported to correctional staff.</p> <p>All staff interviewed, including non-custody staff, were well aware of their responsibilities as first responders. 100% of staff reported that they would immediately separate the inmates, keep the victims safe, do what they could to preserve a crime scene and advise involved inmates not to wash, shower, change clothing, brush teeth, eat, drink, or use the toilet. They all said they would also immediately call a supervisor and remain on the scene until relieved by responding personnel. All staff are trained as first responders and were issued a pocket card that lists the steps to take when responding to an allegation that a inmate was sexually abused.</p> <p>As an auditor I randomly tour the administrative, classification area and educational areas and ask staff if I could ask them a question. After reminding them that they don't have the answer the questions I ask them, "what would you do if a inmate came to you and said it was sexual assaulted". All staff were able to articulate they would follow the above requirements.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

	<p>KCCF Policy 605 – Prison Rape Elimination Act</p> <p>KCCF PREA Coordinated Response Plan</p> <p>Interview</p> <p>Facility Administrator</p> <p>115.65 (a):</p> <p>The PAQ requires facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>The facility provided:</p> <p>KCCF Policy 605 mandates that facilities have a coordinated response plan. KCCF Coordinated Response Plan provides written guidance to staff and administration regarding actions to take and notifications to be made. A PREA Incident Checklist for Incidents of Sexual Abuse and Harassment is completed to ensure that all steps of the plan are conducted, and proper notifications are made. The Coordinated Response Plan includes:</p> <p>The KCCF is a comprehensive plan that is provided as a brightly colored flow chart from the state of the allegation to the conclusion of the notification to the victim and prosecution of the abusers.</p> <p>Each of the responses includes but not limited to staff, contractors, victim advocates, investigators, and KCCF PREA coordinator.</p> <p>The Facility administrator indicated they the facility has a coordinated response plan that is updated yearly and is part of staff annual training.</p> <p>Staff interviewed confirmed that they are knowledgeable of the plan and the necessary actions to be taken in response to an allegation of sexual abuse.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon making the compliance determinations:</p> <p>KCCF Policy 605</p>

Collective Bargaining between Sheriff of Kane County, Board of Kane and Policemen's Benevolent Labor Committee.

Interview with

Agency Head

115.66 (a)(b)

The PAQ requires that Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

Nothing in this standard shall restrict the entering into or renewal of agreements that govern: (1) The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of §§ 115.72 and 115.76; or (2) Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated.

The facility provided

KCCF Policy 605 which states, "KCCF shall not enter into or renew any collective bargaining agreement or other agreement that limits a Facility's ability to remove alleged Employee sexual abusers from contact with any Individual in a KCCF Facility or Program pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted." The policies also state, "In every case where the alleged abuser is an Employee, Contractor or Volunteer, there shall be no contact with the inmate pending the outcome of an investigation." Review of investigations demonstrates that KCCF will separate the victim from the accused staff member in both sexual abuse and harassment usually by placing the staff member in a position where there would be no contact with the inmate. Per interviews and the Statement of Fact, Karn's sheriff's office has collective bargaining agreements. This agreement does not limit the ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation.

The agency head indicated that KCCF would not enter into or renew any collective bargaining agreement or other agreement that limits a Facility's ability to remove alleged Employee sexual abusers from contact with any Individual in a KCCF Facility or Program pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted

The facility administrator indicated he has the ability to remove a staff member pending an investigation or place employee in no contact status pending investigation.

Based on this analysis, the facility is substantially compliant with this provision and

	corrective action is not required.
--	------------------------------------

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>KCCF Policy 605 – Prison Rape Elimination Act Documentation of Monitoring</p> <p>Protection from Retaliation Logs</p> <p>PAQ</p> <p>115.67 (a):</p> <p>PAQ requires that the agency shall establish 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, and shall designate which staff members or departments are charged with monitoring retaliation.</p> <p>The facility provide policy KCCF Policy 605</p> <p>KCCF Policy 605 require All inmates and staff who report sexual abuse or sexual harassment, or who cooperate with sexual abuse or sexual harassment investigations, shall be protected from retaliation.</p> <p>Protective measures, including housing changes, transfers, removal of alleged abusers from contact with victims, administrative reassignment or reassignment of the victim or alleged perpetrator to another housing area, and support services for inmates or staff who fear retaliation shall be utilized.</p> <p>15.67 (b):</p> <p>The PAQ requires the agency 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.</p> <p>The facility provided:</p> <p>Protective measures, including housing changes, transfers, removal of alleged abusers from contact with victims, administrative reassignment or reassignment of</p>

the victim or alleged perpetrator to another housing area, and support services for inmates or staff who fear retaliation shall be utilized

The PREA compliance manager serves as part of the retaliation monitoring team. They indicated that as part of the initial meeting as soon as possible after being informed of an allegation the inmate is offered a chance to contact the Mutual Grounds advocacy center.

115.67 (c)

The PAQ requires for at least 90 days following a report of sexual abuse, the agency 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 agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

The facility provided:

The Commander of Corrections or the authorized designee or the authorized designee shall assign a supervisor to monitor, for at least 90 days, the conduct and treatment of inmates or staff who report sexual abuse or sexual harassment, as well as inmates who were reported to have suffered sexual abuse, to determine if there is any possible retaliation. The supervisor shall act promptly to remedy any such retaliation. The assigned supervisor should consider inmate disciplinary reports, housing or program changes, negative staff performance reviews or reassignment of staff members. If any other individual who cooperates with an investigation expresses a fear of retaliation, the facility shall take reasonable measures to protect that individual against retaliation.

115.67 (d):

The PAQ requires that In the case of inmates, such monitoring shall also include periodic status checks.

The facility provided:

Procedure also requires Monitoring of inmate including periodic status checks. The PREA compliance manager was interviewed and indicated they would review the monitoring logs on an ongoing basis and randomly will see the inmate during tour to check on his/her status.

The PCM indicated they receive a copy of the log and briefing from Mental Health staff. They also see the alleged victim as soon as possible after the allegation.

The agency head indicated in interview that the agency is proactive in protecting victims of sexual abuse or sexual harassment.

	<p>The facility administrator indicated the shift supervisor provides information to his office of the status of anyone that makes a report or has an allegation made against them.</p> <p>The PREA coordinator indicated that all allegations that are retaliated against by staff will be turned over to the Commander of Corrections and the Sheriff. They also indicated that staff that are accused of retaliation would be placed on administrative leave or with no contact status.</p> <p>115.67 (e):</p> <p>The PAQ requires that 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>The facility provided:</p> <p>Policy 605 indicates that if any other individual expresses a fear of retaliation, the facility shall take appropriate measures to protect that individual as well.</p> <p>115.67 (f):</p> <p>The PAQ requires an agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.</p> <p>The facility provided: policy 605</p> <p>Retaliation monitoring may be terminated if it is determined that the allegation was unfounded. The Retaliation monitor indicated that while the official monitoring will end, the facility would continue to check on the inmate for retaliation for making a report.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <p>KCCF Policy 605 – Prison Rape Elimination Act</p> <p>PAQ</p>

Interview with Facility Administrator

Staff that supervises segregation

Classification Sgt.

Inmate that made an allegation of sexual abuse

115.68 (a)

PAQ requires that the agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse 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.

KCCF Policy 605 requires involuntary segregated housing may be used only after an assessment of available housing alternatives has shown there is no other means of protecting the inmate. 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.

The facility provided:

KCCF Policy 605 – Prison Rape Elimination Act mandates any use of segregated housing to protect a prisoner who is alleged to have suffered sexual abuse or sexual harassment shall be subject to the requirements of standard 43 of this policy. This requirement is not limited to involuntary segregation and includes individuals who request protective custody because of an allegation of sexual abuse or sexual harassment.

Based on the PAQ an interview with the Staff that supervises the segregation unit, the Classification Sgt. and the facility administrator, the facility has not utilized voluntary or involuntary restrictive housing for a PREA related incident for protection of inmates for sexual abuse in the last 12 months.

There was one inmate that was a victim of a non criminal sex abuse that was interviewed. She indicated that she nor was the abuser placed in protective custody.

The classification Sgt. interviewed indicated that prior to placing anyone in the segregation unit the classification section would have to review the request, interview the inmate and authorize the placement. He indicated he had not known of a time when someone was place in involuntary segregation or any segregation status for fear of sexual abuse or retaliation for reporting sexual abuse.

The facility utilizes a Sexual Abuse/Assault Available Alternatives Assessment whenever an inmate claims he has been sexually assaulted or abused. The same form is utilized when inmates claim fear of being placed in general population due to sexual orientation during the intake process. The alternative assessment provides options for housing of inmates without utilizing the Segregation Unit.

The facility administrator provided a state of fact that the facility has not placed an inmate in involuntary segregation in restrictive housing during the last 12 months.

	<p>During the tour of the facility, the auditor reviewed the logbook which provided the purpose of all inmates housed in the segregation unit. There was no inmate that was housed in voluntary or involuntary confinement for allegations of sexual abuse or sexual harassment nor for fear of being sexually abused or harassed in general population.</p> <p>The facility administrator indicated that they would not utilize segregation to house victims of sexual abuse. He indicated that the facility is large enough that the facility can find appropriate housing for at risk inmates. He also indicated he would house the abuser in segregation. As a last resort if he could not protect the victim, he would require they be transferred. He indicated he has not had to transfer or house a victim in segregation since he was working at the facility.</p> <p>The Lt. that supervises the segregation unit indicated that there has not been anyone placed in segregation that was a victim of sexual abuse or at risk of being sexually abused.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making compliance determinations.</p> <p>KCCF Policy 605 PREA</p> <p>KCCF Policy 111</p> <p>Investigative files</p> <p>Interviews</p> <p>Facility administrator Investigators</p> <p>PREA coordinator</p> <p>PREA compliance manager</p> <p>115.71 (a):</p> <p>The PAQ requires the agency/facility has a policy related to criminal and administrative agency investigations.</p> <p>The facility provided policy 605</p>

Policy 605 mandates an administrative investigation, criminal investigation or both shall be completed for all allegations of sexual abuse and sexual harassment. Administrative investigation includes an effort to determine whether the staff's actions or inaction contributed to the abuse. All administrative and/or criminal investigations 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. Only investigators who have completed office-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases .

The investigative staff interviewed indicated that they first review the allegations and then notify the Major Crime division. If it is criminal in nature, they follow the response plan and protect the victim, crime scene and evidence. If it is administrative non-criminal investigation I begin as soon as a received the allegation. I handle anonymous or third party reports the same way.

115.71 (b):

The PAQ requires where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34

The facility provided KCCF Policy 605

KCCF Policy 605 requires that the facility shall use investigators who have received specialized training in Sexual Abuse investigations. The specialized training shall include techniques for interviewing Sexual Abuse victims, proper use of Miranda and Garrity warnings, Sexual Abuse evidence collection and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The facility has one trained investigator that has completed specialized training in the investigation of sexual abuse allegations in a confinement setting. The facility provided documentation of completion of specialized investigative training completed by facility investigator. The investigator was interviewed and was extremely knowledgeable regarding conducting investigations in a confinement setting. All investigation reviewed were conducted by trained investigators.

115.71 (c):

The PAQ requires 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.

The facility provided Policy 605 and Coordinated response plan

KCCF policy 605 mandates it is the responsibility of investigators to gather and preserve circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. Investigators will interview alleged

victims, suspected perpetrators and witnesses and review prior reports of sexual abuse involving the suspected perpetrator.

The facility investigator interviewed indicated that the first step is to review the allegation and then immediately make certain that the crime scene has been secured. This includes the victim, abuser, area. I then pull videos and start getting telephone information, and then interview the victim. I don't know how long this will last. If it involves law enforcement, I have to hold everything until they arrive.

15.71 (d):

The PAQ requires that when the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

The Investigator interviewed indicated that the major crime division conducts criminal investigation unless it involves staff. The Commander of Corrections or the Sheriff would then be consultant and refer the case to the Illinois State Police. The facility investigator would not conduct compelled interviews.

115.71 (e):

The PAQ requires the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

The facility provided KCCF 605

KCCF policy 605 indicates 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 a inmate or staff. Inmates alleging sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation

The investigator indicated they would base credibility on statements inconsistent with credible evidence, past history, and overall demeanor during the interview. The inmate is never required to take a polygraph or other truth-telling device.

115.71 (f):

The PAQ requires 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.

The facility provided KCCF policy 605 and investigative files

The administrative investigation will include an effort to determine whether staff actions or failures to act contributed to the abuse. The administrative investigation shall be documented in a written report and include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings.

The facility investigator interviewed indicated that an administrative investigation is conducted on all allegations of sexual abuse or sexual harassment. Part of that investigation includes an effort to determine whether staff actions or failures to act contributed to the abuse.

Documentation includes all direct evidence including videos, phone calls, and DNA. It includes all interviews, the original allegations, housing assignments, referrals to Law Enforcement, the client or KCCF Office of Professional Responsibility and everything that was gathered in the investigation. We also put a copy of the retaliation monitoring, notification and after-action report in the investigative files. We also make a final determination of the outcome of the investigation.

115.71 (g):

The PAQ requires 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.

A criminal investigation shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence. The facility shall request a copy of completed investigative reports from the major crimes division. Allegations will be tracked on the PREA Tracking Log.

There are 2 allegations of sexual abuse that was referred to the major crimes division. The major crime division determined that one was substantiated for sexual abuse, and one was unsubstantiated for sexual abuse but substantiated for simple battery.

115.71 (h):

The PAQ requires substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

KCCF policy 605 and 111 mandates substantiated allegations of conduct that appear to be criminal shall be referred for criminal prosecution.

According to information reported on the Pre-Audit Questionnaire and in interview with facility investigators, since the last PREA audit there one allegations of sexual abuse referred for prosecution. There was one allegation that was referred for simple battery.

115.71 (i):

The PAQ requires 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

	<p>employed by the agency, plus five years.</p> <p>The facility provided KCCF 605</p> <p>KCCF 605 requires that the agency retain all written reports as long as the alleged abuser is incarcerated or employed by the agency, plus five years.</p> <p>115.71 (j):</p> <p>The PAQ requires the departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.</p> <p>The facility provided KCCF Policy 111</p> <p>Policy 111 indicates in the event that a member tenders a written resignation or notice of retirement prior to the imposition of discipline, it shall be noted in the file. The tender of a resignation or retirement by itself shall not serve as grounds for the termination of any pending investigation or discipline.</p> <p>The facility investigator indicated in interview they would continue the investigation even if the previous staff member refuses to cooperate with the investigation. If it is an inmate, they would attempt to contact the inmate and witnesses if they are still in the county. We would continue the investigation.</p> <p>115.71 (l)</p> <p>The PAQ requires 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.</p> <p>The facility provided KCCF policy 605.</p> <p>When outside agencies investigate sexual abuse allegations, the facility will cooperate with investigators and will try to remain informed about the progress of the investigation. In an interview with the PREA Coordinator, he reported that the internal affair division and major crime division would work with the Illinois State Police to monitor the criminal complaint.</p> <p>There were 2 allegations of sexual abuse and 2 allegations of sexual harassment in the last 12 months. All allegations of sexual abuse were sent to the Major Crime division. Based on a review of the allegations, one was determined to be founded, and one was unsubstantiated for sexual abuse by substantiated for simple battery.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations</p> <p>KCCF Policy 605</p> <p>Report on Investigation</p> <p>Investigator training curriculum</p> <p>115.72 (a):</p> <p>The PAQ requires the agency 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 facility provided KCCF 605</p> <p>KCCF policy requires all completed written investigations shall be forwarded to the Commander of Corrections or the authorized designee or, if the allegations may reasonably involve the Commander of Corrections or the authorized designee, to the Sheriff or the authorized designee. The Commander of Corrections or the authorized designee or Sheriff or the authorized designee shall review the investigation and determine whether any allegations of sexual abuse or sexual harassment have been substantiated by a preponderance of the evidence.</p> <p>Based on interviews with investigators, investigators make a finding of Substantiated, Not Substantiated, Unfounded, or Pending Further Investigation. The findings will be made using the standard of proof of the preponderance of the evidence (51 % of the evidence). The Investigator must objectively review all the evidence which is in favor of or contrary to the finding. The investigator must objectively consider and balance the evidence in favor of or contrary to the finding; and to support a finding of sexual abuse or harassment by a preponderance of evidence. Investigators must be convinced that the evidence in favor of the finding outweighs the evidence against the finding, or is convinced that the evidence, when taken as a whole, shows that it is more probable than not that the alleged incident took place in this case.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations KCCF Policy 605

115.73 (a):

The PAQ requires following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

The facility provided:

KCCF policy 605.7.1 and a notification form

KCCF Policy 605.7.1 indicate that following an investigation of sexual abuse of a inmate, the inmate shall be informed in writing as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. The PREA Compliance Manager is responsible for preparing the Notification of Outcome of Allegation form and presenting it to the alleged victim for his signature. The inmate receives a copy of the form, a copy is placed in the investigative file and a copy is forwarded to the PREA Coordinator office. According to PCM, and a review of the investigative files confirmed there was notification provided to an inmate. There were two notifications to inmates found in the investigative files. The notification included inmates that left the facility and did not provide a mailing address.

115.73 (b):

The PAQ requires if the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate.

The facility provided KCCF policy 605.7.2

KCCF policy 605 stated if the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate.

According to policy and PREA compliance manager if the facility did not conduct the investigation, the facility shall request the relevant information from the investigative agency in order to inform the inmate.

115.73 (c):

The PAQ requires following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever: (1) The staff member is no longer posted within the inmate's unit; (2) The staff member is no longer employed at the facility; (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility

Policy 605.7.2 requires following an inmate's allegation that an employee has

	<p>committed sexual abuse against the inmate; the facility is required to inform the inmate of the outcome of the investigation. The inmate is to be informed if the staff member is no longer posted within the inmate's unit, if the staff member has been indicted on a charge related to sexual abuse within the facility or if the staff member has been convicted on a charge related to sexual abuse within the facility. There were no substantiated allegations of sexual abuse that resulted in the termination of a staff member.</p> <p>117.73 (d):</p> <p>The PAQ requires Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.</p> <p>KCCF policy and procedure requires following a inmate's allegation that he has been sexually abused by another inmate, the agency will inform the alleged victim if the alleged abuser has been indicated on a charge related to sexual abuse within the facility or if the alleged abuser has been convicted on a charge related to sexual abuse within the facility.</p> <p>There was one allegation of sexual abuse that was substantiated and the inmate victim was still at the facility. In the interview she indicated she was advised that the inmate had been released from custody.</p> <p>115.73 (e):</p> <p>The PAQ requires all Notification of Outcome of Allegations or attempted notifications are documented and filed in the corresponding investigative file.</p> <p>In interviews with the PREA compliance manager they meet with the inmate and explain the outcome of the investigation. This helps inmates know what an unsubstantiated allegation means in layman terms. There were two notifications to inmates located in the investigative file for the previous 12 months.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

KCCF Policy 605.7.1

Investigative Files

Interview with

Facility Administrator

PREA compliance manager

Facility Investigator

115.76 (a)(b):

PAQ requires Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

The facility provided KCCF Policy 605.7.1

Policy 605.7.1 outlines disciplinary, action and the employee disciplinary sanctions. The staff shall be subject to disciplinary sanctions, up to and including termination, for violating this policy. Termination shall be the presumptive disciplinary sanction for staff members who have engaged in sexual abuse. All discipline shall be commensurate with the nature and circumstances.

The interview with the KCCF facility administrator indicated there had been no adverse action taken against staff.

115.76 (c):

PAQ requires disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

The facility provided KCCF Policy 605.7.2

The policy mandates disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

11.76 (d):

PAQ requires 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, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies

The facility provided KCCF policy 605.7.2

	<p>Policy requires all terminations for violations of sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to the law enforcement agency that would handle any related investigation and to any relevant licensing bodies.</p> <p>The PREA compliance manager and facility investigator indicated that the facility has not had any adverse action against staff for PREA related incidents.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence relied upon in making the compliance determinations</p> <p>KCCF Corporate Policy 605.8.1</p> <p>PREA training curriculum</p> <p>PAQ</p> <p>Interview with the facility administrator</p> <p>115.77 (a):</p> <p>FAQ requires Any contractor or volunteer who engages in sexual abuse is 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 facility provided KCCF Policy 605.8.1</p> <p>KCCF Policy 605.8.1 mandates that any contractor or volunteer who engages in sexual abuse/sexual harassment would be prohibited from contact with inmates and would be reported to the appropriate investigator and law enforcement or relevant professional licensing/ certifying bodies unless the activity was clearly not criminal in nature. Any contractor or volunteer who engages in sexual abuse even though it was not criminal will be reported to professional licensing/certifying bodies.</p> <p>115.77 (b):</p> <p>The PAQ requires the facility takes appropriate remedial measures, and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>The facility provided KCCF Policy 605.8.2 and interview with the facility administrator.</p>

	<p>KCCF Policy 605.8.1 mandates that in cases that were not criminal in nature, the facility would take appropriate remedial measures and consider whether to prohibit further contact with inmates.</p> <p>During the previous year, there were no incident where a contractor or volunteer was accused of, suspected, or found guilty of sexual abuse or sexual harassment at KCCF.</p> <p>The facility administrator interview indicated he would take immediate action to remove the contractor or volunteer from contact with inmates. If it were a contractor, the administrator indicated he would notify the contractor's supervisor immediately.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.78	Disciplinary sanctions for inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>The following policies, directives and documentation were reviewed in formulating compliance with this standard:</p> <p>KCCF Policy 600 Inmate Discipline</p> <p>Inmate Handbook</p> <p>PREA Posters of Zero Tolerance</p> <p>115.78 (a):</p> <p>The PAQ requires 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 facility provided KCCF Policy 600, and inmate handbook</p> <p>KCCF inmate handbook outlines the rules and regulation and prohibited acts.</p> <p>There was one allegation of sexual abuse that was substantiated. The abuser received a disciplinary hearing for her action.</p> <p>KCCF policy 600 establishes Inmates who are subject to discipline as a result of rule violations shall be afforded the procedural due process established in the policies, procedures and practices relating to inmate discipline. All inmates will be made aware of the rules of conduct related to maintaining facility safety, security and order, as well as clearly defined penalties for rule violations. Staff will not engage in arbitrary actions against inmates. All disciplinary actions will follow clearly established</p>

procedures. All disciplinary sanctions will be fairly and consistently applied

Facility administrator interviewed indicated that sanctions are included as part of our internal disciplinary process or criminal sanction as opposed by law enforcement following a criminal finding of guilt.

115.78 (b):

PAQ requires 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 facility provided KCCF 600 states sanctions will be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.

115.78 (c):

The PAQ requires the disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

The facility provided KCCF Policy 600.4 which states the disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to the inmate's behavior when determining what type of discipline, if any, should be imposed.

Facility administrator interviewed indicated prior to the hearing, mental health staff evaluate the inmate to consider any mental disabilities or mental illness when determining sanctions.

Mental health staff interviewed indicated that prior to the disciplinary hearing or investigation staff will consider any mental disabilities or mental illness when determining sanctions. There has been a recent sexual harassment substantiated due to a mentally disabled inmate coming out of his room naked and harassing the other inmates by showing off his private parts. It was determined that he was mentally disabled and no administrative action was taken. 115.78 (d):

The PAQ requires If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

The KCCF facility does provide mental health interventions for its inmates. In discussion with mental health staff, generally the interventions are in group settings, but in cases of inmates with mental illness, one-on-one counseling can occur.

115.78 (e):

The PAQ requires the agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

	<p>The facility provided policy 600 which states no discipline may be imposed for sexual contact with staff unless there is a finding that the staff member did not consent to such contact</p> <p>115.78 (f):</p> <p>The PAQ requires 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.</p> <p>The facility provided 600.04</p> <p>Policy states no inmate may be disciplined for falsely reporting sexual abuse or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation, if the report was made in good faith based upon a reasonable belief that the alleged conduct occurred.</p> <p>115.78 (g):</p> <p>The PAQ requires an agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.</p> <p>The facility provided KCCF Policy 600.04 which state discipline may be imposed for sexual activity between inmates. However, such activity shall not be considered sexual abuse for purposes of discipline unless the activity was coerced.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required</p>
--	---

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations</p> <p>Wellpath Screening</p> <p>Wellpath Consent</p> <p>KCCF Policy 780. Health Appraisal and Screening</p> <p>Facility Intake Risk Assessment Referral to MH</p>

Consent for Mental Health Services form

Mental Health Evaluations

115.81(a).The PAQ requires If the screening pursuant to § 115.41 indicates that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

The facility provided KCCF Policy 708, Facility Intake Assessment, Referral to MH

KCCF Corporate Policy KCCF Policy 708 requires Following the initial medical screening provided in the Medical Screening Policy, inmates should receive and initial health appraisal within 48 hours and a comprehensive health examination within 14 days of incarceration. In addition, inmates should have an annual evaluation to reassess their health status.

Inmates who have an identified history of sexual victimization shall be offered a follow-up meeting with a qualified health care or mental health provider within 14 days of intake screening.

In the information reported on the Pre-Audit Questionnaire, 100% of the inmates assigned to the facility in the past 12 months who disclosed prior victimization were offered a follow-up meeting with the Mental Health Provider. At the time of the audit, there were three inmates that claimed prior victimization.

As part of the interviews of inmates included 8 inmates that were considered at risk of victimization by the classification division and mental health staff.

Each interviewed inmate indicated that they were seen by the mental health professional during their first or second days of arrival at the center.

Two inmates that had a history of victimization were interviewed. Each indicated they were interviewed by the nurse upon arrival at the facility and was asked about being a victim of sexual abuse or exploitation.

They indicated they had, and the medical staff notified the mental health staff. During the screening, they were asked the same question and indicated they had talked to Mental Health during medical reception screening.

They were seen shortly after the intake by a mental health professional. One of the victims refused mental health service. One of the inmates indicated they are still seeing mental health.

115.81 (b):

The PAQ requires 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, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.

	<p>KCCF is a jail, and this standard is not applicable.</p> <p>115.81 (c):</p> <p>The PAQ requires that 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</p> <p>The facility provided policy 708.02 which states Inmates who have an identified history of sexual victimization shall be offered a follow-up meeting with a qualified health care or mental health provider within 14 days of intake screening</p> <p>The center provided interview with mental health staff that indicated they see any inmates with a history of victimization within 72 hours of arrival.</p> <p>115.81 (e):</p> <p>The PAQ requires 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>The facility provided intake medical/ mental health evaluations including Consent for Service forms, interviews with medical and mental health staff.</p> <p>Medical and mental health staff have inmates sign for treatment of service upon arrival at the center. Based on interviews, medical and mental health staff indicated they would be required to get consent on reporting information about prior sexual victimization that did not occur in an institutional setting unless the victimization occurred when the inmate was under the age of eighteen.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations.</p> <p>KCCF Policy 605.3</p> <p>KCCF Policy 1003.2</p> <p>Coordinated Response Plan</p>

Medical and Mental Health assessments

Statement of Fact

Interviews with

Medical Staff

Mental Health

Staff First Responders

115.82 (a):

PAQ requires 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.

The facility provided Policy KCCF Policy 605.4 and mental health/medical staff interviews.

KCCF policy 605 states, "Victims of Sexual Abuse in custody shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services as directed by Medical and Mental Health Practitioners.

All services shall be provided without financial cost to the victim and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The auditor reviewed five mental health assessments. There were no SANE at the facility in the last three years.

Medical staff interviews indicated the facility has a medical staff on site twenty-four hours a day and utilizes Northwest Illinois Medical Center which has SANE staff on call 24 hours a day.

The mental health staff interviewed indicated they are on duty 16 hours a day and have on call staff at all other times.

115.82 (b):

The PAQ requires If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.

The facility provided KCCF Policy 605, KCCF Policy 1003.2 and first responder interviews.

All staff first responders are trained to take preliminary steps to protect the victim and notify medical and mental health practitioners. Both security and non- security staff interviewed knew their first responder duties. Forensic exams are not performed

	<p>by facility medical staff. Inmate victims of sexual abuse are referred to PMHCD for emergency treatment and Sexual abuse nurse examination.</p> <p>Policy 1003.4 requires</p> <p>115.82 (c)(d):</p> <p>The PAQ requires inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.</p> <p>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>The facility provided KCCF Policy 605.4</p> <p>Inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. All services are provided without financial cost to the victim, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Medical staff indicated that it is part of the SANE process and she would follow up when the inmate returns to the facility. There is no charge to the inmate for medical services.</p> <p>A MOU with Mutual Grounds Advocacy Services was established to provide crisis intervention services. All services are provided at no cost to inmates regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Medical Staff interviewed reported that victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. They also stated that once the report is received, the inmate would be seen immediately. The medical and mental health staff verified that the nature and scope of the treatment and crisis intervention services are determined by the professional judgment of the medical and mental health treatment staff. She also verified that they offer information about and timely access to sexually transmitted infections prophylaxis, where medically appropriate. An interview with a Mental Health Director verified that mental health also meets with an inmate within 24 hours of an alleged incident of sexual abuse to offer supportive counseling.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
---------------	--

	<div data-bbox="256 118 959 152" data-label="Section-Header"> <p>Auditor Overall Determination: Meets Standard</p> </div> <div data-bbox="256 197 542 230" data-label="Section-Header"> <p>Auditor Discussion</p> </div> <div data-bbox="256 275 1495 2033" data-label="Text"> <p>Evidence relied upon in making the compliance determinations</p> <p>KCCF Policy 605</p> <p>KCCF Policy 1003.2</p> <p>Medical assessment</p> <p>Mutual Grounds community based programs</p> <p>Mental Health evaluations</p> <p>115.83 (a):</p> <p>The PAQ requires the facility 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.</p> <p>The facility provided policy 605, 1003, medical and mental health staff interviews and mental health evaluations</p> <p>KCCF policy 605 outlines ongoing actions after reports of sexual abuse. Medical and mental health evaluations, and treatment where appropriate will be provided to all victims of sexual abuse that occur in any prison, jail, lockup or juvenile facility.</p> <p>According to interviews with medical and mental health staff. KCCF will offer medical and mental health evaluations (and treatment where appropriate) to all victims of Sexual Abuse that occurs in any prison, jail, lockup, or juvenile Facility.</p> <p>Policy 1003.2 requires The Commander of Corrections, or the authorized designee shall ensure that request forms are available and provided to inmates who request counseling services. All inmate requests for counseling shall be forwarded to the Lieutenant. If an inmate displays behavior indicating a need for counseling or crisis intervention services, the facility employee shall notify the Lieutenant. The Lieutenant shall assess the need and area of counseling and make a reasonable effort to provide the inmate with the requested counseling as soon as practicable with consideration given to facility security, scheduling and available resources. Inmates who are victims of a sexual abuse or harassment incident will be informed of the availability and continuity of counseling</p> <p>115.83 (b)</p> <p>The PAQ requires 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.</p> </div>
--	--

The facility provided policy 605, medical and mental health staff interviews

The mental health and medical staff interviews indicated that if an inmate went to the hospital for a SANE, the hospital would send a discharge summary and mental health evaluation with the inmate. The medical staff indicated they would call the clinical director and go over the discharge summary and carry out recommendations from the hospital. The mental health staff indicated they would conduct a mental health screening and develop a treatment plan and implement the services as required.

115.83 (c)(d)(f):

The PAQ requires the facility shall provide such victims with medical and mental health services consistent with the community level of care

The evaluation and treatment should include follow-up services, treatment plans, and (when necessary) referrals for continued care following a transfer or released These services shall be provided in a manner that is consistent with the level of care the individual receives in the community.

Per interview with the medical staff, they said the level of care provided is that least equal or better than community level of care. They also verified that victims of sexual abuse are offered information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, where medically appropriate Services are provided at no charge to the inmate. Per the Statement of Fact, KCCF has not had any instances of sexual abuse where ongoing medical and mental health services have been needed in the past 12 months.

The facility provides victims with medical and mental health care consistent with the community level of care, which was confirmed by interview of the nurse. The facility has full-time medical staff and 16 hours of mental health services with on-call mental health staff as needed. The facility provides emotional support through local victim advocacy program that provides a hotline and visits the center on a weekly basis.

Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

The facility provided policy 1300 .04, medical file review, mental health referrals and interview with medical and mental health staff.

Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

	<p>Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.</p> <p>Victims shall also be offered tests for sexually transmitted infections as medically appropriate. All services shall be provided without financial cost to the victim.</p> <p>Treatment service shall be provided to the victims without financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>115.83 (g):</p> <p>The PAQ requires 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>The facility provided policy 605</p> <p>Policy 605 clearly mandates that all services shall be provided without financial cost to the victim regardless of whether the victim names their abuser or cooperates with any investigation arising from the incident.</p> <p>115.83 (h)</p> <p>The PAQ requires All prisons 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.</p> <p>The facility provided policy 605</p> <p>Mental Health staff interviewed indicated that the facility meets with abusers and offer mental health serves when an allegation is substantiated. During the last 12 months, inmates that sexually abused inmates were move prior to the conclusion of the investigation.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required</p>
--	---

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations.</p> <p>KCCF Policy 605</p>

Incident Review Committee reports (2)

PAQ

115.86 (a):

The PAQ requires the facility 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.

The facility provided KCCF Policy 605 and Incident Review Committee review.

KCCF policy 605 requires facility to conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation in which the allegation has been determined to be substantiated or unsubstantiated. In the last 12 month that were 2 investigations that required an incident review team meeting. KCCF has developed an Incident Review Committee report that contains all the elements of an incident review team meeting.

115.86 (b)

The PAQ requires the review is conducted within 30 days of the conclusion of the investigation.

The facility provided Policy 605

KCCF Policy 605 mandates the review is conducted within 30 days of the conclusion of the investigation.

A review of all the Incident Review Committee reports found they were completed within 30 days after the complete investigation.

115.86 (c):

The PAQ requires the review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

The facility provided KCCF Policy 605, and after action report which included sign in sheet for participants.

The Incident Review Committee consists of the Facility Administrator, Commandar of Corrections, PREA Compliance Manager, Lead Investigator, Classification Supervisor, and the nurse.

115.86 (d):

The PAQ requires 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 facility head and PREA compliance manager.

The facility provided, KCCF Policy 605, and incident review team reports.

A review of the Incident Review Committee documented that the team considers whether the incident was motivated by race, ethnicity, gender identity, perceived status or gang affiliation. The team examines the area where the incident was alleged to have occurred and assesses whether physical barriers in the area may have contributed to the abuse, whether monitoring technology should be deployed or augmented and whether the staffing levels at the time of the incident were adequate.

The PREA compliance manager serves on the committee and works with the team to 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 facility head and PREA compliance manager. There were four after-action reports completed during the last 12 months.

115.86 (e):

The PAQ requires the facility shall implement recommendations for improvement, or shall document its reasons for not doing so.

The facility provided KCCF Policy 605, and after- action report

In interviews with the facility administrator and PREA compliance manager. As part of the after action report the facility submits the report to the Commander of Corrections office for approval.

The facility then develops and implements Corrective Action Plan. The facility completes the corrective action plan and submits the completed documentation to the facility administrator's office.

A review of the incident review team included all areas of this standard. The latest review made additional recommendations on operations of the intake area and modification on the intake modules.

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.87	Data collection
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 1445 376">Evidence relied upon in making the compliance determinations KCCF Annual Report</p> <p data-bbox="256 409 520 443">PREA Tracking Log</p> <p data-bbox="256 488 485 521">KCCF Policy 605</p> <p data-bbox="256 555 547 589">Annual Assessment</p> <p data-bbox="256 633 416 667">115.87 (a):</p> <p data-bbox="256 701 1461 813">The PAQ requires the agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</p> <p data-bbox="256 857 1171 891">The facility provided KCCF Policy 605 and annual report for 2024</p> <p data-bbox="256 925 1466 1037">Policy 605 require the incident-based data collected shall include, at 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="256 1081 416 1115">115.87 (b):</p> <p data-bbox="256 1149 1461 1227">The PAQ require the agency shall aggregate the incident-based sexual abuse data at least annually.</p> <p data-bbox="256 1272 783 1305">The facility provided KCCF Policy 605</p> <p data-bbox="256 1339 1466 1664">KCCF policy mandates that the Facility PREA Compliance Managers shall be responsible for compiling data collected on Sexual Activity, Sexual Harassment and Sexual Abuse incidents and forwarding statistical reports to the Corporate PREA Coordinator. The PREA Compliance Manager ensures that the data is compiled and forwarded to the PREA Coordinator monthly on the Monthly PREA Incident Tracking Log. In addition to submitting the Monthly PREA Incident Tracking Log, the PREA Compliance Manager ensures that a PREA Survey is created, updated, and submitted for review and approval.</p> <p data-bbox="256 1709 1126 1742">At least annually, the PREA Coordinator aggregates this data.</p> <p data-bbox="256 1776 456 1809">115.87 (c)(d):</p> <p data-bbox="256 1843 1466 1955">The PAQ requires 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="256 2000 1422 2078">The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse</p>

	<p>incident reviews.</p> <p>The facility provided Policy 605 and Annual Report</p> <p>Policy 605 mandates the data collected, will be at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Bureau of Justice Statistics (BJS). A review of the annual report codified this requirement. The agency 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>In interview with the PREA coordinator all allegations of sexual abuse and sexual harassment or reviewed by the regional PREA coordinator team members, the corporate investigative unit, facility administrator and regional supervisor. The yearly report is reviewed during the facility PREA assessment.</p> <p>115.87 (e):</p> <p>The PAQ requires the agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.</p> <p>This provision of this standard is not applicable to this facility. The agency does not contract for the confinement of inmates.</p> <p>115.87 (f):</p> <p>Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.</p> <p>According to an interview with the PREA coordinator, upon request, KCCF shall provide such data from the previous calendar year to the Department of Justice no later than June 30. The facility provided a copy of the monthly log and annual log for review. The log contained all elements required by policy.</p> <p>The database utilized by the center is part of the kiosk reporting database. The center database was shrewd as there were 30 non PREA complaints that were captured as PREA. These non PREA complaints were reviewed by the facility investigator and PCM. The facility investigator investigated the report and notified the inmates that the allegations were non PREA. The center had updated the report to include PREA related sexual abuse and sexual harassment allegations.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations KCCF Policy 605 KCCF Annual PREA Data Report 2024

PREA Annual Report 2024.

115.88 (a):

The PAQ requires the agency shall 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: (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

The facility provided KCCF Annual PREA Data Report 2024 and Policy 605

KCCF Policy states, "KCCF shall review all data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: 1. Identifying problem areas; 2. Taking corrective action on an ongoing basis; and 3. Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

Such reports shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of KCCF's progress in addressing sexual abuse. The annual report shall be approved by the appropriate divisional authority and made readily available to the public

upon approval, at least annually through KCCF's website or the client's website as required by contract. KCCF may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted.

The annual reported indicated that in subsequent years, the information collected for this report will be used to identify problems areas and to take corrective action on an ongoing basis.

This is the first year that the facility has implemented PREA standards and have not maintained prior sexual abuse or sexual harassment data. It was recommended that the facility review the achieved investigative files and update the annual report to capture this information.

The agency head interview indicated that reports shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse.

The agency coordinator interview indicated that any recommendations for improvement, problem areas identified, or corrective actions needed are documented

	<p>and forwarded to the PREA team for review.</p> <p>115.88 (b):</p> <p>The PAQ requires such report shall include a comparison of the current year’s data and corrective actions with those from prior years and shall provide an assessment of the agency’s progress in addressing sexual abuse.</p> <p>The facility provided that 2024 was the first year the facility has completed an annual report. The facility implemented all PREA standards in January 2024.</p> <p>115.88 (c):</p> <p>The PAQ requires the agency’s report shall be 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.</p> <p>The facility provided KCCF Policy 605 and KCCF Annual PREA</p> <p>The PREA Coordinator forwards the annual report to the Facility Administrator and agency head.</p> <p>The agency head and PREA coordinator interviews indicated our annual PREA reports are approved by the Commander of Corrections.</p> <p>A review of the annual reports verified the information provided by these interviews.</p> <p>115.88 (d):</p> <p>The PAQ requires The agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.</p> <p>The facility provided KCCF Policy 605 and KCCF Annual PREA Data Report 2024</p> <p>Before making aggregated sexual abuse data public, all personal identifiers are redacted as stated on the last page of KCCF’s annual report.</p> <p>The PREA coordinator interviewed indicated that KCCF only reports statistical data and incident types, excluding personally identifiable information for confidentiality purposes</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations

KCCF Policy 605

KCCF Annual PREA Data Report

Interviews with

PREA compliance manager

PREA Coordinator

115.89 a):

The PAQ requires the agency shall ensure that data collected pursuant to § 115.87 are securely retained.

The facility provided KCCF Policy 605 and interview with PREA compliance manager and PREA coordinator

KCCF Policy 605 mandates all case records associated with claims of sexual abuse are maintained and filed in a secure file cabinet in the PREA compliance manager's office. During the tour of the facility, the auditor noted that the PREA compliance office was locked in each visit by her office. The auditor noted that all computers in the case manager, medical and mental health areas were closed if no one was in the offices

The agency head interviewed indicated that KCCF has a secure inmate tracking portal with restricted access to retain all the PREA data.

115.89 (b):

The PAQ requires the agency shall 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.

KCCF is a jail and has only one facility. The PREA coordinator was interviewed. He indicated the sheriff's office has a website and PREA information is placed on this website. He indicated that he had sent the annual report for publishing on the website.

The auditor reviewed the website and did not have this information uploaded during the onsite audit.

115.89 (c):

The PAQ requires before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.

The facility provided KCCF PREA Policy 605 and interview with PREA coordinator.

Before making aggregated sexual abuse data public, KCCF removes all personal

	<p>identifiers. This was confirmed by reviewing KCCF annual reports.</p> <p>The PREA coordinator interviewed indicated that KCCF only reports statistical data and incident types, excluding personally identifiable information for confidentiality purposes</p> <p>115.89 (d):</p> <p>The PAQ requires the agency shall maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.</p> <p>The facility provided KCCF Policy 605</p> <p>KCCF Policy mandate data collected pursuant to this procedure shall be securely retained by the Facility for at least 10 years or longer if required by state statute.</p> <p>Before making aggregated Sexual Abuse data publicly available, all personal identifiers shall be removed. All case records associated with claims of sexual abuse, including incident reports, investigative reports, inmate information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/ or counseling are retained in accordance with Federal and State statutes and guidelines specified by contract authority.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	---

115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence relied upon in making the compliance determinations.</p> <p>KCCF Policy 605</p> <p>115.401 (a):</p> <p>The PAQ requires during the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once.</p> <p>The facility provided KCCF policy 605</p>

KCCF policy 605 - states, "During the three-year period starting on August 20, 2013, and each three-year period thereafter, KCCF's Contract Compliance Department shall ensure that each Facility is audited at least once by a PREA

Auditor who has been certified through the Department of Justice." KCCF's Contract Compliance Department ensures that a PREA auditor who has been certified through the Department of Justice audits each facility at least once. This is the first PREA audit of Kane County Correctional Facility.

115.401 (b):

The PAQ requires During each one-year period starting on August 20, 2013, the agency shall ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.

According to KCCF's PREA Coordinator and the annual PREA report, this is the first audit of the facility.

115.401 (h):

The PAQ requires the auditor shall have access to, and shall observe, all areas of the audited facilities.

The auditor had full, unfettered access to all data and documentation, all staff and inmates, and all contractors and volunteers. Access to inmate, staff, investigative files, and training records, intake, classification, and risk assessments records were made available throughout the audit process. The auditor was provided various logs, including allegations, referrals to medical and mental health, and retaliation monitoring. Housing logbooks that showed unannounced rounds, inmate movement, and other operational information for each housing location were available. All interviews, random staff and inmates, targeted inmates and specialized staff were conducted in a private manner. There were no refusals for interviews. Sexual safety and the safety of staff and inmates at the KCCF is top priority. All areas of the facility were observed during the original tour of the facility. During the on-site audit the auditor retoured several areas of the facility. Staff and inmates were randomly interviewed during the tour. The facility staff allowed the auditor unfettered access to talk to staff and inmate privately.

115.401 (i):

The PAQ requires the auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information).

I requested personnel files, inmate files, training records, investigation files, logbooks, and pertinent forms utilized to conduct the requirement of the audit process. The facility allowed the audit to review personnel files and mark documents needed from each of the files reviewed. The facility uploaded these files in the OAQ portal. All other documentation required was provided to the auditor in a timely manner.

	<p>115.401 (m):</p> <p>The PAQ requires the auditor shall be permitted to conduct private interviews with inmates.</p> <p>I interviewed specialized staff, random staff, random inmates, and targeted inmates during the onsite audit. Interviews were conducted in a private office and classroom area of the facility.</p> <p>115.401 (n):</p> <p>The PAQ requires inmates shall be permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.</p> <p>Inmates were notified a minimum of six weeks prior to the onsite audit on posted facility notices in English and Spanish that they could send confidential correspondence to the Auditor. Interviews with inmates stated they have seen posting. No inmate contacted the Auditor prior to or during the audit.</p> <p>Documents were either provided to the auditor or uploaded to OAS in an extremely timely manner. Information found in the OAS system was no longer available for the audit and the facility had to send all of the previous information to the auditor Post onsite audit. The PREA compliance manager was instrumental and had identified staff available with limited down time for the auditor. Files reviewed contain all information required and had been organized for PREA auditor's review. Staff interviewed were open and forthcoming without hesitation or coercion.</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
--	--

115.403	Audit contents and findings
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>This is the only facility operated by the Kane County Sheriff's office.</p> <p>In interview with the PREA coordinator, the facility will upload this audit only the Kane County Sheriff's office website.</p>

Appendix: Provision Findings**115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
--	-----

Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
---	-----

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

Has the agency employed or designated an agency-wide PREA Coordinator?	yes
--	-----

Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
--	-----

Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
--	-----

115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
---	-----

Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
---	-----

115.12 (a) Contracting with other entities for the confinement of inmates

If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	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	yes
---	-----

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

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

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

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

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

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

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

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

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

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

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

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

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

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

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

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

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

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

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

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

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

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

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
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.)	na
	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.)	na
	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.)	na
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.)	na
	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.)	na
	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.)	na
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.)	na
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(f)			
	<table><tr><td data-bbox="316 174 1289 568">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.)</td><td data-bbox="1289 174 1490 568">na</td></tr></table>	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.)	na
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.)	na		