

PREA Facility Audit Report: Final

Name of Facility: Kulani Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: 01/08/2025

Date Final Report Submitted: 04/21/2025

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Deborah Striplin	Date of Signature: 04/21/2025

AUDITOR INFORMATION	
Auditor name:	Striplin, Deborah
Email:	dstriplin@doc.nv.gov
Start Date of On-Site Audit:	12/02/2024
End Date of On-Site Audit:	12/03/2024

FACILITY INFORMATION	
Facility name:	Kulani Correctional Facility
Facility physical address:	P.O. Box 4459, Hilo, Hawaii - 96720
Facility mailing address:	Kulani Correctional Facility, P.O. Box 4459, Hilo, Hawaii - 96720

Primary Contact

Name:	pepe Ignacio
Email Address:	Pepe.U.Ignacio@hawaii.gov
Telephone Number:	8089324437

Warden/Jail Administrator/Sheriff/Director	
Name:	Kenneth Rowe
Email Address:	kenneth.m.rowe@hawaii.gov
Telephone Number:	808-932-4433

Facility PREA Compliance Manager	
Name:	Pepe Ignacio Jr
Email Address:	pepe.u.ignacio@hawaii.gov
Telephone Number:	808-932-4437
Name:	Mary Keala
Email Address:	mary.c.keala@hawaii.gov
Telephone Number:	808-932-4437

Facility Health Service Administrator On-site	
Name:	Jennifer Simeona
Email Address:	jennifer.k.simeona@hawaii.gov
Telephone Number:	808-932-4463

Facility Characteristics	
Designed facility capacity:	200
Current population of facility:	79
Average daily population for the past 12 months:	80

Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Mens/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:	21-68
Facility security levels/inmate custody levels:	Community and minimum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	65
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	2
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	2

AGENCY INFORMATION	
Name of agency:	Hawaii Department of Corrections and Rehabilitation
Governing authority or parent agency (if applicable):	
Physical Address:	1177 Alakea Street, Honolulu, Hawaii - 96813
Mailing Address:	

Telephone number:	
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Agency Chief Executive Officer Information:	
Name:	Tommy Johnson
Email Address:	tommy.johnson@hawaii.gov
Telephone Number:	808-587-1339

Agency-Wide PREA Coordinator Information			
Name:	Cheyenne Evans	Email Address:	cheyenne.l.evans@hawaii.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:	
0	
Number of standards met:	
45	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-12-02
2. End date of the onsite portion of the audit:	2024-12-03

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:	For the pre-onsite phase, the auditor spoke to the charge nurse at Hilo Medical Center and the Sexual Abuse Treatment Center (SATC) on the island of Oahu. Several attempts were made to connect with the YWCA community victim advocate on the Island of Hawaii—Hilo. The auditor also attempted to contact Just Detention International.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	200
15. Average daily population for the past 12 months:	80
16. Number of inmate/resident/detainee housing units:	8
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	80
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:	1
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:	2
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:	0
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:	0
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:	0

<p>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:</p>	<p>0</p>
<p>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:</p>	<p>0</p>
<p>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:</p>	<p>0</p>
<p>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:</p>	<p>0</p>
<p>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):</p>	<p>For the onsite phase of the audit on day one, the PCM provided offender rosters separated by housing unit and those tracked for target areas. Due to the specific criteria to be housed at this facility, the auditor increased random offender interviews. The auditor identified areas of concern and addressed within this audit report under standards 115.16, 115.33, and 115.41.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>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:</p>	<p>27</p>
<p>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:</p>	<p>0</p>

<p>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:</p>	<p>0</p>
<p>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:</p>	<p>For the onsite phase of this audit, the facility did not have contractors or volunteers scheduled to be onsite. This was supported by audit team observations and interviews with staff and offenders.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>17</p>
<p>35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>

<p>36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>For the pre-onsite and onsite phase of this audit, the auditor followed the Department of Justice Auditor Handbook version 2.1 for the number of offender interviews and required a minimum of 20 interviews (10 random and 10 specialized/target). This facility houses male offenders who do not have significant mental or physical disabilities. On day one of the onsite audit, the PCM provided offender rosters separated by housing unit to the auditor who selected a diverse population of offenders from each housing unit. Additionally, offender rosters for those falling under the target interview criteria ensured the auditor was able to select those offenders a separate interviews. The audit team members utilized the PRC offender random and target protocol guides for all interviews.</p>
<p>37. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>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):</p>	<p>Due to the specific criteria to be assigned at this facility, they did not have many offenders for target interviews increasing the number of random interviews.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>5</p>

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

<p>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:</p>	<p>2</p>
<p>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:</p>	<p>2</p>
<p>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:</p>	<p>0</p>
<p>42. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>42. 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>For the onsite phase of the audit, the audit team observed offenders during the physical plant review in addition to the documentation provided, interviews with staff and offenders supported the finding that the facility did not have offenders who were blind or had low vision.</p>
<p>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:</p>	<p>0</p>
<p>43. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>43. 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>For the onsite phase of the audit, the audit team observed offenders during the physical plant review in addition to the documentation provided, interviews with staff and offenders supported the finding that the facility did not have offenders who were deaf or hard of hearing.</p>
<p>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:</p>	<p>1</p>
<p>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:</p>	<p>0</p>

<p>45. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>45. 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>For the onsite phase of the audit, the audit team observed offenders during the physical plant review in addition to the documentation provided, interviews with staff and offenders supported the finding that the facility did not have offenders who self-identified or were perceived to be gay or bisexual.</p>
<p>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:</p>	<p>0</p>
<p>46. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>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>For the onsite phase of the audit, the audit team observed offenders during the physical plant review in addition to the documentation provided, interviews with staff and offenders supported the finding that the facility did not have offenders who self-identified or were perceived to be Transgender or Intersex.</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>0</p>

<p>47. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>47. 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>Preonsite review this facility did not have any reported incidents of sexual abuse during the twelve-month time frame up to the onsite audit. For the onsite phase of the audit, the audit team observed offenders during the physical plant review in addition to the documentation provided, interviews with staff and offenders supported the finding that the facility did not have offenders who reported sexual abuse at this facility.</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>0</p>
<p>48. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>48. 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>For the onsite audit, the documentation provided and interviews with staff and offenders supported the finding that the facility did not have offenders who reported a history of sexual victimization assigned to the facility.</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>
<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).</p>	<p>Preonsite review this facility did not have any reported incidents of sexual abuse during the twelve-month time frame up to the onsite audit. Onsite interviews with staff and offenders and observations during physical plant review, supported the finding that the facility did not have offenders who reported sexual abuse at this facility and none who had been housed in segregation.</p>
<p>50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>Onsite and selected offenders for target interviews, the documentation provided did not have any LEP offenders tracked. During staff interviews, the lead auditor learned the facility had at least one offender who did not speak English and conflicted with the documentation provided. Refer to standard 115.16.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>51. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>15</p>

<p>52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>53. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>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):</p>	<p>For the onsite audit phase, the PCM provided staff shift rosters to the auditor for the staff working for both days of the onsite audit and for all shifts. The audit team utilized the rosters, selecting random staff from all shifts and it was found many staff were working overtime on back-to-back shifts, limiting the number of staff available for interviews.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>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.</p>	
<p>55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>14</p>
<p>56. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
58. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
59. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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 type="radio"/> Yes <input checked="" type="radio"/> No
62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
63. Provide any additional comments regarding selecting or interviewing specialized staff.	<p>For the pre-onsite phase of the audit, the auditor interviewed the KCF PREA Compliance Manager virtually. The PCM is responsible for many components requiring the auditor to utilize three target interview protocols. Additionally, the facility did not have any reported incidents of sexual abuse to interview a first responder, however, first responder questions are included in the random staff interview protocols.</p>

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: 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?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Was the site review an active, inquiring process that included the following:

<p>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)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>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)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>67. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>68. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>

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).

December 2, 2024, was the first day of the onsite phase of the audit. The audit team arrived around 0530 along with the agency PREA Coordinator and met with the facility supervisor who escorted the audit team to the conference room. The audit team was provided with two separate offices to begin 1st watch random staff and supervisor interviews. After the interviews, the audit team met with the facility PREA Compliance Manager, their backup, and the Warden for a brief overview of the onsite process, interim report time frame, corrective action, and final report time frames. After the meeting, the onsite review commenced with the audit team escorted by the PCM, PREA Coordinator, and backup PCM for the physical plant review. The team reviewed all housing units, work and program areas, and other buildings. Upon entering offender housing units staff completed cross-gender announcements and the audit team made observations including but not limited to the PREA audit notifications in English, PREA posters and reporting options, posters for the community victim advocate, reviewing the unannounced supervisor shift log entries and tested critical functions (i.e. internal/ external reporting methods and outside emotional support service hotline). During the physical plant review, the audit team spoke to staff and offenders including observing interactions between offenders and staff with offenders. Day two of the onsite review consisted of final interviews with staff and offenders, document review, and onsite audit out brief. During the out brief, the auditor discussed positive things observed and learned through informal and formal interviews.

Documentation Sampling

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

<p>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?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>71. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>No text provided.</p>
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

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	1	0	1	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	1	0	1	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	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	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

Sexual Harassment Investigation Outcomes

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

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	1	0	1	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	1	0	1	0

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:	0
78. Explain why you were unable to review any sexual abuse investigation files:	The facility did not have any reported incidents of sexual abuse.

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

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

Staff-on-inmate sexual harassment investigation files	
91. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
92. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files)
93. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files)
94. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The facility did not have any reported incidents of staff on-offender sexual abuse or sexual harassment. Additionally, the facility did not have any reported incidents of offender on offender sexual abuse.
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.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff	
<p>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-on-site through the post-on-site phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>96. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:</p>	<p>1</p>
AUDITING ARRANGEMENTS AND COMPENSATION	
<p>97. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input checked="" type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
<p>Identify your state/territory or county government employer by name:</p>	<p>Nevada Department of Corrections</p>
<p>Was this audit conducted as part of a consortium or circular auditing arrangement?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

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>The auditor triangulated relevant documentation, interviews, and available evidence to determine compliance with this standard. In reviewing policies, "Offender", and "Inmate" are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as "Offender." On January 1, 2024, the Department of Public Safety (PSD) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> DCR policy ADM.08.08: Prison Rape Elimination Act (PREA) DCR policy COR.13.03: Adjustment Procedures Governing Serious Misconduct Violations and the Adjustment of Minor Misconduct Violations Agency organization chart Facility organization chart <p><u>Interviews</u></p>

- Agency PREA Coordinator
- Facility PREA Compliance Manager

(a) DCR ADM.08.08 outlines the department's approach to ensure compliance PREA through the application of a zero-tolerance towards all forms of sexual abuse, sexual harassment, and retaliation for reporting incidents in a PSD prison, jail, lockup, and community correctional centers. Pages 6 – 14 of the DCR PREA policy include definitions to include but not limited to prohibited behaviors of sexual abuse, sexual harassment, and retaliation. The policy references to “staff members” encompasses contractors and volunteers.

(b) DCR has designated a Litigation Coordination Office, a branch of the Director’s Office, to manage PREA. The Litigation Coordination Officer in the capacity of an upper-level staff member has been designated to serve as the Department PREA Coordinator.

For the pre-onsite phase, the auditor interviewed the Agency PREA Coordinator and stated they have sufficient time and authority to develop, implement, and oversee the agency's efforts to comply with the PREA standards. The PREA Coordinator maintains consistent and regular communication with the facility PREA compliance managers and has direct access to the executive leadership. The Director affirmed that the agency has appointed a PREA Coordinator, and they have direct contact and communication with the executive leadership.

(c) DCR requires each facility to have a designated Facility PREA Compliance Manager (PCM) with sufficient time and authority to coordinate its efforts to comply with the PREA Standards, which may be part of their related duties.

For the pre-onsite phase, the auditor interviewed the PCM utilizing the PCM interview protocol. This facility recently designated a new PCM, approximately four months before the onsite audit review and in addition to the role of PCM, they have other assigned duties. They have prioritized PREA and learning the PCM responsibilities and have sufficient time to coordinate the facility's efforts to meet compliance. PCM has support from the Warden and other supervisors and implemented a PREA team to assist with the facility's PREA program. While the PCM is new they appeared eager to continue learning and taking on challenges for improving the facility's PREA program.

During the onsite phase of the physical plant review, the audit team observed PREA information posted in all housing units, the visiting room, and program/work areas. Random facility staff, and random and target offenders interviewed affirmed knowledge and understanding of the agency's zero-tolerance policy. There was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.

115.12	Contracting with other entities for the confinement of inmates
	<p data-bbox="256 188 959 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 544 300">Auditor Discussion</p> <p data-bbox="256 340 1469 582">The auditor triangulated relevant documentation, interviews, and available evidence to determine compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p data-bbox="256 622 900 658"><u>Policy(s) and supporting documentation</u></p> <ul data-bbox="331 725 1385 1008" style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • DCR contract with CoreCivic, Saguaro Correctional Facility, Eloy Arizona. • Saguaro Correctional Facility Final PREA audit report • DCR and U.S. DOJ Bureau of Prisons contract • U.S. DOJ Bureau of Prisons, FDC Honolulu Final PREA audit report • Agency public website • Saguaro compliance checklist <p data-bbox="256 1048 427 1084"><u>Interviews</u></p> <ul data-bbox="331 1151 820 1227" style="list-style-type: none"> • Agency PREA Coordinator • Agency Contracts Administrator <p data-bbox="256 1308 1398 1464">(a) ADM.08.08 requires that any new contracts or contract renewals with private agencies or other entities for the confinement of DCR’s offenders shall include language that the private entity adopts and comply with PREA, specifically the finalized PREA Standards.</p> <p data-bbox="256 1505 1474 1711">(b) ADM.08.08 states that the private entity shall be subject to DCR monitoring/audits as part of its contract with DCR to ensure compliance with the PREA Standards. The policy also requires that the private entity is responsible for complying with the audit requirements of the PREA Standards and any cost associated with audits as required by standards §115.401 to §115.404.</p> <p data-bbox="256 1751 1461 2069">For the pre-onsite phase, the auditor reviewed the agency's public website and located the agency's audit compliance checklist. The compliance checklist includes and is not limited to the facility receiving DOJ PREA audits. The agency has posted contracted facility information for Core Civic, Saguaro Correctional Center, FDC Honolulu, and their final PREA audit reports. The agency has an open-ended contract with the U.S. Department of Justice, Federal Bureau of Prisons (FBOP) to house DCR offenders in the Federal Detention Center (FDC) Honolulu. There is an understanding by this auditor that all FBOPs are required to comply with the National Standards</p>

	<p>upon their release in August 2012. During this audit time frame, DCR did not have any offenders housed at FDC and was informed they have not had any offenders housed at this facility over the last three years.</p> <p>The lead auditor interviewed the Agency Contract Administrator who stated they oversee the staff assigned to the contracts division. The contracts division has four contract monitors responsible for conducting quarterly onsite audit inspections at the Saguaro Correctional Center in Eloy, Arizona. The agency employs one onsite contract monitor at the Saguaro facility and they have direct contact and oversight of contract compliance. Contract staff attend the weekly Warden’s meeting and receive notifications if one of their offenders reports an allegation of sexual abuse and sexual harassment. Contract facilities provide copies of all reported incidents and investigation reports to DCR. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence to determine compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Facility Staffing Plan • Housing and program area log books <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Warden • PREA Compliance Manager • PREA Coordinator • Target Supervisors • Random Staff <p>(a) ADM.0808 requires that the Department PREA Coordinator, in conjunction with the</p>

Institutions Division Administrator (IDA) will ensure that each facility develops, documents, and makes its best efforts to comply on a regular basis with a written staffing plan. The review must include that the facility provides for adequate levels of staffing, and where applicable, video monitoring, to protect inmates against sexual abuse and that the facility takes into consideration the following:

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. Generally accepted detention and correctional practices;
9. Any judicial findings of inadequacy;
10. Any findings of inadequacy from federal investigative agencies;
11. Any findings of inadequacy from internal or external oversight bodies;
12. All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated);
13. The composition of the inmate population;
14. The number and placement of supervisory staff.

Pre-onsite target staff interviews confirmed the facility leadership and designated supervisors continuously review and assess the facility staffing.

(b) ADM.08.08 indicates that in circumstances where the facility's written staffing plan is not complied with, the facility will document by utilizing the PREA Mandated Reporting Form (DCR 8317) to justify all deviations from the plan and forward them to the PREA Coordinator.

(c) ADM.08.08 indicates the Warden will review the facility's written staffing plan annually in the month of July, the start of the fiscal year, and submit his/her assessment to the Department PREA Coordinator by the end of the month. The Department PREA Coordinator will schedule a formal meeting to review the written staffing plan which shall consist of assessing, determining, and documenting whether adjustments are needed to the following.

- The written staffing plan
- The facility's deployment of video monitoring systems and other monitoring technologies; and
- The resources the facility has available to ensure adherence to the staffing plan.

For the pre-onsite phase target interviews and documentation confirmed that the facility completes and submits the annual report to the PREA Coordinator. The number of staff designated at each facility is approved by the State of Hawaii

	<p>Legislative Bodies, and staffing is based on the offender population.</p> <p>(d) ADM.08.08 requires the Warden to ensure that lieutenants, captains, and correctional supervisors conduct and document unannounced walk-throughs on all watches to aid in identifying and deterring staff sexual abuse and sexual harassment. The walk-through tours must be noted in the housing unit logbooks and the Supervisor’s watch summary. The policy further states that agency and facility staff are prohibited from alerting other staff members of the walkthroughs by supervisors unless such an announcement is related to the legitimate operational functions of the facility.</p> <p>During the onsite phase and physical plant review, the lead auditor interviewed watch commanders from different shifts. The supervisors stated they conduct unscheduled facility rounds during their shifts and document rounds in the supervisor or the work/program area logbooks. The supervisors do not inform or notify line staff when they conduct unannounced rounds, however, staff can view supervisors on video monitors. Should they hear or be made aware that the staff is alerting others, they will remind staff that alerting others of their presence is against policy. Target and random staff interviews affirmed that supervisors conduct unannounced rounds and that supervisors of the opposite gender will complete the cross-gender announcement when entering the offender housing unit (115.15). The audit team informally spoke with security staff and offenders in housing units and work/program areas who stated they observe supervisors periodically in these areas. The audit team observed supervisors and interactions between offenders and staff which led the audit team to believe they were present and approachable and observed professional interactions between staff and staff with offenders. The audit team reviewed supervisor logbooks supporting their unannounced rounds are documented in the log book on all shifts. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence to determine compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p>Policy(s) and supporting documentation reviewed</p>

- DCR policy ADM.08.08: Prison Rape Elimination Act
- Offender population report
Interviews conducted

PREA Coordinator

- Facility PREA Compliance Manager

ADM.08.08 includes the Hawaii Revised Statute (HRS) § 706-667 definition of a young adult and PREA definition of a youthful offender. PREA's definition of a youthful offender differs from the HRS §706-667 definition. The policy states that DCR does not normally manage youthful offenders/detainees as defined by PREA; however, specialized requirements would apply to the housing of a youthful offender/detainee in a DCR facility. According to HRS §571-22, the Family Court may relinquish its jurisdiction over a youthful offender and transfer the case to a Court of criminal jurisdiction for prosecution of the juvenile offender as an adult.

The agency does not normally manage youthful offenders/detainees as defined by PREA; however, it is important to note that specialized requirements would apply for housing a youthful offender/detainee in a DCR facility. According to HRS §571-22, the Family Court may relinquish its jurisdiction over a youthful offender and transfer the case to a Court of criminal jurisdiction for prosecution of the juvenile offender as an adult.

(a) ADM.08.08 states that if the agency does receive a youthful offender as defined by PREA, the youthful offender shall not be housed in a housing unit in which the youthful offender shall have sight, sound, and physical contact with any adult offender through the use of a shared dayroom or other common space, shower area, or sleeping quarters. Any non-compliance with these requirements must be documented on the PREA Mandated Reporting Form (DCR 8317) and forwarded to the Department PREA Coordinator.

(b) ADM.8.08 states staff shall maintain sight, sound, and physical separation between the youthful offenders and adult offenders in areas outside of the housing units or shall provide direct staff supervision when youthful offenders and adult offenders have sight, sound, and physical contact. Any non-compliance with these requirements must be documented on the PREA Mandated Reporting Form (DCR 8317) and forwarded to the Department PREA Coordinator.

(c) ADM.08.08 requires the agency to document exigent circumstances for each instance in which a youthful offender's access to large-muscle exercise, legally required, educational services, other programs, and work opportunities are denied in order to separate them from adult offenders, The facility must document any exigent circumstances and document on the PREA Mandated Reporting Form (DCR 8317). DCR 8317 must be sent to the PREA Coordinator. The DCR policy states it will make its best effort to avoid placing youthful offenders in isolation to comply with this provision.

	<p>For the pre-onsite phase, the PAQ indicated that the facility does not house youthful offenders. The PREA coordinator, Warden, and facility PCM interviews affirmed that the facility has not housed youthful offenders. During the onsite review phase, the audit team did not observe or identify any youthful offenders housed at this facility. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions</p>
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence to determine compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Cross-gender strip search PPT • COR.08.13 Duty Assignment for Corrections Officers • Staff training curricula related to applicable standard provisions <p><u>Interviews</u></p> <ul style="list-style-type: none"> • PREA Coordinator • Random staff • Random offenders <p>a) ADM.08.08 states DCR staff 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. ADM.08.08 referenced DCR policy COR.08.13 - Duty Assignment for Corrections Officer which outlines procedures for searches. ADM.08.08 requires staff to utilize the PREA Mandated Reporting Form (DCR 8317) when there is an incident of cross-gender strip searches and cross-gender visual body cavity searches and must submit the form to the PREA Coordinator.</p> <p>During the onsite phase, random staff and target offender interviews confirmed staff</p>

do not conduct cross-gender strip searches or cross-gender visual body cavity searches of offenders.

(b) ADM.08.0 states that DCR staff shall not conduct cross-gender pat-down searches of female offenders, absent exigent circumstances. Facilities shall not restrict female offenders' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.

This facility does not house female offenders. As such, this standard provision is not applicable to this audit.

(c) ADM.08.08 requires all cross-gender pat-down searches of female offenders to be documented on the PREA Mandated Reporting Form (DCR 8317) and forwarded to the PREA Coordinator.

This facility does not house female offenders. As such, this standard provision is not applicable to this audit.

(d) ADM.08.08 states that offenders shall be allowed to shower, perform bodily functions, and change clothing without a 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. Staff shall document any exigent circumstances on the PREA Mandated Reporting Form (DCR 8317) and forward the form to the PREA Coordinator within three days. Before staff of the opposite gender enter an offender housing unit, they are required to complete a "knock and announce" to alert offenders of their presence via intercom or a verbal broadcast informing the offenders are properly dressed.

For the pre-onsite phase of this audit, the PAQ indicated that this facility houses male offenders. During the onsite review phase, and in addition to formal interviews with staff and offenders, the audit team spoke informally with staff and offenders in the housing units affirming cross-gender/opposite-gender announcements made before opposite-gender staff entered housing units.

(e) ADM.08.08 states that DCR Non-medical staff shall not search or physically examine a transgender or intersex offender for the sole purpose of determining the offender's genital status. If the offender's genital status is unknown, it may be determined from conversations with the offender, by reviewing medical records, or, if necessary, by learning this information as part of a medical examination conducted by a medical practitioner.

During the onsite random staff interviews affirmed they do not search or physically examine a Transgender or Intersex offender for the sole purpose of determining the offender's genital status. At the time of this audit, this facility did not have transgender offenders and the audit staff did not perceive any offenders who may identify as a transgender or gender diverse person.

(f) ADM.08.08 indicates staff are to ensure that cross-gender pat-down searches and searches of transgender and intersex offenders are conducted in a professional,

	<p>respectful, and in the least intrusive manner while ensuring security and operational needs for the good government and orderly running of the facility.</p> <p>During the onsite phase, the audit team interviewed random staff from all shifts who stated they received training on how to conduct pat-down searches of Transgender and Intersex offenders and described the appropriate method and hand placement. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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<p>115.16</p>	<p>Inmates with disabilities and inmates who are limited English proficient</p>
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Staff training curricula slides for Limited English Offenders and Translation services. • Language Line Services, Inc. contract • PREA posters <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Director • Target Offenders • Random staff <p>(a) (b) ADM.08.08 indicates disabled offenders and offenders with limited English proficiency shall be provided with equal opportunity to participate in or benefit from all aspects of DCR’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</p> <p>(c) ADM.08.08 states that in limited circumstances offender interpreters or other</p>

types of offender assistance are required to document the use of services on the PREA Mandated Reporting Form (DCR 8317) and send the form to the PREA Coordinator within three (3) days. The Civil Rights Compliance Office (CRCO) has designated procedures for the use of authorized interpreters and the PREA Coordinator or facility PCM can assist staff if needed to coordinate services.

For the pre-onsite phase target staff interviews affirmed the agency has established procedures to provide offenders who are disabled or limited English proficient. The PAQ indicated that the facility did not have offenders requiring translation or interpretation services during this audit time frame.

For the onsite phase, day one documentation provided to the auditor did not indicate that they had any offenders who had physical or mental disabilities or limited English proficient (LEP). During the physical plant review, the audit team identified one offender who appeared to have a leg injury, and through interviews with random staff the auditor learned the facility had at least one offender who was LEP and was not on documentation provided. The auditor selected these offenders for the target interview, with the offender observing an injury, stating that they injured their knee while playing basketball and did not have any concerns for their safety. At the initiation of the interview with the LEP offender, the auditor confirmed they required Spanish translation and interviewed them in the case manager's office using the phone translator. During their intake on Oahu, the facility did not document the offender as having a language barrier (LEP) and was not documented alerting staff or when transferring to this facility. As a result, the KCF intake officer was unaware and did not utilize the translation line for the risk assessment or the offender education video in Spanish nor, did the officer complete the 30-day follow-up risk screening assessment. The auditor consulted with the programming case manager who meets with offenders at a later time for programming needs and determined during conversations with the offender they had a language barrier and utilized the language line and provided material in Spanish. The auditor affirmed the case manager's statements when interviewing the offender with assistance from the language line. The information was brought to the attention of the PREA Coordinator and PCM with the auditor requesting they take immediate action to provide offender education in Spanish (standard 115.33) and conduct a new PREA risk screening (standard 115.41) utilizing the translation line and document on the mandatory report form per policy. Another offender was identified during random interviews after the audit team reported this offender stated they did not receive education or had been asked risk screening questions. The PCM met with the offender and advised the audit team the offender speaks Filipino, the PCM is bilingual (Filipino) and read the education material to this offender and the auditor requested they complete a new risk screening of this offender in their language and document per policy. The facility was placed into corrective action to establish a procedure for better communication between staff to ensure they follow procedures. The auditor also discussed with the PCM that they address these concerns with the intake facility on Oahu after we found they had not documented the information on the mandatory report form which would alert other staff and facilities they need to utilize the language line or have bilingual staff provide translation.

	<p>For the random staff interviews, they stated the facility has bilingual staff who are available for translation. Depending on the offenders’ native language, or they would contact the watch commander or case manager to access the agency translation/ interpretation service provider.</p> <p>Post-onsite a facility corrective action was initiated for this standard and intertwined with standards 115.33, and 115.41. The auditor, the facility PCM, and the agency PREA Coordinator mutually agreed that KCF would develop a procedure between officers completing risk screening assessment, the case manager, and the PCM / designee share information if they identify an offender with a language barrier that was unknown after transferring from another facility. It was understood offenders transferring to this facility, should already have been documented with a language barrier during the reception as a new intake. The auditor and the facility mutually agreed they would provide updated risk screening assessments for the offender interviewed onsite and any who may arrive during the corrective action time frame. The agency PREA Coordinator stated they would address the reception/intake facility on Oahu for not following procedures. Following a period of corrective action and a final analysis of the evidence and documentation reviewed indicates no additional corrective action is to be taken.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. After reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender”. On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation reviewed.</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Policy ADM.03.05: Live Scan and Record of Arrest and Prosecution Background • Department of Human Resources Policy 702.003 • Staff roster & documentation requested. • Contractor/volunteer roster & documentation requested.

- DCR 8318
- Criminal History Record Clearance form (Lautenberg Amendment)

Interviews conducted

- Human Resources Suitability Specialist
- Program Services Administrator for Contractors and Volunteers

(a) ADM 08.08: DCR prohibits the hiring or promoting of anyone, who may have contact with offenders, and shall (a) ADM 08.08 indicates that the agency prohibits the hiring or promoting of anyone, who may have contact with offenders and shall not utilize the services of any contractor or volunteer, who may have contact with offenders. DCR 8318 includes the following questions.

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution owned, operated, or managed by the state as defined by 42 U.S.C. 1997, for example, the Hawaii State Hospital or other state-skilled nursing, intermediate, long-term care, custodial, or residential care institution;
2. Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threat of force, or coercion, or if the victim did not consent or was unable to consent or refuse;
3. Has been civilly or administratively adjudicated to have engaged in the activity described in number 1.
4. Has been the subject of substantiated allegations of sexual abuse or sexual harassment or resigned during a pending investigation of alleged sexual abuse or sexual harassment.

There are less stringent requirements for volunteers, who are utilized as peer mentors, but this requires a case-by-case assessment and review with the Department PREA Coordinator.

(b) ADM.08.08 states the agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone or to utilize the services of any contractor or volunteer, who may have contact with offenders.

(c) (d) ADM.08.08 requires that before new employees, contractors, or volunteers, who may have contact with offenders are hired, DCR will perform criminal background records checks, consistent with federal, state, and local law; and utilize a “best effort” to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation due to a pending investigation of an allegation of sexual abuse.

ADM.03.05 addresses the agency background process for prospective staff and current staff members.

(e) ADM.08.08 requires criminal background records checks at least every five years

for current employees, contractors, and volunteers, who may have contact with offenders. The Personnel's Office staff are responsible for ensuring compliance with the five-year cycle of employee background checks. All employment positions that are required to carry firearms are required to have an annual Lautenberg type of background check.

ADM.03.05 addresses the agency background process for prospective staff and current staff members.

(f) ADM.08.08 requires that the agency will ask all applicants and employees, who may have direct contact with offenders, about previous misconduct(s) described above in (a) either on a written application, during an interview for hire, a promotional interview, or if applicable, during any interview or written self-evaluation conducted as part of reviews of current employees. This requirement is documented by utilizing the PREA Applicant Questionnaire (DCR 8318), during the application process for prospective employees, employee promotions, or employee transfers.

Additionally, the policy requires that staff have the affirmative duty to immediately disclose any misconduct referenced above in section (a).

(g) ADM.08.08 indicates that any DCR staff, who materially omits reporting such misconduct or provides materially false information shall be subject to discipline based on the just and proper cause standard, up to and including discharge. The State of Hawaii, Department of Human Resources Policy 702.003 - Separation from Service and addresses state employees were referenced in ADM.08.08 and reviewed.

(h) ADM.08.08 requires the agency to provide information on substantiated allegations of sexual abuse or sexual harassment involving a current or former employee, upon receiving a request from an institutional employer conducting a background check on the employee, preferably with a signed consent to release information form. If the personnel officer receives such a request from an institutional employer, the request will be sent to the PREA Coordinator for review and a drafted response.

For the pre-onsite phase of this audit, the auditor received the facility staff roster, selecting current staff, and those hired and/or promoted within this audit time for document proof of practice file review. The documentation reviewed affirmed the agency completed background checks, internal and external PREA reference checks (as applicable), and DCR 8318 forms. The human resources specialist assigned to the suitability unit conducts background checks for prospective new staff, annual recertification, and five-year background checks. The suitability unit uses Livescan fingerprint and participates in the Rap Back service which performs continuous vetting for all staff and is a fingerprint-based check. As stated above in provision (e) the Rap Back service ensures DCR personnel receive immediate notification if staff have LE contact and meets the annual Lautenberg background checks requirement. In addition, if applicants have prior employment within a confinement setting, HR staff will conduct a reference check. All staff are considered mandatory reporters and have the affirmative duty to disclose any misconduct. This requirement is referenced under Admin Rule #10 and the Program Services Administrator, who oversees all

	<p>contractors and volunteers receives and processes criminal background checks for new volunteers and contractors and again every two years for all active contractors and volunteers. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions</p>
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence to determine compliance with this standard. Reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Director • Warden <p>(a) ADM.08.08 states when designing or acquiring any new facility, and in planning any substantial expansion or modification of existing facilities, DCR shall consider the impact that the design, acquisition, expansion, or modification will have on DCR’s ability to protect offenders from sexual abuse.”</p> <p>(b) ADM.08.08 indicates when the agency or the facility installs or updates video monitoring system, or electronic surveillance system. Close circuit television (CCTV), or other monitoring technology, DCR shall consider how such technology may enhance the agency’s ability to protect offenders from sexual abuse.</p> <p>Pre-onsite phase the auditor interviewed the Director and the Warden. The facility leadership and the PCM collaborate and prioritize identified areas to install cameras when planning Capital Improvement Projects (CIP). Since the last audit, this facility updated existing video equipment and it is anticipated they will be installing new video surveillance by the end of 2024.</p>

	<p>Onsite physical plant review the audit team verified video surveillance was working and reviewed staff video monitors. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. Reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Sexual Abuse Treatment Center (SATC) - Kapiolani Medical Center for Women and Children (contract 24-HAS-01) <p><u>Interviews</u></p> <ul style="list-style-type: none"> • PREA Compliance Manager • Random staff • Community victim advocate • Facility investigator • Agency Internal Affairs (IA) Investigator <p>(a,b) ADM.08.08: DCR utilizes departmental evidence protocols that maximize the potential for obtaining usable physical evidence for administrative proceedings and preserve the crime scene for criminal investigations and prosecutions.</p> <p>(c) ADM.08.08 states that the Health Care Division staff shall determine, based on evidentiary or medical needs, whether a victim of sexual abuse will be transported for a forensic medical examination at the Sex Abuse Treatment Center (SATC) or hospital emergency unit. This shall be at no financial cost to the victim. In facilities without twenty-four (24) hour medical staff, staff will contact the on-call physician after hours.</p>

- Sexual Assault Forensic Examiners (SAFEs), or Sexual Assault Nurse Examiners (SANEs) contract with local LE. If a SAFE or SANE is not available, the examination may be performed by other qualified medical practitioners. The SATC and its contracted representatives on the out islands have indicated that victim advocates are available during an examination.
- Pre-onsite phase document review: The PAQ and incident tracking indicated no offenders had reported an incident of sexual abuse falling within the time frame for forensic evidence collection.
(d) The SATC contract scope of services with the State of Hawaii, crisis response services include in-person services, and they will be available to sexual assault victims at all times, 24 hours a day, 365 days a year.

(e) ADM 08.08 stated an offender can request and they would make available a victim advocate from the SATC or SATC sub-contracted provider on the outer islands to provide to support the victim through the forensic medical examination process and the investigatory interview. The purpose of a victim advocate is to provide emotional support, crisis intervention, information, and referrals.

(f) ADM 08.08 states they will ensure that internal investigations comply with the above requirements and external investigative entities (County LE) have procedures in place to comply with the above requirement.

(g) ADM.08.08 requires internal investigations comply with the above requirements [regarding evidence protocols and forensic examinations] and external investigative entities (County LE) have procedures in place to comply with the above requirement.

(h) The State of Hawaii contracts with the community victim advocate organization will respond and provide services to victims of sexual abuse.

Pre-onsite phase target interviews affirmed that neither the agency nor the facility conducts sexual assault forensic exams. Offenders reporting sexual abuse within a time frame to collect forensic evidence are transported to the local hospital emergency room. Local law enforcement is contacted and assumes control of the crime scene and local LE will contact the on-call Sexual Assault Nurse Examiner to respond. The facility investigator is responsible for conducting administrative investigations. The facility PREA Compliance Manager and/or assigned investigator will receive a case number from the LE to follow up on the case status. On-site phase this facility did not have any offenders who reported sexual abuse at this facility requiring the offender to be transported for a sexual assault forensic exam. Random staff selected for interviews stated that designated facility supervisors are responsible for conducting the administrative investigation, There was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.

115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. Reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation reviewed</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Department of Corrections and Rehabilitation (hawaii.gov) public website <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Director • Facility Investigator • PREA Coordinator <p>Pre-onsite phase review: DCR policy ADM.08.08 indicates that the agency is responsible for conducting all administrative sexual abuse investigations. All criminal sexual abuse investigations shall be referred to the county LE agency, Hawaii Police Department, If the county LE declines to investigate the initial report related to a criminal case, then a referral shall be made to the State of Hawaii, Department of the Attorney General (AG) to investigate the criminal case. Agency staff are required to cooperate with the county LE's or AG's criminal investigation. Agency staff shall be afforded protections based on Garrity Warnings in the administrative investigation if the facts constitute a criminal offense or warrant a criminal investigation.</p> <p>(a) ADM.08.08 states the agency will ensure that an internal administrative investigation and an external referral for criminal investigation are completed for all allegations of sexual abuse and sexual harassment with the limitation that any criminal referral for sexual harassment must meet a criminal standard.</p> <p>(b) ADM.08.08 requires allegations of sexual abuse or sexual harassment involving potentially criminal behavior, shall be immediately referred to the County Law Enforcement. DCR Internal Affairs Office ("IA") shall be immediately notified of any allegation of sexual abuse or potentially serious incident of sexual harassment. The administrative investigation may be completed by IA or at the facility level pursuant to an order of the Director or his/her designee.</p> <p>(c) The agency publishes ADM.08.08, Prison Rape Elimination Act on the official department public website at www.hawaii.gov/DCR.</p>

	<p>(d) ADM.08.08 states county LE may have its own policy governing how criminal investigations of sexual abuse are conducted. DCR does not manage criminal investigations for sexual abuse or criminal sexual harassment.</p> <p>Pre-onsite phase target staff interviews affirmed reported incidents of sexual abuse or sexual harassment are assigned administrative investigations and those involving potential criminal violations are referred to LE. The PREA Coordinator stated administrative investigations could be assigned to the Internal Affairs investigator assigned to headquarters on the Island of Oahu. The PAQ did not reference reported incidents requiring a referral to LE for potential criminal violations. In conjunction with standard 115.71, the auditor received a copy of the facility incident log for this audit time frame and reviewed one closed administrative investigation. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Staff PREA training curricula • Staff PREA training documentation <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Random staff <p>a) ADM.08.08 outlines staff training requirements to provide comprehensive training for all staff and emphasizes DCR’s zero-tolerance policy and the importance of preventing sexual abuse / sexual assault and sexual harassment toward offenders. All DCR staff who may have contact with offenders trained on:</p>

1. DCR's zero-tolerance policy for offender sexual and sexual harassment;
2. How to fulfill their responsibility under DCR's sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
3. Offenders' rights to be free from sexual abuse and sexual harassment;
4. The right of offenders and staff 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 victims of sexual abuse and sexual harassment;
7. How to detect and respond to signs of threatened and actual sexual abuse;
8. How to avoid inappropriate relationships with offenders based on staff over-familiarity and fraternization;
9. How to communicate effectively and professionally with offenders, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming offenders; and
10. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

(b) DCR's staff training is tailored to address all genders of offenders in a correctional facility; therefore, additional training is not required when a staff member transfers to a different gender facility.

(c) ADM.08.08 requires Wardens, DCR Administrators, or Sheriffs shall ensure that all current staff has received PREA training. The Warden or Sheriff shall notify the Department's Training and Staff Development Office (TSD) and the PREA Coordinator of any individual who requires training. Additionally, all staff are required to receive refresher PREA training every two (2) years. In years when the staff member does not receive the refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies through the DCR website, handouts, posters, memorandums, etc.

(d) ADM.08.08 requires the use of DCR training sign-in sheets and is a verification that the staff member received and understood the PREA training. The sign-in sheet documentation substantiates that the staff member has completed the required training.

For the pre-onsite phase, the auditor reviewed the staff training curricula, the facility staff PREA training logs and the PAQ. During the onsite phase, staff selected for random interviews indicated they had attended PREA training and PREA refreshers, affirming they understood the PREA training provided including but not limited to; the agency's zero-tolerance policy, how to report allegations of sexual abuse and sexual harassment, responding to incident of sexual abuse, professional communication with all offenders and those who identify as Transgender. There was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.

115.32	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. Reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Contractor and Volunteer forms and supporting documentation • Volunteer and Contractor Training curricula • Volunteer and Contractor Handbook <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Contractor • Volunteer <p>(a) ADM.08.08 requires all volunteers and contractors who have contact with offenders shall be trained on PREA, DCR’s policy, and their responsibilities regarding the prevention, detection, and how to respond to a report of offender sexual abuse and sexual harassment. The agency volunteer and contract coordinator shall ensure that all volunteers and contractors are trained on their responsibilities regarding offender sexual abuse and sexual harassment.</p> <p>(b) ADM.08.08: The level and type of training provided to volunteers and contractors shall be tailored to the level of contact and services provided to offenders. All current volunteers and contractors have been notified of DCR’s zero-tolerance policy regarding offender sexual abuse and sexual harassment, as well as how to report such incidents.</p> <p>(c) DCR maintains documentation confirming that volunteers and contractors received an appropriate level of training and that they understood the information provided.</p> <p>For the pre-onsite phase and, in conjunction with standard 115.17, the auditor interviewed the Program Services Administrator for Contractors and Volunteers. All contract staff and volunteers must attend initial PREA training before contact with offenders and again every two years. All volunteers and contract staff attend in-class PREA training at headquarters on the Island of Oahu or those who live on outer Islands can attend the training at the facility. The auditor selected and reviewed</p>

	<p>training documentation from a list provided by the PREA Coordinator.</p> <p>During the on-site phase, the facility did not have any contractors or volunteers on-site. This auditor was scheduled to conduct an audit at another facility during the same week and volunteers and contractors from their facility also support this facility. The auditor interviewed one volunteer and one contractor, both stated they received PREA training and understood the agency's zero-tolerance policy. They stated if they received a report of sexual abuse or sexual harassment they would contact security staff. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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115.33	Inmate education
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • PREA Posters in Tagalog and Samoan • PREA Posters in English • DCR Offender PREA Education Brochure <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Target staff • Random and Target offenders <p>(a) ADM.08.08: Offenders shall receive verbal and written information at intake/ reception from the Intake Service Center (ISC) staff. They will be informed about DCR’s zero-tolerance policy and how to report incidents or suspected incidents of sexual abuse or sexual harassment.</p> <p>(b) ADM.08.08 outlines offender training requirement that within thirty (30) days of intake, the DCR facility shall provide comprehensive PREA education via video (JDI</p>

video) or classroom instruction to offenders that addresses:

1. Prevention and intervention;
2. Self-protection;
3. Reporting sexual abuse, sexual harassment, and protection from retaliation, including information on the options to report the incident to a designated staff member other than an immediate point-of-contact line officer;
4. Treatment and counseling;
5. DCR's zero-tolerance for sexual abuse/sexual assault, sexual harassment, and retaliation.

DCR updated offender education after JDI released their newly revised Offender PREA education videos in 2023. Videos can be found online at [New PREA Education Videos for Adult and Juvenile People in Confinement | PREA \(prearesourcecenter.org\)](https://www.prearesourcecenter.org/).

(c) DCR implemented PREA in 2013 and required the agency to provide all current offender's information on PREA. Additionally, DCR requires that offenders who are transferred from one facility to another be re-educated only to the extent that the policies and procedures of the new facility differ from those of the previous facility.

The facility did not have any offenders who were admitted prior to the release of the standards (August 2012.) As such, this standard provision does not apply to this facility audit.

(d) ADM.08.08: DCR's policy is to make appropriate provisions, as necessary, for offenders with limited English proficiency through CRCO's Civil Rights Compliance Office] identification of authorized interpreters. Accommodation for offenders with disabilities (including offenders who are deaf or hard of hearing, those who are blind or who have low vision, or those who have intellectual, psychiatric, or speech disabilities) and offenders with low literacy levels shall be made on the facility level. Intake Service Center (ISC) and facility intake staff shall document offender education by utilizing the PREA Mandated Reporting Form (DCR 8317). If an offender requires accommodation this form will be sent to the facility PCM and Department PREA Coordinator.

(e) ADM.08.08 requires that each facility maintains electronic or written documentation of an offender's participation in the educational session (video or classroom).

(f) ADM.08.08 indicates the facility will ensure that key information on DCR's PREA policies is continuously and readily available or visible through posters, handouts, handouts, offender handbooks, and resources in the offender library. (f) ADM.08.08 states the facility will ensure that key information on DCR's PREA policies is continuously and readily available or visible through posters, handouts, offender handbooks, and resources in the offender library. During the onsite physical plant review, the audit team noted the facility has PREA information posted and is readily available in all areas including housing units, program and work areas, etc.

	<p>For the pre-onsite phase, the PAQ indicated that 100% of the offenders whose stay was longer than 30 days received comprehensive PREA education. For the onsite phase, the audit team observed PREA information readily available throughout the facility during the physical plant review. Assessing interview responses, most offenders stated this was not their first time in confinement and had received PREA education at this facility and other facilities they had been assigned. This standard intertwined with the corrective action initiated under standard 115.16. The PCM (bilingual in Filipino) completed the offender education during the onsite interview by utilizing the Spanish offender education video for one offender and translating it into Filipino for the other offender. This item was corrected during the onsite audit and before issuance of the interim report. Following a period of corrective action under standards 115.16 and 115.41 a final analysis of the evidence and documentation reviewed indicates no additional corrective action is to be taken.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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115.34	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • National Institution of Corrections certificates for staff completing Specialized Investigator Training <p><u>Investigation training curricula</u></p> <ul style="list-style-type: none"> • DCR Training curricula for conducting sexual abuse investigations • Wicklander-Zulawski Effects of Trauma on Behavior and Memory Curricula • Refresher PREA investigation curricula <p><u>Interviews</u></p>

- IA Investigator
- Facility investigator

(a) ADM.08.08 requires IA [Internal Affairs], or facilities, if authorized by the Director, shall conduct the internal administrative investigation for any allegations of sexual abuse. In addition to general training provided to all employees, DCR investigators shall receive training on conducting sexual abuse investigations in confinement settings.

(b) ADM.08.08 outlines DCR's specialized training includes and is not limited to:

- techniques for interviewing sexual abuse victims,
- proper use of Miranda (not applicable) and Garrity warnings,
- preserving sexual abuse evidence for collection in confinement settings, and
- an understanding of the criteria and evidence required to substantiate a case in an administrative proceeding, or for a referral by a county LE agency for criminal prosecution.

(c) ADM.08.08 requires that DCR maintain documentation substantiating that investigators have completed the required training, and it shall be documented on the staff member's training record with TSD [Training and Staff Development]

The Department PREA Coordinator or their designee is responsible for the classroom requirement for sexual abuse investigations training. IA investigators or Facility Investigators may comply with this provision through the webinars for Specialized PREA Investigations Training offered at the PRC website and/or the National Institute of Corrections (NIC) website.

One of the assigned duties of the facility PCM is to conduct the PREA administrative investigations. The PCM has completed investigations over many years and stated they have completed specialized training for sexual abuse investigations from the PREA coordinator and via the NIC online course for specialized training for conducting sexual abuse investigations in a confinement setting. DCR staff do not have the legal authority to issue Miranda Warnings and would defer to the outside LEO with the Hawaii Police Department (Hilo).

Agency Internal Affairs (IA) Investigator stated they completed specialized training from the Honolulu Police Department Sex Crimes Unit and the Specialized PREA Investigations training offered by NIC. They stated they would conduct the administrative investigation and work hand in hand with local law enforcement (LE) when the investigation is referred for potential criminal violations. The IA investigator had knowledge and described the investigation process and documentation from NIC was included in the PAQ. There was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions

115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. know reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender”. On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Certification of completion for specialized training <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Target Medical staff • Target Mental Health staff <p>(a) ADM.08.08 states all full-time and part-time medical and mental health practitioners, who work regularly in DCR facilities, should be trained in:</p> <ol style="list-style-type: none"> 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>(b) This standard provision is not applicable. DCR medical staff are not responsible for conducting forensic medical examinations.</p> <p>(c-d) DCR will maintain documentation substantiating that medical and mental health practitioners have completed the required training, and it shall be documented on the staff member’s training record with TSD. Additionally, medical and mental health practitioners shall receive training mandated for employees as outlined in 115.31 and based on the practitioner’s status. Medical and mental health practitioners may comply with this provision through the webinars for Specialized PREA Training for Medical and Mental Health Practitioners offered at the PRC website and the National Institute of Corrections (NIC) website.</p> <p>For the pre-on-site target interviews with medical and mental health staff affirmed they have completed specialized medical and behavioral health training in addition to staff PREA training under standard 1115.31. This facility has full-time medical staff</p>

	<p>and receives part-time mental health services from staff assigned at the Hawaii Community Correctional Center (HCCC). In addition to medical and mental health staff completing National Institute of Corrections (NIC) specialized training for Medical Health Care and Behavioral Health Care for sexual assault victims in a confinement setting, they have ongoing training required as licensed medical and mental health practitioners. Certificates of completion were provided supporting policy and target interviews. There was no corrective action to take.</p> <p>Recommendation: Update DCR policy ADM.08.08 section 22 (1) changing “should” be trained to “shall” be trained.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions</p>
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115.41	Screening for risk of victimization and abusiveness
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Offender admissions and PREA risk screening report • PREA Risk Screening tool DOC 8314 <p><u>Interviews conducted</u></p> <ul style="list-style-type: none"> • Target staff • Random offenders • Target Offenders <p>(a) ADM.08.08 states the ISC [Intake Service Center] is required to screen offenders during the intake screening process, which occurs upon admission to a facility. The DCR policy requires facility staff to review the offender's risk of sexual abuse victimization (vulnerability factors) or sexual abusiveness (predatory factors) toward other offenders and utilize the accompanying PREA risk screening instructions.</p>

(b) ADM.08.08 states that the intake screening by ISC shall occur within seventy-two (72) hours of intake/arrival.

(c) ADM.08.08 requires ISC and facility staff to utilize the PREA Screening Tool (DCR 8314) to conduct PREA risk assessments.

(d) ADM 08.08 states DCR 8314 evaluates an offender's vulnerability factors and predatory factors. The PREA Screening Tool considers the following criteria to assess offenders for risk of sexual victimization:

1. Whether the offender has a mental, physical, or developmental disability;
2. The age of the offender;
3. The physical build of the offender;
4. Whether the offender has been previously incarcerated;
5. Whether the offender's criminal history is exclusively nonviolent;
6. Whether the offender has prior convictions for sex offenses against an adult or child;
7. Whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
8. Whether the offender has previously experienced sexual victimization, in a correctional and/or non-correctional setting, within the last ten (10) years;
9. The offender's own perception of vulnerability (verbal response); and
10. Whether the offender is detained solely for civil immigration purposes, which normally does not occur at DCR facilities.

(e) The PREA Screening Tool considers prior predatory acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse if known to the facility, in assessing offenders for risk of being sexually abusive.

(f) ADM.08.08 requires the facility to conduct an affirmative reassessment of an offender's risk of victimization or abusiveness within thirty (30) days of screening, based upon any additional relevant information received about the offender's victimization or abusiveness, subsequent to the intake screening, by utilizing DCR 8314 form. Staff will consult various sources (e.g., mental health, disciplinary history, allegations of relevant threats or victimization) including interviewing the offender to determine whether any previously unknown triggering event or information has become available and to document such review.

(g) ADM.08.08 states that the offender's risk of victimization or abusiveness shall be reassessed; when a referral, request, incident of sexual abuse, or receipt of additional information which may impact the offender's risk level and utilize DCR 8314.

(h) ADM.08.08 states offenders shall not be disciplined for refusing to answer, or for not disclosing complete information, related to, the questions in the risk assessment provision. (i) ADM.08.08 states that the information on DCR 8314 is subject to confidentiality requirements and professional and ethical rules shall be enforced to avoid any negative impact on the offender.

	<p>For the pre-onsite phase interview and document review, the PREA Coordinator oversees and approves designated staff authorized to access and view offender risk screening assessments. The only facility staff authorized are those in positions who conduct risk screening assessments and have a need and right to know the information, including the PCM. The PREA Coordinator will remove staff access when they are re-assigned/promoted to a position where they no longer have the authority to view risk screening information or terminate employment. The auditor reviewed admission reports for the 12-month audit time frame before the onsite review and the facility provided admission logs for the 30 days before the onsite review up to day one of the onsite review. The facility maintained substantial compliance by completing the intake and 30-day follow-up within the timeframes defined in the standards and agency policy. For the onsite audit phase, the audit team interviewed target staff, random offenders, and target offenders, and the audit support staff observed an offender's 30-day follow-up risk screening assessments. The auditor reviewed documentation for all the offenders selected for interviews, while the facility met substantial compliance with English-speaking offenders, they did not complete risk screening assessments utilizing the translation line or bilingual staff. Based on these findings, this standard was placed in corrective action in conjunction with standards 115.16 and 115.33. For the post-onsite phase and in conjunction with 115.16 corrective action the auditor requested documentation notating they conducted a new PREA risk screening DCR 8314 indicated they utilized the translation service or bi-lingual staff to include notating who provided translation. Following a period of corrective action, a final analysis of the evidence and documentation satisfied compliance, and there is no additional corrective action to be taken.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, "Offender" and "Inmate" are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as "Offender." On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p>Policy(s) and supporting documentation</p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act

- PREA risk screening tool DCR 8314
- PREA risk screening tool instructions

Interviews

- PREA Coordinator
- Facility PREA Compliance Manager
- Target staff
- Target offenders

(a) ADM.08.08 states DCR shall use the information from the risk assessment screening for housing designations, work line, program assignment, or scheduling to keep separated those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive.

(b) ADM.08.08 states DCR shall use the risk screening tool information to make an individualized assessment about how to ensure the safety of each individual offender.

(c) ADM.08.08 states that a gender X, transgender, or intersex offender will be housed based on their legal status as a male or female. Any deviation in the housing assignment of a transgender or intersex offender to a facility for male or female offenders will be determined by medical and mental health practitioners with input from program and security staff initially at the intake process. In deciding whether to assign a gender X, transgender, or intersex offender to a facility for male or female offenders, and in making other housing and programming assignments, DCR shall consider on a case-by-case assessment of whether a placement would ensure the offender's health and safety, and whether the placement would present a management or security concern. In the event that an offender's sex designation is changed as specified under Hawaii Revised Statutes §338-17.7, "Establishment of new certificates of birth", then facility, housing, and programming assignments shall conduct the case-by-case assessment and must include the PREA Coordinator.

For the pre-onsite phase, the auditor interviewed the PREA Coordinator, Warden, and facility PCM, the agency and facility will conduct case-by-case reviews when assigning housing and programming assignments. The PCM stated they have not had a transgender offender housed at this facility during their 12-month audit time frame.

(d) ADM.08.08 requires that biannually, designated facility staff identified by the Warden shall reassess the placement and programming assignment of each transgender and intersex offender for the purpose of assessing any threats to the safety of the offender. Biannual assessments shall be documented on the PREA Mandated Reporting Form DCR 8317 and/or may be conducted as part of a classification review for the transgender or intersex offender and forward DCR 8317 to the PREA Coordinator.

(e) ADM.08.08 states that a Gender X, transgender, or intersex offender's own views with respect to his or her own safety shall be given serious consideration.

	<p>(f) ADM.08.08 states Gender X, Transgender, and intersex offenders shall be given the option to shower separately from other offenders in dorm shower situations if so requested. This provision is applicable only when individual showers are not available at the offender's assigned housing unit.</p> <p>(g) ADM.08.08 states DCR facilities shall not place Gender X and LGBTI offenders in dedicated facilities, units, or wings solely on the basis of such identification or status unless such placement is established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such offenders.</p> <p>For the pre-onsite phase interview, the PREA Coordinator and facility PCM stated that DCR facilities will not house or assign LGBTI offenders to dedicated facilities or housing units based on gender identity or sexual orientation. Facilities will conduct case-by-case reviews through the PREA risk screening process including but not limited to conversations with the Transgender Offender, Medical and Mental Health. Facilities will make attempts to accommodate a Transgender offender's request for a private shower at a time away from the other offenders.</p> <p>For the onsite phase of the audit target offender interviews affirmed they are not housed in dedicated wings or housing units based on gender identity or sexual orientation. The facility had one transgender male, they had not requested a private shower accommodation and staff conducted professional searches. By default, this standard was placed into corrective action in conjunction with standard 115.41. For the post-onsite phase of the audit, the corrective action was satisfied after compliance was determined under 115.41, a final analysis of the evidence and documentation satisfied compliance, and there is no additional corrective action to be taken.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor has determined that the facility is meeting substantial compliance with this standard.</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, "Offender" and "Inmate" are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as "Offender." On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p>Policy(s) and supporting documentation</p>

- DCR policy ADM.08.08: Prison Rape Elimination Act
- DCR policy COR.11.01 downloaded from the agency's public website

Interviews

- Warden
- PCM
- Target staff
- Target offenders

(a) ADM.008.08 states DCR discourages the placement of offenders in involuntary administrative segregated housing solely because of their high risk of sexual victimization status unless an assessment of all available alternatives has been made and it is concluded that there is no available alternative for separating the victim from a likely abuser. If there are no available alternatives the facility must document utilizing the PREA Mandated Reporting Form (DCR 8317) and forward it to the PREA Coordinator. If staff is unable to immediately conduct an assessment, they may hold the offender in involuntary administrative segregated housing for less than twenty-four (24) hours pending the completion of the mandated assessment.

(b) ADM.08.08 states that offenders placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible, as dictated by the facility's schedule and operational needs. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document this by utilizing DCR 8317 and forward it to the PREA Coordinator.

(c) ADM.08.08 states that if a DCR facility assigns an offender at risk of sexual victimization to involuntary administrative segregated housing as an alternative means of separation from the likely abuser, then such an assignment should not normally exceed a period of thirty (30) days.

(d) ADM.08.08 states if an involuntary administrative segregated housing is made pursuant to the above section (a), the facility must document the basis for the facility's concern for the offender's safety and the reason why no alternative means of separation can be arranged on the PREA Mandated Reporting Form (DCR 8317) and send it to the PREA Coordinator. Additionally, if placement in involuntary administrative segregated housing exceeds the initial thirty (30) days, the facility shall conduct follow-up reviews as dictated by COR.11.01 Administrative Segregation and Disciplinary Segregation.

(e) COR.11.01 states that if placement in involuntary administrative segregated housing exceeds the initial thirty (30) days, the facility shall conduct follow-up reviews as dictated by COR.11.01 Administrative Segregation and Disciplinary Segregation, but no less than every thirty (30) days to assess the offender's continued separation from the general population. In conjunction with COR.11.01, ADM.08.08 requires the facility to utilize DCR 8317 and forward it to the PREA

	<p>Coordinator.</p> <p>For the pre-onsite phase interviews, the Warden and PCM stated that they had not placed any offenders reporting sexual abuse or imminent threat of sexual abuse in involuntary administrative segregation. The PAQ indicated they had not housed a victim of sexual abuse in involuntary housing, this was further affirmed during the onsite review, observations, and interviews with staff. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • DCR informational guide for offenders • Agency website • PREA posters • Medical PREA posters • Offender PREA brochure • Staff PREA training curricula <p><u>Interviews</u></p> <ul style="list-style-type: none"> • PREA Compliance Manager • Random staff • Random and Target offenders <p>(a) ADM.08.08 indicated that the agency provides offenders with multiple internal and external ways they can privately report violations of sexual abuse, sexual harassment, or retaliation by other offenders or staff for reporting sexual abuse and sexual harassment; and staff neglect or violation of responsibilities that may have</p>

contributed to such incidents. Offenders may report to any DCR employee, contract employee, volunteer, or other external reporting avenue outlined in the PREA education provided to offenders.

For the pre-onsite phase, the auditor interviewed the PCM and reviewed the agency's public website Department of Corrections and Rehabilitation | PREA (hawaii.gov) for their PREA reporting options and contact information.

(b) ADM 08.08 states the agency will provide notification to offenders on how to report abuse or harassment to a public entity, private entity, or an external agency, which is able to receive and immediately forward offender reports of sexual abuse and sexual harassment to agency officials, such as the Department PREA Coordinator. They also may allow the offender to remain anonymous upon request. Should the facility have an offender detained solely for civil immigration purposes, the policy requires that the offender be provided with information on how they can contact the relevant consular officials and Department of Homeland Security officials. It should be noted that DCR does not normally house offenders solely for civil immigration purposes.

For the pre-onsite phase, the auditor contacted The HI Office of the Ombudsman was contacted. This entity will accept reports from offenders and send the report to the PREA Coordinator. Offenders can call the Ombudsman office using a two-digit speed dial and the offender will not be required to pay for the call.

(c) ADM.08.08 mandates that staff accept reports of sexual abuse, sexual harassment, or retaliation made verbally, in writing, anonymously, and from third parties. Staff shall immediately document all verbal reports of sexual abuse, sexual harassment, or retaliation by immediately notifying superiors through the chain of command.

(d) ADM.08.08 provides avenues for a staff member to privately report incidents of offender sexual abuse, offender sexual harassment, or retaliation as outlined above in provision (a).

Onsite the auditor tested the offender phones and found the quick dial on the new vendor video phone system was not connecting to the reporting options. The auditor also identified that the offender's phone instructions for the quick dial reporting option were only posted over one video phone. The PREA Coordinator and backup PCM took immediate action, learning there was an issue with the phone vendor impacting this facility and other facilities that recently the new video phones installed.

Post-onsite, the agency PREA Coordinator provided documentation the phone vendor had corrected the phone connections and updated the quick dial options. For corrective action, the auditor and the facility mutually agreed that the facility would provide photos of the quick dial instruction posted by all the offender phones, they tested the phone reporting options and provided confirmation the test call had been received. A final analysis of the evidence indicates the facility is substantially in compliance and no additional corrective action was required.

Conclusion: Based on the review and analysis of all available evidence, the auditor

determined that they are substantially compliant with this standard and its provisions.

115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).

Policy(s) and supporting documentation

- DCR policy ADM.08.08: Prison Rape Eliminate Act
- DCR policy COR.12.03 Offender Grievance Program

Interviews

- Target offenders

(a) COR.12.03 outlines the administrative procedures available to offenders for reporting incidents of sexual abuse, sexual harassment, or retaliation.

(b) ADM.08.08 references COR.12.03 when offenders utilize a grievance for PREA incidents including the agency mandates that there shall be ‘no time limits or deadlines for filing a grievance that is reporting an alleged incident of sexual abuse. DCR shall not restrict the processing of an offender’s grievance regarding an allegation of sexual abuse, the filing of a grievance time frame is still applicable to any portion of the grievance that does not allege an incident of sexual abuse. DCR does not require an offender to utilize the informal grievance process for grievances alleging incidents of sexual abuse and the statutory or legal provisions of the statute of limitations are applicable to any civil action in court proceedings

(c) ADM.08.08 states offenders may submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. This grievance shall not be referred to by the staff member who is the subject of the grievance complaint.

(d) ADM.08.08 grievance policy and timelines may differ from the PREA requirement that a decision on the merits of the grievance or portion of a grievance alleging sexual abuse be made within ninety (90) days of the filing of the grievance.

1. Computation of the PREA 90-day time period does not include time consumed by offenders in preparing any administrative appeal.
2. DCR may claim an extension of time to respond, of up to seventy (70) days if the normal time period for responding is insufficient to make an appropriate decision. The agency will DCR shall notify the offender in writing of any such extension and provide a date by which a decision will be made.
3. At any level of the administrative process, including the final level, if the offender does not receive a response within the time allotted for a reply, including any properly noticed extension, the offender may consider the absence of a response to be a denial at that level.

(e) ADM.08.08 permits third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, to assist offenders in filing requests for administrative remedies relating to allegations of sexual abuse and they may file such requests on behalf of offenders.

(f) ADM .08.08 indicates that the grievance policy establishes procedures for filing an Emergency Grievance alleging that an offender is subject to a substantial risk of imminent sexual abuse. An initial response is provided within forty-eight (48) hours, after receiving an emergency grievance alleging an offender is subject to a substantial risk of imminent sexual abuse. Staff are required to immediately forward the grievance or any portion thereof alleging a substantial risk of imminent sexual abuse to a level of review where immediate corrective action may be initiated. The agency will issue a final agency decision within five (5) calendar days and will include a determination as to whether the offender is at substantial risk of imminent sexual abuse, and it shall describe the action taken in response to the emergency grievance.

(g) ADM.08.08 indicates the agency may initiate a misconduct violation against an offender for filing a grievance or reporting related to alleged sexual abuse or sexual harassment when the agency has demonstrated that the offender filed the grievance or report in bad faith.

For the pre-onsite phase review of the PAQ the facility did not receive any grievances filed by an offender reporting sexual abuse or imminent threat of sexual abuse. Documentation reviewed in conjunction with 115.22 and 115.71 did not indicate a grievance had been filed by an offender reporting sexual abuse or imminent threat of sexual abuse. For the onsite phase interviews with staff and offenders supported the triangulation of information. There was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.

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

Auditor Discussion

The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. Reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).

Policy(s) and supporting documentation

- DCR policy ADM.08.08: Prison Rape Elimination Act
- Sexual Abuse Treatment Center (SATC) contract
- PREA posters
- Offender brochures

Interviews

- Random offenders
- Community Victim Advocate

(a) ADM.08.08 requires DCR to provide offenders with access to outside victim advocates for support services related to sexual abuse by doing the following:

1. Providing offenders with the mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations. DCR’s service provider is the SATC and its relevant outer island providers.
2. Providing offenders with mailing addresses and telephone numbers (including toll-free hotline numbers where available) for immigrant services agencies for persons detained solely for civil immigration purposes.
3. Enabling reasonable communication between offenders and these organizations in as confidential a manner as possible, while balancing the good government and orderly running of the facility.

(b) ADM.08.08 DCR medical and mental health staff will inform offenders, before giving them access to outside support services, of the extent to which such communications will be monitored. Offenders will be informed of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply for disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law.

(c) DCR maintains agreements with community service providers through SATC based on the awarded contract by the Executive Branch. The SATC provides offenders with emotional support services related to sexual abuse. DCR maintains a copy of the grant awarded to SATC to document the relationship and obligations for SATC and DCR.

	<p>For the pre-onsite phase, the auditor reviewed documentation and completed target interviews. The Sexual Abuse Treatment Center (SATC) is located on the Island of Oahu and subcontracts with victim advocate organizations on the outer Islands. SATC is the primary organization providing ongoing emotional support and their contact information is posted in all housing units contact information is included in the offender PREA education brochure; Pre-onsite phase and post-onsite the auditor made several attempts to the YWCA victim advocate executive director and was unsuccessful, however, offenders can contact SATC. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Agency public website • DCR public website <p>(a) ADM.08.08 requires that DCR provides public notice via DCR's website of the methods for third-party reports of offender sexual abuse or sexual harassment. DCR publicly distributes information on how to report offender sexual abuse or sexual harassment on behalf of offenders by posting on DCR's website the Departmental PREA Policy, PREA Handout, PREA poster, etc.</p> <p>For the pre-onsite phase, the auditor reviewed the agency's public website Department of Corrections and Rehabilitation PREA (hawaii.gov) for reporting options and contact information. The auditor called two of the four options listed on the website, DCR Internal Affairs Office (IAO) and DCR Deputy Directors offices. The auditor received a return call from one of the investigators assigned to IAO and a confirmation email from the PREA Coordinator who received the message via the Deputy Directors assistant. Onsite review, the audit team observed PREA posters</p>

	<p>throughout the facility including information posted in public areas that are accessible to others coming into the facility. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor has determined the facility meets substantial compliance with this standard.</p>
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115.61	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Warden • PREA Coordinator • Random staff • Target Medical and Mental Health staff <p>(a) ADM.08.08 states the agency requires that all staff immediately report any knowledge, suspicion, or information, they receive regarding staff neglect or violation of responsibilities that may have contributed to a PREA incident or retaliation</p> <p>(b) ADM.08.08 prohibits staff from revealing any information related to a sexual abuse report to anyone other than and to the extent necessary to manage treatment, investigation, and other security decisions, inclusive of reporting to the designated supervisors or officials and designated State or local service agencies.</p> <p>(c) ADM.08.08 states unless otherwise precluded by federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse and inform offenders of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.</p> <p>For the pre-on-site phase target interviews with medical and mental health practitioners, affirmed they are required to disclose the limitations of confidentiality</p>

and their duty to report as a mandatory reporter.

(d) ADM.08.08 requires incidents involving an alleged victim under the age of eighteen (18) or considered a vulnerable adult under a state or local 'vulnerable person's statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws. Hawaii Revised Statute (HRS) §346, Part X: Adult Protective Services, defines a "vulnerable adult" as a person eighteen (18) years of age or older who because of mental, developmental, or physical impairment, is unable to:

- Communicate or make responsible decisions to manage his/her own resources;
- Carry out or arrange for essential activities of daily living; or
- Protect oneself from abuse, including physical abuse, psychological abuse, sexual abuse, financial exploitation, caregiver neglect, or self-neglect.

For the pre-onsite phase, the auditor reviewed HRS §346, Part X: Adult Protective Services, which mandates that personnel employed in health care, social services, LE, and financial assistance are required to report suspected abuse or neglect of a vulnerable adult. The law mandates reporting when there is reason to believe abuse has occurred or the vulnerable adult is in danger of abuse if immediate action is not taken.

(e) ADM.08.08 states the agency shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, through the chain of command, and a copy of the report shall be forwarded to the PREA Coordinator.

For the onsite phase interviews with target and random staff affirmed they understand the DCR policy to immediately report allegations of sexual abuse, sexual harassment, and retaliation. Staff stated that reported incidents are confidential and should not be shared with anyone other than those having a need and right to know the information. In conjunction with standard 115.31, staff stated offenders have many options for reporting incidents of sexual abuse and sexual harassment, including verbally to staff and offenders can request to remain anonymous. In conjunction with standard 115.22, the pre-onsite phase document review supported the reporting policy and practice. There was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).

Policy(s) and supporting documentation

- DCR policy ADM.08.08: Prison Rape Elimination Act

Interviews

- Director
- Warden
- Random staff
- Target staff

(a) ADM.08.08 states that when the department or facility staff learns that an offender is subject to a substantial risk of imminent sexual abuse, the party shall take immediate action to protect the offender. The policy defines immediate action as “assessing appropriate protective measures without unreasonable delay.”

For the pre-onsite phase target interviews, the Director and the Warden described the process the agency and facility are to follow when an offender reports an imminent threat of sexual abuse. This includes staff who receive the report, who will separate the victim and aggressor and notify the watch commander. The PCM will meet with victims, assess available information, and assign the offender to an area they feel safe. Reviewing the PAQ, the facility did not have an offender placed in isolation for reporting sexual abuse or an imminent threat of sexual abuse.

On-site review, target, and random staff interviews they stated offenders would not be placed in isolation and they could not recall an instance where a victim was housed in isolation. Physical plant review only observed two offenders in isolation and confirmed neither reported sexual abuse nor threat of sexual abuse. There was no corrective action to take.

Conclusion: Based on the review and analysis of all available evidence, the auditor determined that they are substantially compliant with this standard and its provisions.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, "Offender" and "Inmate" are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as "Offender." On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).

Policy(s) and supporting documentation

- DCR policy ADM.08.08: Prison Rape Elimination Act

Interviews

- Director
- Warden

(a) ADM.08.08 outlines procedures for reporting incidents of sexual abuse to other confinement facilities:

1. Upon receiving an allegation that an offender was sexually abused while confined at a non-DCR facility, the receiving facility Head or Warden shall immediately notify the non-DCR facility Head or Warden of the PREA sexual abuse allegation.
2. The Facility Head or Warden shall include the department PREA Coordinator in the formal notification to the non-DCR facility, via "Carbon Cop" for email notifications, or by emailing the fax transmittal to the head of the facility for fax notifications
3. Upon receiving an allegation that an offender was sexually abused while confined at a DCR facility, the receiving Facility Head or Warden shall immediately notify the alleged DCR Facility Head or Warden of the PREA sexual abuse allegation.
4. The Facility Head or Warden at the receiving facility shall include the department PREA Coordinator in the formal notification to the DCR facility, via "Carbon Copy" for email notifications, or by emailing the fax transmittal to the head of the facility for fax notifications.

(b) ADM.08.08: The Facility Head or Warden shall provide such notification as soon as possible, but no later than seventy-two (72) hours after receiving the allegation.

(c) ADM.0.08: The Facility Head or Warden shall document that he/she has provided such notifications within seventy-two (72) hours of receiving the allegation.

(d) ADM.08.08: The Facility Head or Warden shall require and advise the non-DCR or DCR facility that the allegation must be investigated as required by PREA Standards.

For the pre-on-site target interviews, the Director and the Warden described the

	<p>process that is followed and their responsibility when an offender reports an incident of sexual abuse that occurred at another facility or agency and described the procedures staff will take after receiving a report from another agency or facility and the assignment of an investigation. Reviewing the PAQ the facility did not receive a report from another agency or facility or an offender reporting an allegation occurring at another facility. In conjunction with standard 115.22, documentation was reviewed affirming PAQ and interviews. There was no corrective action to take.</p> <p>Conclusion: Based upon review and analysis of all available evidence, the auditor determined that they are substantially compliant with this standard and its provisions.</p>
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • DCR 8313 PREA Incident Checklist <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Target staff • Target offender • Random staff <p>(a) ADM.08.08 outlines the requirements for the first person who receives a report of sexual abuse. DCR’s first responder policy dictates that, upon learning of an allegation that an offender was sexually abused, the first staff member, who ideally would be a security staff member, to respond to the reported incident is required to:</p> <ul style="list-style-type: none"> • Separate the alleged victim and abuser; • Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence by county LE and IA; • If the abuse occurred within a time period (DCR Health Care Division's standard is seventy-two (72) hours) that still allows for the collection of

physical evidence, staff will request that the alleged victim and ensure 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.

(b) ADM.08.08 requires that if the first staff responder is not a security staff member, the staff responder shall separate the victim and abuser, if feasible, request that the alleged victim not take any actions that could destroy evidence, and then immediately notify security staff.

For the pre-onsite phase target interview with the PCM and reviewing the PAQ, the facility did not receive any reported incidents of sexual abuse. For the onsite interviews with random staff affirmed their knowledge of the first responder duties and reviewing the offender admission report the facility did not have any offenders who had reported sexual abuse at this facility. There was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they are meeting substantial compliance with this standard and standard provisions.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably, and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Facility Coordinated Response Plan <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Warden • Target Staff • Random Staff <p>(a) ADM.08.08 requires each facility to develop a facility-specific written institutional</p>

	<p>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. Each facility's written institution plan must incorporate the DCR 8313 checklist and after a reported PREA incident, the facility will send a copy of DCR 8313 to the PREA Coordinator.</p> <p>For the pre-onsite phase target interview with the Warden, they stated when a report of sexual abuse is reported security staff notify the Watch Commander who will initiate the coordinated response protocols. In conjunction with standards 115.22 and 115.71, reviewing the PAQ and documentation this facility did not receive a reported incident of sexual abuse. The facility utilizes DCR 8313 for all reported incidents of sexual abuse and sexual harassment following applicable sections.</p> <p>For the onsite phase interviews with random and target staff affirmed they have knowledge and understanding when receiving, reporting, and responding to a report of sexual abuse. At the time of the onsite review, the facility did not have any offenders who had reported sexual abuse at this facility. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Hawaii Government Employees Association, AFSCME Local 152 • United Public Workers-Unit 10 <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Director • Warden <p>(a) ADM.08.08 outlines the preservation of the ability to protect offenders from contact with abusers. DCR or any other governmental entity responsible for collective bargaining on DCR's behalf shall not enter into or renew any collective bargaining agreement (CBA) or other similar agreement that limits DCR's ability to remove alleged staff sexual abusers from contact with any offender pending the outcome of</p>

	<p>an investigation or in the determination of whether and to what extent discipline is warranted.</p> <p>Nothing in the PREA standards shall restrict the entering into or renewal of a CBA or similar agreement related to:</p> <ul style="list-style-type: none"> • The conduct of the disciplinary process as long as said CBA or similar agreement is not inconsistent with PREA standard §115.72 (evidentiary standard) and §115.76 (disciplinary action); or • Whether a non-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. <p>For the pre-onsite phase, the Director and the Warden affirmed the agency or facilities can remove staff from contact with offenders pending the outcome of the investigation. Depending upon the severity of the allegation, there are several options for separation, i.e. reassigned to a non-offender contact position in the facility, transferred to another facility, or staff can be placed on administrative leave. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined the facility meets substantial compliance with this standard.</p>
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115.67	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably, and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Director • Warden

- PREA Compliance Manager (PCM)

(a) ADM.08.08 outlines protection measures for all offenders and staff who report sexual abuse or sexual harassment or cooperate with a sexual abuse or sexual harassment investigation, from retaliation by other offenders, staff, or others.

(b) ADM.08.08 requires DCR to utilize multiple protection measures, such as housing changes or transfers for offender victims or abusers, removal of alleged staff or offender abusers from contact with victims, and emotional support services for offenders or staff; when the individual fears or experiences retaliation for reporting sexual abuse or sexual harassment or for cooperating with a PREA investigation.

(c - d) ADM.08.08 states the facility will monitor the offender or staff for a period of no less than ninety (90) days following a report of sexual abuse. The PCM, in conjunction with the Warden and other staff, shall monitor the conduct and treatment of offenders or staff who reported sexual abuse to see if there are any changes that may suggest possible retaliation by other offenders or staff. If it has been determined that the offender has suffered retaliation, then staff shall initiate proactive measures to promptly remedy any retaliation. The PCM and the Warden shall:

- Act promptly to remedy any such retaliation and report their actions through the chain of command.
- Monitor any offender disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff.
- Continue such monitoring beyond ninety (90) days, if the initial monitoring indicates a continuing need
- In the case of offenders, monitoring by the Facility PREA Compliance Manager shall also include periodic status checks, preferably conducted weekly, at a minimum.
- The facility or DCR staff shall document all incidents of retaliation and the minimum ninety (90) day monitoring requirement, described under this section on the PREA Mandated Reporting Form (DCR 8317).

(e) If any other individual, who cooperates with an investigation expresses a fear of retaliation, then DCR shall take appropriate measures to protect that individual against retaliation.

(f) ADM.08.08 states that the obligation of the PCM, Warden, and/or Sheriff to monitor shall terminate if the investigation concludes that the allegation is unfounded.

Pre-onsite phase interviews and document review. The Director stated that the agency and facility have the authority to reassign staff during an investigation including reported incidents of retaliation by staff or other offenders. The Warden stated they are aware that retaliation monitoring is completed by the PCM/Lt. The facility recently appointed a new PCM who was still learning the responsibilities of the PCM, and they did not fully understand the retaliation monitoring requirements. Reviewing the PAQ and documentation in conjunction with 115.22 the facility has not

	<p>received any reported incidents of sexual abuse or sexual harassment from the time they were designated at the PCM and during the twelve-month audit time frame the facility had only received one reported incident of sexual harassment not requiring retaliation monitoring. For the on-site phase, the facility did not have any reported incidents of sexual abuse or harassment to review retaliation monitoring documentation. The auditor recommended the PREA Coordinator provide guidance to the new PCM on retaliation monitoring procedures. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor has determined that the facility is meeting substantial compliance with this standard and standard provisions.</p>
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115.68	Post-allegation protective custody
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably, and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Warden • Target staff <p>(a) ADM.08.08 states that any use of involuntary segregated housing to protect an offender post allegation, who is alleged to have suffered sexual abuse, is subject to the requirements referenced under 27.0 of this policy. (Refer to standard 115.43 of this audit report)</p> <p>For the pre-onsite phase review of the PAQ and in conjunction with standard 115.43 the facility did not have any offenders housed in involuntary segregation during this audit time frame. The auditor interviewed the Warden who stated the facility has not placed any offenders in involuntary segregation. During the onsite review phase, the facility did not have any offenders housed in segregation and observations affirmed they did not have victims of sexual abuse housed in involuntary segregation or</p>

	<p>holding. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined that they meet substantial compliance with this standard.</p>
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <p>DCR policy ADM.08.08: Prison Rape Elimination Act Investigation report</p> <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Warden • PREA Compliance Manager/Facility Investigator • PREA Coordinator • IA Investigator <p>(a) ADM.08.08 requires the agency to conduct an administrative investigation into an allegation of sexual abuse and/or sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. The agency does not have Peace Officers to conduct criminal investigations and will contact the county LE on their respective island who will conduct all criminal sexual abuse and criminal sexual harassment investigations. The county LE has the responsibility to make the required referrals for criminal prosecution if warranted.</p> <p>(b) ADM.08.08 requires that if sexual abuse is alleged, a DCR IA investigator, who has received specialized training in sexual abuse investigations will conduct the administrative investigation unless the Director has authorized the facility to conduct the administrative investigation. The facility investigator must have received the specialized training in sexual abuse investigations referenced in policy.</p> <p>(c) ADM.08.08 requires DCR investigators to take the following actions:</p>

- Gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data.
- Interview alleged victims, suspected perpetrators, and witnesses, unless a delay of an interview of a victim is requested by county LE.
- Review prior complaints and reports of sexual abuse involving the suspected perpetrator.

(d) ADM.08.08 states that when the quality of evidence appears to support a criminal prosecution, DCR shall conduct compelled interviews of staff by affording the staff member Garrity Warnings. DCR Investigators should consult with county LE or prosecutors as to whether a compelled interview may be an obstacle for subsequent criminal prosecution.

(e) ADM.08.08 indicates that the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined merely by the person's status as an offender or staff member. DCR staff does not require an offender, who alleges sexual abuse, to submit to a polygraph examination, computer voice stress analysis (CVSA), or other truth-telling device as a condition for proceeding with the investigation.

(f) ADM.08.08 states administrative investigations shall include:

- An effort to determine whether staff actions or failures to act contributed to the abuse, and
- Written reports shall include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative findings of facts.

(g - h) ADM.08.08 outlines procedures for criminal investigations:

- The county LE agency for each island is delegated with conducting all criminal sexual abuse and criminal sexual harassment investigations.
- The county LE agency is charged with the responsibility to make the required referrals for criminal prosecution if warranted.
- The procedures for criminal investigations conducted by county LE shall be dictated by their policies. In practice, the county's LE procedures do require a written report that contains a thorough description of the physical, testimonial, and documentary evidence.
- The county LE shall refer substantiated allegations of conduct based on their investigative process that appears to be criminal for prosecution.

(i) ADM.08.08 requires that DCR retains all written reports referenced above under provision (f) (2) b) for as long as the alleged abuser is incarcerated or employed by DCR, plus an additional five (5) years.

(j) ADM.08.08 states that the departure of the alleged abuser or victim from employment or custody of the facility or DCR shall not provide a basis for terminating an investigation. The investigator shall complete the investigation by formulating a conclusion that the allegation is substantiated, unsubstantiated, or unfounded.

(k) (l) ADM.08.08 states that any County, State, or Department of Justice agencies conducting such investigations shall do so pursuant to DCR policy and this standard. When an external agency is charged with investigating an incident of sexual abuse, the facility shall cooperate with the outside investigators and shall endeavor to remain informed about the progress of the outside agency investigation.

For the pre-onsite phase, target PCM and Investigator interview protocol guides were utilized. They stated they have conducted many administrative investigations over the years and completed the specialized training required under standard 115.34. The staff is new to the PCM responsibilities and at the time of their appointment to this role, the facility has not received any reported incidents of sexual harassment or sexual abuse. They described the investigation process including communicating with outside LE for investigation meeting potential criminal violations. The agency's internal affairs administrative investigator has many years of investigative experience and described the investigation process affirming they have received training and understand how to complete a thorough investigation. In conjunction with 115.22, the facility had not received reported incidents in the calendar year 2024, and in 2023 they had one reported incident of offender-on-offender sexual harassment. The auditor utilized the PREA auditor investigation guide when reviewing the investigation report provided to the auditor. There was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor has determined the facility meets substantial compliance with this standard and standard provision.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 1570 544 1603">Auditor Discussion</p> <p data-bbox="256 1648 1457 1890">The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, "Offender" and "Inmate" are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as "Offender." On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p data-bbox="256 1928 898 1962">Policy(s) and supporting documentation</p> <ul data-bbox="331 2033 1090 2067" style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act

	<p><u>Interviews</u></p> <ul style="list-style-type: none"> • PCM/Facility investigator • OIA Investigator <p>(a) ADM.08.08 states the agency shall not impose an evidentiary standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>For the pre-onsite phase interviews, the facility and agency IA investigator described the level of preponderance of evidence when determining a substantiated finding. In conjunction with standard 115.71/ At the time of this audit, this facility only received and investigated one incident of offender-on-offender sexual harassment closed unsubstantiated, as such the determination of compliance was based on policy and interviews. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined the facility meets substantial compliance with this standard.</p>
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably, and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Warden • Facility Investigator/PCM • IA Investigator <p>(a) ADM.08.08: Upon completion of an investigation (administrative or criminal) into an offender’s allegation that he/she suffered sexual abuse in a DCR facility, facility staff shall inform the offender as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.</p>

(b) DCR policy: If the facility or DCR did not conduct the investigation, the facility, or DCR shall request the relevant information from the external investigative agency in order to inform the offender of the results.

(c) ADM.08.08 outlines offender notifications following an allegation that a staff member has committed sexual abuse against an offender. The facility or DCR shall subsequently inform the offender (unless DCR had determined that the allegation is unfounded) whenever:

1. The staff member is no longer posted within the offender's unit;
2. The staff member is no longer employed at the facility;
3. The facility or DCR learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
4. The facility or DCR learns that the staff member has been convicted on a charge related to sexual abuse within the facility

(d) ADM.08.08 outlines offender notifications following an allegation that he/she has been sexually abused by another offender in a DCR facility, the facility or DCR shall subsequently inform the alleged victim whenever:

1. The facility or DCR learns that the alleged abuser has been indicted on a charge related to sexual abuse with the facility; or
2. The facility or DCR learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility

(e) ADM.08.08: The facility or DCR shall document all notifications to offenders described under this section on the PRA Mandated Reporting Form (DCR 831) and send a copy to the PREA Coordinator.

(f) ADM.08.08: The facility's or DCR's obligation to report under this section shall terminate if the offender victim is released from DCR's custody

For the pre-on-site phase interviews, the Warden stated the Lt. / PCM provides notifications to the offenders. The PCM was recently appointed to this position and at the time of this audit, the facility had not received any reported incidents of sexual abuse or sexual harassment. In conjunction with standard 115.71, the auditor reviewed their 2023 investigation of sexual harassment not requiring a notification. The auditor recommended that the PREA Coordinator provide some guidance to the new PCM on offender notification procedures. There was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor determined the facility meets substantial compliance with this standard and standard provisions.

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).

Policy(s) and supporting documentation

- DCR policy ADM.08.08: Prison Rape Elimination Act

Interviews

- Warden
- Investigator

(a) ADM.08.08 states that staff are subject to disciplinary sanctions up to and including termination for PREA sexual abuse or sexual harassment policy violations.

(b) ADM.08.08 states that termination shall be the presumptive disciplinary sanction for all staff, who, after an investigation and pre-disciplinary due process hearing, have been found to have engaged in sexual abuse.

(c) ADM.08.08 indicates that disciplinary sanctions for violations of DCR policies relating to sexual abuse and 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 personnel and disciplinary history, and the sanctions imposed for comparable offenders by other staff with similar employment histories.

(d) ADM.08.08 states that all terminations for violations of PREA sexual abuse or sexual harassment policies, or resignations by staff, who would have been terminated, if not for their resignation, shall be reported to LE agencies unless the activity was clearly not criminal. DCR shall also report the incident to any relevant licensing body applicable to the staff member, such as but not limited to social work, educational, physician, or nursing licensing bodies.

For the pre-on-site phase, interviews with the Warden and investigators stated investigations would not stop based on a staff member resigning or terminated employment. In conjunction with standards 115.22 and 115.71, the facility did not have any reporting incidents or investigations involving staff during this audit time and there was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions

115.77	Corrective action for contractors and volunteers
	<p data-bbox="256 188 959 224">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 300">Auditor Discussion</p> <p data-bbox="256 340 1458 584">The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p data-bbox="256 622 900 658"><u>Policy(s) and supporting documentation</u></p> <ul data-bbox="331 723 1091 759" style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act <p data-bbox="256 797 427 833"><u>Interviews</u></p> <ul data-bbox="331 898 475 934" style="list-style-type: none"> • Warden <p data-bbox="256 972 1458 1133">(a) ADM.08.08 states DCR requires that any contractor or volunteer, who engages in sexual abuse is prohibited from contact with offenders and shall be reported to county LE unless the activity was clearly not criminal. DCR shall also report the incident to any relevant licensing body applicable to the contractor or volunteer</p> <p data-bbox="256 1171 1458 1288">(b) ADM.08.08: DCR shall take appropriate remedial measures and consider whether to prohibit further contact with offenders in the case of other violations not covered under the above paragraph, such as sexual harassment by a contractor or volunteer.</p> <p data-bbox="256 1326 1469 1736">For the pre-onsite phase interviews, the Warden stated if they received a report of sexual abuse or sexual harassment involving a volunteer or contractor, an administrative investigation would be assigned and if there were potential criminal violations outside Law Enforcement would be contacted. The agency and facility would temporarily restrict volunteer or contractor access pending the outcome of the investigation and if there was a substantiated finding, the volunteer or contractor would be removed from the approved volunteer list. In conjunction with 115.22 and 115.71 documentation provided did not indicate any reported incidents of sexual abuse or sexual harassment involving a contractor or volunteer. There was no corrective action to take.</p> <p data-bbox="256 1774 1481 1890">Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>

115.78	Disciplinary sanctions for inmates
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Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, "Offender" and "Inmate" are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as "Offender." On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).

Policy(s) and supporting documentation

- DCR policy ADM.08.08: Prison Rape Elimination Act
- DCR policy COR.13.03: Adjustment Procedures Governing Serious Misconduct Violations and the Adjustment of Minor Misconduct Violations
Incident/Investigation log

Interviews

- Warden
- PCM/Investigator
- Target Medical and Mental Health staff

(a) ADM.08.08 states that offenders are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual abuse or sexual harassment. In conjunction with ADM.08.08, COR.13.03 section 5.0 Misconduct Rule Violations and Sanctions.

(b) ADM.08.08 states sanctions will be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders. In conjunction with ADM.08.08, COR.13.03 section 5.0 Misconduct Rule Violations and Sanctions.

(c) ADM.08.08 states the disciplinary process shall consider whether an offender's mental disability or mental illness contributed to his/her behavior when determining what type of sanction, if any, should be imposed.

(d) ADM.08.08 states agency medical and mental health staff shall provide therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for abuse. The medical and mental health practitioners and facility staff shall consider whether to require the offending offender to participate in such interventions as a condition of access to programming, privileges, or other benefits.

Pre-onsite interview with mental health. This facility does have a program, however, offenders approved for the program have a sexual conviction through courts and are

required to attend per court order as a condition for parole or discharge.

(e) ADM.08.08 states the agency shall discipline offenders for sexual contact with staff only upon finding that the staff member did not consent to such contact. This type of incident shall result in a reassessment of the offender and be documented utilizing the PREA Screening Tool DCR 8314.

(f) ADM.08.08 states the agency shall not discipline an offender for reporting sexual abuse made in good faith and based upon a reasonable belief that the alleged conduct occurred. This is applicable if an investigation does not establish evidence sufficient to substantiate the allegation.

(g) ADM.08.08: DCR prohibits all sexual activity or sexual contact between offenders and shall discipline offenders for such activity or contact. DCR shall not deem such activity to constitute sexual abuse if it determines that the activity is consensual or not coerced. In conjunction with ADM.08.08, COR.13.03 section 5.0 Misconduct Rule Violations and Sanctions.

For the pre-onsite phase interviews, the Warden and facility PCM stated investigations resulting in a substantiated finding of sexual abuse or sexual harassment, the suspect would receive disciplinary charges. The hearing officer will consider an offender's mental disability or mental illness when determining sanctions. In conjunction with 115.22 and 115.71 the investigation was closed unsubstantiated. There was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p>Policy(s) and supporting documentation</p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • The facility documentation/screenshot • DOC 0404A Authorization to Release Medical Information

Interviews

- Target offenders
- Target staff who conduct risk screening
- Target Medical and Mental Health staff

(a) ADM.08.08 states that any offender who has disclosed prior sexual victimization during an intake screening within policy requirements referenced in standard 115.41, whether it occurred in an institutional setting or in the community the offender shall be offered a follow-up meeting with a medical or mental health practitioner within fourteen (14) days of the intake screening.

(b) ADM.08.08 states when an offender discloses any previous perpetration of sexual abuse during an intake screening within policy requirements referenced in standard 115.41 shall be offered a follow-up meeting with a mental health practitioner within fourteen (14) days of the intake screening.

(c) DCR jail facilities follow the requirements referenced above under provision (a)

(d) ADM.08.08 states that any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to formulate treatment plans and/or security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by federal, State, or local law.

(e) ADM.08.08 states medical and mental health staff shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting unless the offender is under the age of eighteen (18). This provision does not apply to non-medical or non-mental health staff.

For the pre-onsite phase target interviews, medical and mental health practitioners stated this standard is primarily the responsibility of mental health staff. When they receive a referral from staff for services in conjunction with 115.41, they will meet with the offender within fourteen days. Medical and Mental Health staff stated offenders are informed of the limits of confidentiality at the initiation of services. For the onsite phase target staff interviews affirmed offenders are offered mental health. Reviewing the facility's positive screening report provided on day one of the onsite audit, the facility did not have any offenders who had reported sexual abuse in confinement or a history of sexual victimization. There was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor has determined the facility meets substantial compliance with this standard and standard provision.

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, "Offender" and "Inmate" are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as "Offender." On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).

Policy(s) and supporting documentation

- DCR policy ADM.08.08: Prison Rape Elimination Act

Interviews

- Target Medical and Mental Health staff

(a) ADM.08.08 states offender victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which will be determined by medical and mental health staff according to their professional judgment.

(b) ADM.08.08 states if qualified medical or mental health is not on duty at the time of a report of recent sexual abuse, the security staff or first responder shall take preliminary steps to protect the victim as dictated in policy referenced under standards 115.61 and 115.64. Staff shall immediately notify medical or mental health staff by telephone to the on-call physician or when reporting for duty.

(c) ADM.08.08 states offender victims reporting sexual abuse, while incarcerated shall be offered timely information about and provided timely access to emergency contraception and sexually transmitted infections prophylaxis and in accordance with the professionally accepted community standards of care, where medically appropriate.

(d) ADM.08.08 states treatment services are provided to every victim without financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

For the pre-onsite phase, the PAQ was reviewed, and they did not have reported incidents of sexual abuse. Target interviews with medical and mental health staff stated offenders reporting sexual abuse are offered services immediately or the next business day. They will assess the type of treatment plan and schedule follow-up services as needed or as requested by the offender. Offenders are not charged for treatment or any related follow-up services. At the time of the onsite audit, the facility did not have any offenders who reported sexual abuse requiring crisis intervention

	<p>and emergency medical response and treatment. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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<p>115.83</p>	<p>Ongoing medical and mental health care for sexual abuse victims and abusers</p>
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Target offenders • Target Medical and Mental Health staff <p>(a) ADM.08.08 states the agency shall offer medical and mental health evaluations and, as appropriate, treatment to all offenders (including external referrals), who have been a victim of sexual abuse in any prison, jail, lockup, or juvenile facility. The evaluation and treatment of such victims includes, 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> <p>(b) ADM.08.08 states the evaluation and treatment of such victims includes, 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> <p>(c) ADM.08.08 requires the agency to provide offender victims of sexual abuse with medical and mental health services consistent with the community standard level of care.</p>

(d - e) ADM.08.08 requires offender victims of sexually abusive vaginal penetration, while incarcerated shall be offered pregnancy tests. If pregnancy results from sexual abuse while incarcerated, offender victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. This provision is not applicable to this facility audit.

(f) ADM.08.08 requires offender victims of sexual abuse, while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

(g) ADM.08.08 states treatment services shall be provided to the offender victim without financial cost and, regardless of whether the offender victim names the accused or cooperates with any investigation arising out of the incident.

(h) The DCR policy ADM.08.08 addresses this standard provision.

For the pre-onsite phase target interviews, medical and mental health stated offenders are offered services consistent with the community level of care and at no cost to the offender including any follow-up services, and treatment plans are provided when necessary. Reviewing the PAQ in conjunction with 115.22 and 115.71, this facility did not have any reported incidents of sexual abuse. Onsite, the facility did not have any offenders who reported sexual abuse at this facility. There was no corrective action to take.

Conclusion: Based on the review and analysis of all available evidence, the auditor determined the facility meets substantial compliance with this standard and standard provisions.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Sexual Abuse Incident Review form (DCR 8319) <p><u>Interviews</u></p>

- Warden
- PREA Coordinator
- PREA Compliance Manager
- Target staff member participates in Sexual Abuse Incident Reviews

(a) ADM.08.08 indicates that the Warden in conjunction with the Facility PREA Compliance Manager shall schedule a Sexual Abuse Incident Review (SAR) at the conclusion of every sexual abuse investigation that renders a finding that the allegation was substantiated or unsubstantiated unless the allegation has been determined to be unfounded.

(b) ADM.08.08 states the facility SAR shall ordinarily occur within thirty (30) days of when the Warden has been informed of the conclusion of the investigation and its findings, excluding allegations determined to be unfounded.

(c) ADM.08.08 requires the SAR to include upper-level management officials, with input from line supervisors, investigators, and medical or mental health staff.

(d) ADM.08.08 states the SAR team shall document the following information on DCR 8319 form.:

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.

The recorder or reporting team member will document the SAR findings on DCR 8319 including, but not limited to a determination made under the above paragraph (d) (1-5), and any recommendation for improvement.

(e) ADM.08.08 The SAR report will be forwarded to the Warden for completion. The Warden shall determine whether the recommendations from the SAR team will be implemented or document the reasons for not implementing the recommendations.

For the pre-on-site phase review of the PAQ and target interviews, this facility did not receive any reported incidents of sexual abuse. There was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.

115.87	Data collection
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 340 1458 584">The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p data-bbox="256 622 900 656"><u>Policy(s) and supporting documentation</u></p> <ul data-bbox="331 723 1090 842" style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Agency Annual Report • Agency Survey of Sexual Violence Report <p data-bbox="256 882 432 916"><u>Interviews</u></p> <ul data-bbox="331 983 616 1016" style="list-style-type: none"> • PREA Coordinator <p data-bbox="256 1057 1481 1218">(a) ADM.08.08 states that the PREA Coordinator shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control by utilizing a standardized format based on PREA Definitions (definitions included within ADM.08.08 section 5.0 pages 6 through 14)</p> <p data-bbox="256 1256 1401 1330">(b) ADM.08.08: The PREA Coordinator shall aggregate the incident-based sexual abuse data at least annually.</p> <p data-bbox="256 1368 1469 1487">(c) ADM.08.08: The standardized format includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice, Bureau of Justice Statistics.</p> <p data-bbox="256 1525 1458 1644">(d) ADM.08.08: The PREA Coordinator shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and SARs.</p> <p data-bbox="256 1682 1469 1800">(e) ADM.08.08: At least once a year, the Mainland Branch Unit shall report to the PREA Coordinator for all incident-based and aggregated data from any private facility with whom it contracts for the confinement of DCR offenders.</p> <p data-bbox="256 1839 1481 1957">Pre-onsite document review, this auditor reviewed the agency's annual report on their public website, including incident data from private contract CoreCivic Facility, Saguaro Correctional Center.</p> <p data-bbox="256 1995 1481 2069">(f) ADM.080.08: DCR shall provide all such data from the previous calendar year to the Department of Justice’s Survey of Sexual Violence, no later than June 30th of each</p>

	<p>year.</p> <p>For the pre-on-site phase, the auditor interviewed the PREA Coordinator. They stated data collected and aggregated in compliance with standard 115.88 is retained and secured in the litigation office. Facility PCMs are responsible for providing information to the PREA Coordinator and maintaining data in a secure location. This auditor reviewed DCR's SSV and the agency's annual reports via the Department of Corrections and Rehabilitation (hawaii.gov). There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • 2023 Annual Prison Rape Elimination Act Report • Department of Corrections and Rehabilitation (hawaii.gov) <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Director • PREA Coordinator <p>(a) ADM.08.08 indicates that the PREA Coordinator is responsible for reviewing data collected and aggregated pursuant to the policy requirements referenced above in standard 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training. The PREA Coordinator shall prepare an annual report of DCR’s findings and any corrective actions for each facility and the agency as dictated by HRS §353-C.</p> <p>(b) ADM.08.08 states the annual report will include a comparison of the current year’s data and corrective actions with those from prior years and shall provide an</p>

	<p>assessment of DCR’s progress in addressing sexual abuse.</p> <p>(c) ADM.08.08 requires that the annual report be approved by the Director and the agency ensures it is readily available on DCR’s departmental website.</p> <p>(d) ADM.08.08: DCR may redact specific material when publication would present a clear and specific threat to the safety and security of a facility. A notation should be made to indicate the nature of the material redacted.</p> <p>For the pre-onsite phase, this auditor interviewed the Director and the PREA Coordinator. The PREA Coordinator completes the agency's annual report and strives to take proactive measures to correct areas that may not be meeting substantial compliance They consistently review information submitted by facility PCMs throughout the year, including but limited to reported incidents, tracking logs, and conduct internal audit on-site reviews. Information is compiled for review to summarize in the annual reports that are provided to the Director for review and approval before posting reports on the agency's public website. There was no corrective action to take.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.</p>
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115.89	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence when determining compliance with this standard. In reviewing policies, “Offender” and “Inmate” are used interchangeably and for purposes of this report, the auditor will refer to an incarcerated person as “Offender.” On January 1, 2024, the Department of Public Safety (DCR) was re-designated as the Department of Corrections and Rehabilitation (DCR).</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Agency public website - Department of Corrections and Rehabilitation (hawaii.gov) <p><u>Interviews</u></p> <ul style="list-style-type: none"> • PREA Coordinator

(a) ADM.08.08 indicates that the PREA Coordinator will ensure incident-based and aggregated data are securely retained.

(b) ADM.08.08 indicates that the PREA Coordinator 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 DCR’s departmental website.

For the pre-onsite phase, the auditor reviewed the agency's public website and found the agency's annual PREA reports and the annual reports for contracted facilities.

(c) ADM.08.08 states the PREA Coordinator will remove all personal identifiers and comply with federal and state statutes, HRS §92(F), Uniform Information Practices Act, before publishing the data.

(d) ADM.08.08 states the PREA Coordinator will maintain the sexual abuse data collected based on information outlined in policy under standard 115.87 which states for at least ten (10) years after the date of the initial collection unless federal, state, or local laws require otherwise.

For the pre-onsite phase interviews, the PREA Coordinator stated they receive and review all documentation to compile data for the annual PREA report. The report does not include any personal identifying information and is provided to the Director for review before posting it on the agency's public website. All documentation and supporting information are maintained within locked file cabinets or secured electronically in encrypted folders. Facility PREA Compliance Managers are required to maintain documentation in filing cabinets in a secure location. There was no corrective action to take.

Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with this standard and standard provisions.

115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The auditor triangulated relevant documentation, interviews, and available evidence related to this standard to determine compliance.</p> <p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • Agency public website Department of Corrections and Rehabilitation (hawaii.gov)

	<p>(a) DCR directly operates four jails (to include HCCC) and four prisons, and the agency houses additional offenders on the mainland in a privately operated facility. The DCR policy ADM.08.08 outlines the auditing requirements with the agency posting on the DCR’s website and all audits were completed by DOJ-certified auditors. Department of Corrections and Rehabilitation (hawaii.gov)</p> <p>(b) This is the third audit year of audit cycle four.</p> <p>(h, i, m, n) While on-site the audit team had access and the ability to observe all areas of the facility. The auditor received copies of any requested documents from the PCM or designee, and the facility provided space where the auditors could interview staff and offenders with a level of privacy. The audit notifications were posted throughout the facility and clearly articulated that letters to the auditor would not be discussed unless required by law. The auditor did not receive letters from offenders or staff during any phase of this audit.</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with the standard and standard provisions indicated in the PAQ and this report.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>Policy(s) and supporting documentation</u></p> <ul style="list-style-type: none"> • DCR policy ADM.08.08: Prison Rape Elimination Act • KCF PAQ • Agency public website <p><u>Interviews</u></p> <ul style="list-style-type: none"> • Agency PREA Coordinator <p>(f) The auditor reviewed the agency's public website; DCR directly operates four jails (to include HCCC) and four prisons and houses additional inmates on the mainland in a privately operated facility. The agency began receiving audits in the first year of the first cycle with all facility audits being completed by DOJ-certified PREA auditors. Facilities' final audit reports have been posted on DCR’s website and are available to the public at the Department of Corrections and Rehabilitation (hawaii.gov)</p> <p>Conclusion: Based upon the review and analysis of all available evidence, the auditor determined they meet substantial compliance with the standard and standard provisions indicated in the PAQ and this report.</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.)	na
	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	na

	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)?	na
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.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	no

	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).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	no
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	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.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

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

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

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
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.)	yes
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).	na
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.)	na
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.)	na
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.)	yes

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

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