

PREA Facility Audit Report: Final

Name of Facility: Gloria McDonald Women's Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 05/16/2023

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: Matthew Taylor	Date of Signature: 05/16/ 2023

AUDITOR INFORMATION	
Auditor name:	Taylor, Matthew
Email:	mtaylor@azadc.gov
Start Date of On-Site Audit:	03/30/2023
End Date of On-Site Audit:	03/31/2023

FACILITY INFORMATION	
Facility name:	Gloria McDonald Women's Facility
Facility physical address:	20 Fleming Road, Cranston, Rhode Island - 02920
Facility mailing address:	- 02919

Primary Contact	
Name:	Heather Daglieri
Email Address:	heather.daglieri@doc.ri.gov
Telephone Number:	401-462-3087

Warden/Jail Administrator/Sheriff/Director	
Name:	Donna Collins, Warden
Email Address:	donna.collins@doc.ri.gov
Telephone Number:	401-462-2364

Facility PREA Compliance Manager	
Name:	Lisa Santagata-O'Neill
Email Address:	lisa.santagata@doc.ri.gov
Telephone Number:	O: 401-462-3127

Facility Health Service Administrator On-site	
Name:	Christopher Salas
Email Address:	christopher.salas@doc.ri.gov
Telephone Number:	401-462-1115

Facility Characteristics	
Designed facility capacity:	237
Current population of facility:	130
Average daily population for the past 12 months:	112
Has the facility been over capacity at any point in the past 12 months?	No

Which population(s) does the facility hold?	Females
Age range of population:	21-67
Facility security levels/inmate custody levels:	Awaiting Trial, Minimum, Medium, Work Release
Does the facility hold youthful inmates?	Yes
Number of staff currently employed at the facility who may have contact with inmates:	108
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	698
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	698

AGENCY INFORMATION

Name of agency:	Rhode Island Department of Corrections
Governing authority or parent agency (if applicable):	State of Rhode Island
Physical Address:	40 Howard Avenue, Cranston, Rhode Island - 02920
Mailing Address:	
Telephone number:	4014622611

Agency Chief Executive Officer Information:

Name:	Wayne Salisbury, Jr., Acting Director
Email Address:	wayne.salisbury@doc.ri.gov
Telephone Number:	401-462-3952

Agency-Wide PREA Coordinator Information

Name:	Heather Daglieri	Email Address:	heather.daglieri@doc.ri.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

1	<ul style="list-style-type: none"> • 115.42 - Use of screening information
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Number of standards met:

44	
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Number of standards not met:

0	
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POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-03-30
2. End date of the onsite portion of the audit:	2023-03-31

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	The auditor communicated in advance of the audit with Just Detention International. They responded during the onsite portion of the audit and reported there were no reports or concerns associated with The Rhode Island Department of Corrections as a whole.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	237
15. Average daily population for the past 12 months:	112
16. Number of inmate/resident/detainee housing units:	5
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	120
37. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	0
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	3
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	2
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	1
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	1
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0

<p>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</p>	<p>1</p>
<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>3</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>6</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>54</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>95</p>

50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	698
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	698
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	The total number of volunteers/contractors provided by the PREA Coordinator represents the total number that can access all RIDOC facilities.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	10
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None

<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>On the first day of the audit the auditor was provided inmate rosters of all housing units. I randomly selected inmates from different pods/housing units based on age, race, ethnicity and housing units. Overall facility was very small and separation from housing units was minimal.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>12</p>
<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>	
<p>59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/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/detainees.</p> <p><input type="checkbox"/> The inmates/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/detainees).</p>	<p>Facility inmate rosters confirmed there were no youthful inmates housed at the facility.</p>
<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Facility staff reported there were no limited English proficient inmates in the facility at the time of the onsite audit.</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>N/A</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Facility staff reported there were currently no inmates determined to be limited English proficient at the time of the onsite audit.</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>1</p>

<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>2</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>2</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>2</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Facility reported as a matter of practice, they do not place inmates in segregated housing for risk of sexual victimization.</p>

70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
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Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

71. Enter the total number of RANDOM STAFF who were interviewed:	12
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72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
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73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
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Specialized Staff, Volunteers, and Contractor Interviews

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

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	17
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76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

Yes

No

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

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

Yes

No

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

Yes

No

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

Yes

No

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

Yes

No

<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>No text provided.</p>
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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>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p>91. 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.

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	35	0	35	0
Staff-on-inmate sexual abuse	4	0	4	0
Total	39	0	39	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	19	0	19	0
Staff-on-inmate sexual harassment	6	0	6	0
Total	25	0	25	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	1	8	20	6
Staff-on-inmate sexual abuse	0	3	1	0
Total	1	11	21	6

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	2	16	1
Staff-on-inmate sexual harassment	0	2	4	0
Total	0	4	20	1

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

6

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input 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>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>3</p>
<p>101. 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>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE 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 abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>3</p>
<p>104. Did your sample of STAFF-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 staff-on-inmate sexual abuse investigation files)</p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE 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 staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>2</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input 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>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>2</p>
<p>109. 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>110. 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	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

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

<p>121. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
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<p>Identify the name of the third-party auditing entity</p>	<p>PREA Auditors of America</p>
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Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility (WF) Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • RIDOC Organizational Chart • Interviews: Agency PREA Coordinator and facility PREA Compliance Manager <p>Reasoning and analysis (by provision):</p> <p>115.11(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • WF has a written policy mandating zero tolerance toward all forms of sexual abuse

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

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

2. RIDOC Policy 9.49-5

- The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment.
- The policy includes sanctions for those found to have participated in prohibited behaviors.
- The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates.

Findings:

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

115.11(b)

1. The facility PAQ:

- The agency employs or designates an upper-level, agency-wide PREA Coordinator.
- The PREA Coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.

2. RICOC Organizational Chart:

- The PREA Coordinator reports to the Assistant Director of Institutions & Operations ("ADIO") and the ADIO reports to the Director.

3. Interview:

- Agency PREA Coordinator Heather Daglieri:

i. Interview with the PREA Coordinator indicated she had sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.

Finding:

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

115.11(c)

1. The facility PAQ:

- WF has a designated PREA Compliance Manager.

2. RIDOC Organizational Chart

- The PREA Compliance Manager holds the position of facility Deputy Warden.
- The PREA Compliance Manager reports directly to the Warden.

3. Interview: PREA Compliance Manager Deputy Warden Lisa Santagata

- Interview with the PREA Compliance Manager indicated has sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

Findings:

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

	corrective action is not required.
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire <p>Reasoning and analysis (by provision):</p> <p>115.12(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • RIDOC does not contract with private agencies or other entities for the confinement of inmates. • WF has a policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. <p>Findings:</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>115.12(b)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The RIDOC does not contract with private agencies or other entities for the confinement of inmates. <p>Finding:</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

- Gloria McDonald Women's Facility Pre-Audit Questionnaire
- Pre-Audit Questionnaire
- Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy
- Women's Facility Building Specific Procedures
- PREA Unannounced Rounds Training
- 2022 PREA Unannounced Rounds Log
- RIDOC PREA Staffing Plan Annual Review
- Interviews: Warden, Agency PREA Coordinator, facility PREA Compliance Manager, Intermediate or Higher-Level Facility Staff
- Site Review Observations

Reasoning and analysis (by provision):

115.13(a)

1. The facility PAQ:

- WF has a written staffing plan which is used to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against abuse.

2. WF Post Requirements:

- The WF Post Requirements were reviewed for all shifts.

3. Interviews:

- Warden Donna Collins:

i. Interview with the Warden indicated that they use the staffing plan to assist their efforts to protect inmates but nothing takes the place of appropriate staffing levels. She indicated that the facility was a direct supervision facility and that they conduct constant audits to determine staffing additions.

- PREA Compliance Manager Deputy Warden Lisa Santagata:

i. Interview with the PREA Compliance Manager she appropriately addressed the following criteria: (1) Generally accepted detention and correctional practices;

(2) Any judicial findings of inadequacy;

(3) Any findings of inadequacy from Federal investigative agencies;

(4) Any findings of inadequacy from internal or external oversight bodies;

(5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated);

- (6) The composition of the inmate population;
- (7) The number and placement of supervisory staff;
- (8) Institution programs occurring on a particular shift;
- (9) Any applicable State or local laws, regulations, or standards;
- (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- (11) Any other relevant factors.

Findings:

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

115.13(b)

1. The facility PAQ:

- The facility indicated "N/A" as they have not had any deviations to the staffing plan.

Finding:

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

115.13(c)

1. The facility PAQ:

- The facility indicates that at least once every year the facility in collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed to: (a) the staffing plan, (b) the deployment of monitoring technology, or (c) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan.

2. RIDOC PREA Staffing Plan Annual Review:

- Annual WF PREA Staffing Plans were provided from 2018-2022.

3. Interview:

- Agency PREA Coordinator Heather Daglieri

i. Interview with the Agency PREA Coordinator indicated that she is directly consulted regarding any assessments of, or adjustments to, the staffing plan for WF. She also indicated that assessments occurred minimally once per year.

Findings:

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

	<p>115.13(d)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The facility indicates that requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. • The facility documents unannounced rounds. • Unannounced rounds cover all shifts. • Policy prohibits staff from alerting other staff of the conduct of such rounds. <p>2. RIDOC Policy 9.49-5</p> <ul style="list-style-type: none"> • Agency PREA policy requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. <p>3. 2022 PREA Unannounced Rounds Log</p> <ul style="list-style-type: none"> • Unannounced Rounds Log were reviewed. <p>4. Interviews:</p> <ul style="list-style-type: none"> • Intermediate or Higher-Level Facility Staff <p>i. Interviews of multiple intermediate and higher-level facility staff were conducted. All staff indicated that they conduct unannounced rounds, that they are documented and how they prevent staff from alerting other staff that they are conducting the rounds. They all cited policy on conducting unannounced rounds.</p> <p>5. Site Review:</p> <ul style="list-style-type: none"> • The auditor observed supervision practices. <p>Findings: Based on this analysis, the facility substantially compliant with this provision and corrective action is not required.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 12.26-5 Special Management of Juvenile Offenders • Rhode Island Department of Corrections (RIDOC) Policy 9.33-6 Inmate Housing Assignments • CY22-23 CapMidnight Count • CY21 Draft Final • Site Review Observations

	<p>Reasoning and analysis (by provision):</p> <p>115.14(a)(b)(c)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • WF has reported that they have housed zero youthful inmates in their facility over the last 12 months. <p>Findings:</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.14-9 Detecting and Confiscating Contraband on Inmates/Detainees or in Inmate Transport Vehicles • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy. • Interviews: Non-medical staff (involved in cross-gender strip or visual searches), Random Staff, Random Inmates and Transgender/Intersex Inmates. • PRC Training Video • Women’s Facility General and Specific Post Order #6 • Women’s Facility Training Records • Site Review Observations <p>Reasoning and analysis (by provision):</p> <p>115.15(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency prohibits cross-gender strip searches or cross-gender visual body cavity searches or inmates. • In the past 12 months the facility has conducted zero cross-gender strip searches and zero body cavity searches of inmates.

- In the past 12 months, the facility has conducted zero cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff:

2. RIDOC Policy 9.14-9:

- Strip searches must be conducted by correctional officers of the same sex as the inmate being searched except during emergencies.

3. Interview:

- Non-medical staff involved in cross-gender strip or visual searches

i. An interview was conducted with a non-medical staff member involved in cross-gender strip or visual searches indicated they have never conducted a cross-gender pat, strip, or visual searches.

4. Site Review:

- The auditor observed the committing area where strip searches are commonly conducted. The assigned location to conduct strip searches is in a private area that is free from camera view. It did not appear that staff of the opposite gender could pass by this area and see inmates in a state of undress.

Findings:

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

115.15(b)

1. The facility PAQ:

- The agency prohibits cross-gender pat-down searches of female inmates, absent of exigent circumstances.
- The agency does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.
- The facility has performed zero pat-down searches of female inmates that were conducted by male staff.
- The facility has performed zero pat-down searches of female inmates by male staff that have not involved exigent circumstances.
- The facility only houses female inmates.

Finding:

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

115.15(c)

1. The facility PAQ:

- Agency policy requires that all cross-gender strip searches and cross-gender visual body cavity searches be documented.
- The facility does not house male inmates.

2. RIDOC Policy 9.14-9

- In an emergency, if it is necessary for a Correctional Officer(s) to strip search an

inmate(s) of the opposite sex, the officer must obtain approval from Shift Command prior to conducting the search. Shift Command will note the approval of the opposite sex strip search on the shift command report, to be included in the daily package.

Findings:

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

115.15(d)

1. The facility PAQ:

- The agency has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks.
- The agency has policies and procedures that require staff of the opposite gender to announce their presence when entering an inmate housing unit.

2. RIDOC Policy 9.49-5:

- Each facility shall allow 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.
- All RIDOC staff shall announce their presence when entering an inmate housing unit of the opposite gender where there is not already another cross-gender staff present.

3. Interviews:

• Random Inmates:

- i. The auditor questioned multiple random inmates if staff of the opposite gender announced their presence prior to entering the housing area. Overwhelmingly inmates reported that male staff announced their presence prior to entering the housing unit runs. Inmates reported there was signage the facility uses to advise inmates of opposite gender staff presence could easily be seen.
- ii. Multiple random inmates were questioned on if they felt they were in full view of staff of the opposite gender while naked. Overwhelmingly inmates indicated that they could shower and use the toilet with privacy and could not be viewed in a state of undress.

• Random Staff:

- i. The auditor questioned multiple random staff if they announced their presence (if of the opposite gender) prior to entering a housing unit. All staff questioned indicated that was common practice and required by policy.
- ii. Staff also indicated that inmates had the ability to shower and perform bodily functions without being viewed by staff of the opposite gender.

4. Site Review:

- Signage was observed throughout the facility reminding staff of the opposite gender to announce their presence prior to entering a housing unit.
- The auditor observed that staff of the opposite gender were announcing their presence prior to entering cellblocks on a consistent basis.

- The facility has signage that is always present in the housing areas when staff of the opposite gender are assigned to that post.
- Electronic surveillance was not able to see into shower or bathrooms areas and record inmates in a state of undress.

Findings:

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

115.15(e)

1. The facility PAQ:

- The facility has a policy prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.
- WF has had zero searches or physical examinations of transgender or intersex inmates for the sole purpose of determining their genital status in the past 12 months.

2. RIDOC Policy 9.14-9:

- A gender diverse or intersex inmate shall not be randomly strip searched or physically examined by custody staff as a form of harassment or to determine the inmate's genital status.

3. Interviews:

• Random staff:

i. The auditor questioned multiple random staff about the policy prohibiting staff from searching or physically examining a transgender or intersex inmate for the purpose of determining that inmate's genital status. All staff were aware of that prohibition.

• Transgender/Intersex Inmates:

i. The auditor interviewed two transgender inmates. Both inmates indicated that have not been housed in areas that are only for transgender inmates. Both inmates also indicated that they have never been strip searched for the purpose of determining their genital status.

ii.

Findings:

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

115.15(f)

1. The facility PAQ:

- WF reported 100 percent of their security staff have received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs.

	<p>2. Interviews:</p> <ul style="list-style-type: none"> • Random Staff <p>i. The auditor questioned multiple random staff on training they have received related to cross-gender pat-down searches and searches of transgender or intersex inmates. All staff indicated they have received that training and that they receive it yearly.</p> <p>Findings:</p> <p>Based on this analysis, the facility substantially compliant with this provision and corrective action is not required.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 1.13-1 Limited English Proficiency Individuals • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy. • Certified Spanish Interpreters Spreadsheet • Multiple Written and Audio Materials Used for Effective Communications About PREA • PREA Brochures • Telephonic Interpretation Instructions • Interviews: Agency Head, Inmates with Disabilities or who are Limited English Proficient and Random Staff • Staff Training Records • Site Review Observations <p>Reasoning and analysis (by provision):</p> <p>115.16(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency has established procedures to provide disabled inmates 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.

2. RIDOC Policy 1.13-1:

- The agency policy dictates that all 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. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision.

3. Interviews:

- Interim Director Wayne Salisbury

- i. The auditor conducted an interview the acting Director who fully explained the established procedures that are provided to inmates with disabilities and inmates that are limited English proficient that have equal opportunity to participate or benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment

- Inmates with disabilities or who are limited English proficient

- i. The auditor conducted interviews with inmates with a cognitive disability, with a physical disability and those that were limited English proficient. All inmates indicated that they were provided information about sexual abuse and sexual harassment that they were able to understand.

4. Site Review:

- The auditor observed, reviewed and tested multiple mechanisms the facility had in place to assist inmates with disabilities or those who were limited English proficient.

- Staff interpreters were readily available throughout the facility.

- Telephonic interpretation services are readily available to inmates by inmate telephone.

Findings:

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

115.16(b)

1. The facility PAQ:

- The agency has established procedures to provide inmates with limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

2. RIDOC Policy 9.49-5

- Each facility shall 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.

- Each facility shall provide inmates with limited English proficiency with meaningful access to all aspects of the agency's efforts to prevent, detect and respond to sexual

abuse and sexual harassment, including access to interpreters.

3. Interviews:

- Inmates with disabilities or who are limited English proficient
- i. The auditor conducted interviews with inmates with a cognitive disability and with a physical disability. All inmates indicated that they were provided information about sexual abuse and sexual harassment that they were able to understand.

Findings:

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

115.16(c)

1. The facility PAQ:

- Agency policy prohibits use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations.
- The agency documents the limited circumstances in individual cases where inmate interpreters, readers, or other types of inmate assistants are used.
- In the last 12 months there have been zero instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations:

2. RIDOC Policy 9.49-5

- The RIDOC prohibits use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties, or the investigation of the inmate's allegations.

3. Interviews:

- Inmates with disabilities or who are limited English proficient.
- i. The auditor conducted interviews with inmates with a cognitive disability and with a physical disability. All inmates indicated that they were provided information about sexual abuse and sexual harassment that they were able to understand.
- Random Staff
- i. The auditor conducted interviews with random staff and all staff indicated that they do not use inmate interpreters, readers or other types of inmate assistants to assist inmates with disabilities or inmates that are limited English proficient.

Findings:

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

115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy. • Rhode Island Department of Corrections (RIDOC) Policy 3.14-4 Staff Code of Ethics and Conduct • Rhode Island Department of Corrections (RIDOC) Policy 9.50-1 Office of Inspection • Hiring Manual SOP • Employee File Reviews • Interviews: Human Resource Staff <p>Reasoning and analysis (by provision):</p> <p>115.17(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who: (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. <p>2. RIDOC Policy 9.49-5:</p> <ul style="list-style-type: none"> • RIDOC shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor, volunteer, or intern 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; or been civilly or administratively adjudicated to have engaged 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. <p>3. Employee File Reviews:</p> <ul style="list-style-type: none"> • The auditor completed multiple employee file reviews. All file reviews completed indicated that all staff hired or promoted within the last 12 months have had proper criminal record background checks and questions regarding past conduct were asked and answered.

Findings:

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

115.17(b)

1. The facility PAQ:

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

2. RIDOC Policy 9.49-5:

- RIDOC shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, volunteer, or intern who may have contact with inmates.

3. Interview:

- Human Resource Staff

i. The auditor interviewed the human resource staff member/administrator. She indicated that the facility considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, volunteer, or intern who may have contact with inmates.

Finding:

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

115.17(c)

1. The facility PAQ:

- Agency policy requires that before it hires any new employees who may have contact with inmates, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.

- In the past 12 months, there have been 24 persons hired who may have contact with inmates who have had criminal background record checks.

2. RIDOC Policy 9.49-5:

- Before hiring new employees and as part of any promotional process, RIDOC shall conduct appropriate background checks on all applicants and employees. Consistent with Federal, State, and local law, RIDOC shall 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.

3. Interview:

- Human Resource Staff

i. The auditor interviewed the human resource staff member/administrator. She indicated the agency performs criminal record background checks or consider

pertinent civil or administrative adjudications for all newly hired employees who may have contact with inmates and all employees, who may have contact with inmates, who are considered for promotions. She also indicated this was also done for any contractor that has contact with inmates.

Findings:

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

115.17(d)

1. The facility PAQ:

- The agency requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates.
- In the past 12 months, there were 80 contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates.

2. RIDOC Policy 9.49-5:

- Contractors, volunteers, and interns shall have a criminal background check conducted at least every 2 years.

3. Interview:

- Human Resource Staff

i. The auditor interviewed the human resource staff member/administrator. She indicated the agency performs criminal record background checks or consider pertinent civil or administrative adjudications for all newly hired employees who may have contact with inmates and all employees, who may have contact with inmates, who are considered for promotions. She also indicated this was also done for any contractor that has contact with inmates.

4. Employee File Reviews:

- The auditor conducted multiple employee/contractor file reviews. All contractor files indicated a criminal background check was completed prior to enlisting the services of the contractor.

Findings:

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

115.17(e)

1. The facility PAQ:

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

2. RIDOC Policy 9.49-5:

- Employees shall have a criminal background check conducted at least every 5

years.

3. Interview:

- Human Resource Staff

i. The auditor interviewed the human resource staff member/administrator. She explained the process for conducting criminal background checks of current employees and contractors who may have contact with inmate. She also indicated that these checks are completed every five years for employees and every two years for contractors.

4. Employee File Reviews:

- The auditor conducted multiple staff/contractor file reviews and determined that all staff were consistently having criminal background checks completed in at least every five years. Contractors and volunteers were completed every two years.

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

115.17(f)

1. Interview:

- Human Resource Staff

i. The auditor interviewed the human resource staff member/administrator. She indicated the agency asks 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 and in any interviews or written self- evaluations conducted as part of reviews of current employees.

ii. She also indicated the agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.

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

115.1(g)

1. The facility PAQ:

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

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

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Interviews: Agency Head and Warden <p>Reasoning and analysis (by provision):</p> <p>115.18(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • WF 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. • This provision is not applicable to the facility. <p>Findings:</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>115.18(b)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The facility has 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. <p>2. Interviews:</p> <ul style="list-style-type: none"> • Agency Acting Director Wayne Salisbury <p>i. The auditor interviewed the acting director who indicated that they are also looking at facility infrastructure, line of sight, staff posting and actively designing operations with adherence to the PREA Standards.</p> <p>Finding:</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

- Gloria McDonald Women’s Facility Pre-Audit Questionnaire
- Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy.
- Rhode Island Department of Corrections (RIDOC) Policy 9.50-1 Office of inspection
- Rhode Island Department of Corrections (RIDOC) Policy 9.16-1 Procedure for Protecting Gathering and Preserving Evidence
- Rhode Island Department of Corrections (RIDOC) Policy 9.42-3 Special Investigations Unit
- PREA Sexual Abuse Investigations SOP
- Contract with Counseling and Psychotherapy Center Inc.
- Interviews: Random Staff, PREA Compliance Manager, Inmates who Reported Sexual Abuse,
- MOU with Rhode Island State Police
- General Order -53B Collection, Preservation and Analysis of Evidence
- General Order -77A Criminal Investigation
- General Order -77B Major Crimes Investigation

Reasoning and analysis (by provision):

115.21(a)

1. The facility PAQ:

- The agency/facility is responsible for conducting administrative sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct).
- The agency/facility is not responsible for conducting criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct).
- The Rhode Island State Police are responsible for conducting criminal sexual abuse investigations.
- When conducting a sexual abuse investigation, the agency investigators follow a uniform evidence protocol.

2. Multiple RIDOC Policies and Rhode Island State Police General Orders

- Multiple policies reviewed for both RIDOC and Rhode Island State Police illustrating an appropriate uniform evidence protocol.

3. Interview:

- Random Staff

i. The auditor conducted multiple interviews with random staff throughout the facility. All staff questioned were able to articulate the agency’s protocol for obtaining usable physical evidence for an inmate who reported sexual abuse.

ii. Staff were also aware that sexual abuse and sexual harassment allegations were conducted both internally by RIDOC investigators and externally by the Rhode Island State Police.

Findings:

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

115.21(b)

1. The facility PAQ:

- The protocol is developmentally appropriate for youth.
- The protocol was adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

Finding:

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

115.21(c)

1. The facility PAQ:

- The facility offers all inmates who experience sexual abuse access to forensic medical examinations. If no, skip to 115.21 (d)-1.
- The facility does not offer inmates who experience sexual abuse access to forensic medical examinations onsite.
- The facility does offer all inmates who experience sexual abuse access to forensic medical examinations at an outside facility.
- Forensic medical examinations are offered without financial cost to the victim.
- Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs).
- When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations.
- The facility does not document efforts to provide SANEs or SAFEs.
- There were zero forensic medical exams conducted during the past 12 months.
- There were zero SANEs/SAFEs performed during the past 12 months.
- There were zero exams performed by a qualified medical practitioner during the past 12 months.

Findings:

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

115.21(d)

1. The facility PAQ:

- The facility attempts to make a victim advocate from a rape crisis center available to the victim, either in person or by other means.
- If and when a rape crisis center is not available to provide victim advocate services,

the facility provides a qualified staff member from a community-based organization or a qualified agency staff member.

2. Contract with Counseling and Psychotherapy Center Inc.

- Agency contract is in place to provide a victim advocate from a community based organization that provides emotional support services.

3. Interviews:

- Inmates who Reported Sexual Abuse:

- i. The auditor interviewed at least three inmates that reported sexual abuse while at the facility. All inmates reported that they were aware that they were aware of victim advocate services or did not wish to take advantage of that service.

- PREA Compliance Manager:

- i. The auditor interviewed the facility PREA Compliance Manager who reported that she was aware that victim advocacy was provided by Counseling and Psychotherapy Inc. and that the Agency PREA Coordinator is involved the process as well.

- Interview with Counseling and Psychotherapy Center (CPC)

- i. The auditor conducted an interview with CPC. They confirmed they are under contract to provide emotional support to inmates for RIDOC.

Findings:

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

115.21(e)

1. The facility PAQ:

- If requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals.

2. Interviews:

- PREA Compliance Manager:

- i. The auditor interviewed the PREA Compliance Manager who indicated that the Department is currently under contract with Counseling and Psychotherapy Center Inc. which meets the criteria.

- Inmates who Reported Sexual Abuse:

- i. The auditor interviewed at least three inmates that reported sexual abuse while at the facility. All inmates reported that they were aware that they were aware of victim advocate services or did not wish to take advantage of that service.

Findings:

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

115.21(f)

1. The facility PAQ:

	<ul style="list-style-type: none"> • If the agency is not responsible for investigating administrative or criminal allegations of sexual abuse and relies on another agency to conduct these investigations, the agency has requested that the responsible agency follow the requirements of paragraphs §115.21 (a) through (e) of the standards. Check N/A if the agency/facility is responsible for conducting administrative and criminal sexual abuse investigations. <p>2. MOU with Rhode Island State Police:</p> <p>Findings: Based on this analysis, the facility substantially compliant with this provision and corrective action is not required.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy. • Rhode Island Department of Corrections (RIDOC) Policy 9.50-1 Office of inspection • Rhode Island Department of Corrections (RIDOC) Policy 9.16-1 Procedure for Protecting Gathering and Preserving Evidence • PREA Sexual Abuse Investigations SOP • PREA Administrative Investigations Memo • Interviews: Agency Head and Investigative Staff <p>Reasoning and analysis (by provision):</p> <p>115.22(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including inmate-on-inmate sexual abuse and staff sexual misconduct). • In the past 12 months, there have been a total of 32 allegations of sexual abuse and sexual harassment that were received. • In the past 12 months 32 allegations resulted in an administrative investigation. • In the past 12 months 1 allegation was referred for criminal investigation. • Four of the 32 administrative investigations are still under active investigation. <p>2. Interview:</p>

- Acting Director Wayne Salisbury:

- i. The auditor conducted an interview with the acting director of the agency who indicated that the agency absolutely investigates all allegations of sexual abuse and sexual harassment.

- ii. The acting director also described the dissemination of cases to the responsible divisions in RIDOC.

Findings:

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

115.22(b)

1. The facility PAQ:

- The agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior.
- The agency's policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the agency website or made publicly available via other means.
- The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation.

2. RIDOC Policy 9.49-5

- Every allegation of inmate sexual abuse and sexual harassment is thoroughly investigated and, where warranted by evidence, proportional sanctions up to and including criminal prosecution are implemented.

3. Interview:

- Investigative Staff:

- i. The auditor conducted an interview with Department investigative staff who indicated that agency policy requires allegations of sexual abuse and sexual harassment be referred for investigation. He also indicated that criminal sexual abuse investigations will be referred to the Rhode Island State Police.

Finding:

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

115.22(c)

1. The facility PAQ:

- The facility offers all inmates who experience sexual abuse access to forensic medical examinations. If no, skip to 115.21 (d)-1.
- The facility does not offer inmates who experience sexual abuse access to forensic medical examinations onsite.

	<ul style="list-style-type: none"> • The facility does offer all inmates who experience sexual abuse access to forensic medical examinations at an outside facility. • Forensic medical examinations are offered without financial cost to the victim. • Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). • When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations. • The facility does not document efforts to provide SANEs or SAFEs. • There were zero forensic medical exams conducted during the past 12 months. • There were zero SANEs/SAFEs performed during the past 12 months. • There were zero exams performed by a qualified medical practitioner during the past 12 months. <p>Findings: Based on this analysis, the facility substantially compliant with this provision and corrective action is not required.</p>
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115.31	Employee training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy. • RIDOC Employee Training Module • Employee Training Records File Reviews • RIDOC PREA Training Quiz • Interviews: Random Staff <p>Reasoning and analysis (by provision):</p> <p>115.31(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency trains all employees who may have contact with inmates on the agency’s zero-tolerance policy for sexual abuse and sexual harassment. • The agency trains 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. • The agency trains all employees who may have contact with inmates on the right of inmates to be free from sexual abuse and sexual harassment.

- The agency trains 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.
- The agency trains all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement.
- The agency trains all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims.
- The agency trains all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse.
- The agency trains all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates.
- The agency trains 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.
- The agency trains 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.

2. RIDOC Policy 9.49-5:

- All RIDOC employees shall receive training which includes, but is not limited to, all the requirements of the provision listed in the standards.

3. RIDOC Employee Training Module:

- Employee training module was reviewed.

4. Interviews:

- Random Staff:

i. The auditor conducted multiple random staff throughout the facility. All staff acknowledged that they have been trained on the Department's PREA training and that it includes all the requirements of the provision.

5. Employee Training Records File Reviews:

- The auditor reviewed multiple employee training records while at the facility. All employee files indicated that staff received PREA training on a yearly basis.

Findings:

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

115.31(b)

1. The facility PAQ:

- Training is tailored to the gender of the inmates at the facility.
- Employees who are reassigned from facilities housing the opposite gender are given additional training.

2. Employee Training Records File Reviews:

- The auditor reviewed multiple employee training records while at the facility. All employee files indicated that staff received PREA training on a yearly basis.

Finding:

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

115.31(c)

1. The facility PAQ:

- Between trainings the agency provides employees who may have contact with inmates with refresher information about current policies regarding sexual abuse and sexual harassment.
- Every 2 years employees who may have contact with inmates receive refresher training on PREA requirements. RIDOC shall provide each employee with refresher training every two (2) years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, RIDOC shall provide refresher information on the agency's current sexual abuse and sexual harassment policies.

2. Employee Training Records File Reviews:

- The auditor reviewed multiple employee training records while at the facility. All employee files indicated that staff received PREA training on a yearly basis. The auditor understands that training is provided every 2 years but refresher information is provided between the required 2-year interval.

Findings:

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

115.31(d)

1. The facility PAQ:

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

2. Employee Training Records File Reviews:

- The auditor reviewed multiple employee training records while at the facility. All employee files reviewed illustrated the employee's completion of training through electronic verification.

Findings:

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

115.32 Volunteer and contractor training

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- Gloria McDonald Women’s Facility Pre-Audit Questionnaire
- Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy.
- RIDOC Employee Training Module
- RIDOC Staff, Contractor, and Volunteer PREA Information Form
- Contractor and Volunteer Training Records File Reviews
- RIDOC PREA Training Quiz
- Interviews: Volunteers and Contractors

Reasoning and analysis (by provision):

115.32(a)

1. The facility PAQ:

- All volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.
- 698 volunteers and contractors, who may have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response

2. RIDOC Employee Training Module:

- Employee training module was reviewed.

3. Interviews:

- Volunteers and Contractors:

i. The auditor conducted multiple interviews with volunteers and contractors. All persons interviewed indicated that they had received the department’s training on their responsibilities regarding sexual abuse and sexual harassment.

4. Contractor and Volunteer Training Records File Reviews:

- The auditor reviewed volunteer and contractor training records while at the facility. All files reviewed illustrated compliance with the department’s PREA training requirements.

Findings:

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

115.32(b)

	<p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates. • All volunteers and contractors who have contact with inmates have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. <p>2. RIDOC Employee Training Module:</p> <ul style="list-style-type: none"> • Employee training module was reviewed. The module that volunteers and contractors receive is an abbreviated version of the employee training. <p>3. Interviews:</p> <ul style="list-style-type: none"> • Volunteers and Contractors: <ul style="list-style-type: none"> i. The auditor conducted multiple interviews with volunteers and contractors. Interviews indicated a basic understanding of the department's PREA policies and procedures. Additionally, all were aware of the department's zero tolerance policy. <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>115.32(c)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency maintains documentation confirming that volunteers and contractors understand the training they have received. <p>2. Contractor and Volunteer Training Records File Reviews:</p> <ul style="list-style-type: none"> • The auditor reviewed training records for contractors and volunteers which illustrated acknowledgement and understanding of the PREA training provided. <p>Findings: Based on this analysis, the facility substantially compliant with this provision and corrective action is not required.</p>
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

- Gloria McDonald Women’s Facility Pre-Audit Questionnaire
- Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy
- Inmate PREA Training Completion Examples
- PREA Orientation Videos
- WF SOP Orientation
- Interviews: Intake Staff and Random Staff
- PRC Training Video
- Site Review Observations

Reasoning and analysis (by provision):

115.33(a)

1. The facility PAQ:

- Inmates receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment.
- 1738 inmates admitted during past 12 months who were given this information at intake.

2. RIDOC Policy 9.49-5:

- During the intake and commitment process to each facility, inmates shall receive information explaining the RIDOC’s zero tolerance policy regarding sexual abuse and sexual harassment, and how to report such incidents or suspicions.

3. Interviews:

- Intake Staff:

i. The auditor conducted an interview with an intake staff member. She indicated that all inmates are provided information about zero-tolerance policy and how to reports incidents or suspicions of sexual abuse or sexual harassment.

ii. She reported that inmates are provided written documentation of the department’s PREA policy by brochures, educational videos and an initial PREA orientation.

Findings:

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

115.33(b)

1. The facility PAQ:

- There were 330 inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

2. Interview:

- Intake Staff:

i. The auditor conducted an interview with an intake staff member. She reported that inmates are provided written documentation of the department's PREA policy by brochures, educational videos and an initial PREA orientation.

ii. Intake staff also indicated that initial PREA education is done as soon as possible but certainly within 30 days of intake.

3. Inmate PREA Training Examples:

- The auditor reviewed the provided completed PREA training examples illustrating completion of the comprehensive education.

Finding:

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

115.33(c)

1. The facility PAQ:

- The facility reported that all inmates received comprehensive information within 30 days of intake.

- Agency policy requires that inmates who are transferred from one facility to another be educated regarding their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents, to the extent that the policies and procedures of the new facility differ from those of the previous facility.

2. Interview:

- Intake Staff

i. The auditor interviewed intake staff that indicated transferred inmates from other RIDOC are also provided comprehensive training on PREA to the extent that those procedures differ from the previous facility.

Findings:

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

115.33(d)

1. The facility PAQ:

- Inmate PREA education is available in formats accessible to all inmates, including those who are limited English proficient.

- Inmate PREA education is available in formats accessible to all inmates, including those who are deaf.

- Inmate PREA education is available in formats accessible to all inmates, including those who are visually impaired.

- Inmate PREA education is available in formats accessible to all inmates, including

those who are otherwise disabled.

- Inmate PREA education is available in formats accessible to all inmates, including those who are limited in their reading skills.

2. RIDOC Policy 9.49-5:

- Each facility shall 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.

- Each facility shall provide inmates with limited English proficiency with meaningful access to all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment, including access to interpreters.

3. Site Review:

- Signage was observed throughout the facility in Spanish and English. Written information is clear and provided at an appropriate reading-level and is accessible for all persons confined in the facility, including those who are limited English proficient. The facility provides interpreters, when needed, to assist Deaf and non-English speaking persons confined in the facility. Staff are prepared to read written information out loud, if applicable, to make accommodations for persons confined in the facility when necessary (e.g., Blind or have low vision, limited reading skills).

Findings:

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

115.33(e)

1. The facility PAQ:

- The agency maintains documentation of inmate participation in PREA education sessions.

2. Inmate PREA Training Examples:

- The auditor reviewed the provided completed PREA training examples illustrating completion of the comprehensive education.

3. Site Review:

- Signage was observed throughout the facility in Spanish and English. Written information is clear and provided at an appropriate reading-level and is accessible for all persons confined in the facility, including those who are limited English proficient. The facility provides interpreters, when needed, to assist Deaf and non-English speaking persons confined in the facility. Staff are prepared to read written information out loud, if applicable, to make accommodations for persons confined in the facility when necessary (e.g., Blind or have low vision, limited reading skills).

Inmate handbooks were also reviewed which provided PREA information.

Findings:

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

	<p>115.33(f)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • WF ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats. <p>2. Site Review:</p> <ul style="list-style-type: none"> • Signage was observed throughout the facility in Spanish and English. Written information is clear and provided at an appropriate reading-level and is accessible for all persons confined in the facility, including those who are limited English proficient. The facility provides interpreters, when needed, to assist Deaf and non-English speaking persons confined in the facility. Staff are prepared to read written information out loud, if applicable, to make accommodations for persons confined in the facility when necessary (e.g., Blind or have low vision, limited reading skills). Inmate handbooks were also reviewed which provided PREA information. <p>Findings: Based on this analysis, the facility substantially compliant with this provision and corrective action is not required.</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women's Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • RIDOC Investigator Training Records • Interviews: Investigative Staff <p>Reasoning and analysis (by provision):</p> <p>115.34(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • Agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings.

2. RIDOC Policy 9.49-5

- All staff in RIDOC's SIU and OI shall receive specialized training in conducting sexual abuse and sexual harassment investigations in a prison setting in addition to the standard RIDOC employee PREA training.

3. Interview:

- Investigative Staff:

i. The auditor interviewed an investigative staff member. He indicated that he and his staff all receive specialized training specific to conducting sexual abuse in confinement settings. He also provided a brief description of the type of training that was given by NIC.

4. RIDOC Investigator Training Records

- Training records were reviewed which illustrated compliance with completion of specialized training for investigating sexual abuse in confinement settings.

Findings:

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

115.34(b)

1. Interview:

- Investigative Staff:

i. The auditor interviewed an investigative staff member. He indicated the specialized training they all receive includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection techniques for confinement settings and the criteria for evidence required to substantiate a case for administrative or prosecution referral.

Finding:

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

115.34(c)

1. The facility PAQ:

- The agency maintains documentation showing that investigators have completed the required training.
- There are a total of 12 investigators currently employed who have completed the required training.

2. RIDOC Investigator Training Records

- Training records were reviewed which illustrated compliance with completion of specialized training for investigating sexual abuse in confinement settings.

	<p>Findings:</p> <p>Based on this analysis, the facility substantially compliant with this provision and corrective action is not required.</p>
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115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • Medical and Mental Health Training Records • Interviews: Medical and Mental Health Staff <p>Reasoning and analysis (by provision):</p> <p>115.35(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. • 9 medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy. • 100 percent of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy. <p>2. RIDOC Policy 9.49-5</p> <ul style="list-style-type: none"> • All full-time and part-time medical and mental health practitioners who regularly work in facilities shall receive specialized training related to sexual abuse and sexual harassment in addition to the standard RIDOC PREA training, for employees or for contractors, volunteers and interns depending upon the practitioner’s status. <p>3. Medical and Mental Health Training Records:</p> <ul style="list-style-type: none"> • The auditor reviewed training records of medical and mental health staff that illustrated training compliance as required by the standard and RIDOC policy. <p>4. Interview:</p> <ul style="list-style-type: none"> • Medical and Mental Health Staff: <ul style="list-style-type: none"> i. The auditor interviewed both medical and mental health staff at the facility. Both staff indicated that they have received training specific to requirements prescribed in 115.35. <p>Findings:</p>

	<p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>115.35(b)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency medical staff at this facility does not conduct forensic medical exams. <p>Finding:</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>115.35(c)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency maintains documentation showing that medical and mental health practitioners have completed the required training. <p>Findings:</p> <p>Based on this analysis, the facility substantially compliant with this provision and corrective action is not required.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.33-6 Inmate Housing Assignments • Memo for Facility-to-Facility Transfers - PREA Assessment • WF Risk Screening Examples • PREA 30 Day Review Example • Interviews: Staff Responsible for Risk Screening, Random Inmates, PREA Coordinator and PREA Compliance Manager • Site Review Observations

Reasoning and analysis (by provision):

115.41(a)

1. The facility PAQ:

- The agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other inmates.

2. RIDOC Policy 9.33-6:

- Inmates are screened during intake and upon transfer to another facility for risk of being sexually abused by other inmates or risk of being sexually abusive toward other inmates.

3. Interviews:

- Staff Responsible for Risk Screening:

- i. The auditor conducted an interview with the staff member responsible for the risk screening. They indicated that all inmates upon admission to the facility or transfer from another facility are screened for the risk of sexual abuse victimization or sexual abusiveness to others.

- Random Inmates:

- i. The auditor conducted interviews with random inmates throughout the facility and overwhelmingly they reported they were screened by staff at the facility for risk factors associated with sexual abuse.

4. Site Review:

- The auditor observed during the site review process where the risk screening was conducted, who the individual was that completed the risk screening and observed that the process was done in an area that was secure and confidential.

Findings:

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

115.41(b)

1. The facility PAQ:

- The policy requires that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake.

- 879 inmates entered the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility:

2. Interviews:

- Staff Responsible for Risk Screening:

- i. The auditor conducted an interview with a staff member responsible for risk screening. They reported that risk screening was completed within 72 hours of their initial intake.

- Random Inmates:

i. The auditor conducted interviews with multiple random inmates throughout the facility. Overwhelmingly inmates reported they were screened by staff at the facility for risk factors associated with sexual abuse.

Finding:

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

115.41(c)

1. The facility PAQ:

- The risk assessment is conducted using an objective screening instrument.

2. WF Risk Screening Example

Findings:

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

115.41(d)

1. Interview:

- Staff Responsible for Risk Screening:

i. The auditor interviewed the staff responsible for risk screening. They indicated that the screening tool minimally covers all the requirements of Standard 115.41.

Findings:

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

115.41(e)

1. Interview:

- Staff Responsible for Risk Screening:

i. The auditor interviewed the staff responsible for risk screening. They indicated that the screening tool minimally covers all the requirements of Standard 115.41.

Findings:

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

115.41(f)

1. The facility PAQ:

- The policy requires that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening.

- 330 inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more and who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake.

2. RIDOC Policy 9.33-6

- Risk levels shall be reassessed in a period not to exceed thirty (30) days from the date of the inmate's arrival at a facility and/or when warranted due to referral, request of the inmate, incident of sexual abuse, or receipt of additional information since the inmate's initial screening that bears on the inmate's risk of sexual victimization or abusiveness.

3. Interviews:

- Staff Responsible for Risk Screening:

- i. The auditor interviewed the staff responsible for risk screening. They indicated risk screening reassessment were completed within 30 days of arrival.

- Radom Inmates:

- i. The auditor interviewed multiple inmates throughout the facility. Most inmates reported they remembered talking to staff again about "PREA questions" after they arrived at the facility.

4. PREA 30 Day Review Examples:

- Reviews provided illustrated compliance with the 30-day review requirement.

Findings:

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

115.41(g)

1. The facility PAQ:

- The policy requires that an inmate's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

2. RIDOC Policy 9.33-6

- Risk levels shall be reassessed in a period not to exceed thirty (30) days from the date of the inmate's arrival at a facility and/or when warranted due to referral, request of the inmate, incident of sexual abuse, or receipt of additional information since the inmate's initial screening that bears on the inmate's risk of sexual victimization or abusiveness.

3. Interviews:

- Staff Responsible for Risk Screening:

i. The auditor interviewed the staff responsible for risk screening. They indicated that an inmate is reassessed due to referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

- Random Inmates:

i. The auditor interviewed multiple random inmates throughout the facility. Most inmates reported they remembered talking to staff again about "PREA questions" after they arrived at the facility.

4. PREA 30 Day Review Examples:

- Reviews provided illustrated reassessments were completed when warranted.

Findings:

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

115.41(h)

1. The facility PAQ:

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

2. RIDOC Policy 9.33-6.

- No inmate may be disciplined for refusing to answer questions during this screening.

3. Interview:

- Staff Responsible for Risk Screening:

i. The auditor interviewed the staff responsible for risk screening: They indicated that inmates are not disciplined in any way for refusing to respond to questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9).

Findings:

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

115.41(i)

	<p>1. Interviews:</p> <ul style="list-style-type: none"> • Agency PREA Coordinator: <ul style="list-style-type: none"> i. Agency PREA Coordinator Heather Daglieri was interviewed. She reported that RIDOC has implemented procedures and protocols to protect information related to an inmate’s risk assessment. Information is stored in electronic methods which are password protected. • PREA Compliance Manager: <ul style="list-style-type: none"> i. PREA Compliance Manager was interviewed. She reported that sensitive information related to inmate risk assessments is password protected by electronic means. • Staff Responsible for Risk Screening: <ul style="list-style-type: none"> i. The auditor interviewed the staff responsible for risk screening. They reported that information related to risk screening is considered sensitive information and only staff that need the information have access. Information is stored electronically and is password protected. <p>Findings: Based on this analysis, the facility substantially compliant with this provision and corrective action is not required.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.33-6 Inmate Housing Assignments • Rhode Island Department of Corrections (RIDOC) Policy 9.52 Management of Gender Diverse and Intersex Inmates • PREA Color Codes • Interviews: Staff Responsible for Risk Screening, Random Inmates, PREA Coordinator and PREA Compliance Manager • Site Review Observations <p>Reasoning and analysis (by provision):</p> <p>115.42(a)</p>

1. The facility PAQ:

- The agency/facility uses information from the risk screening required by §115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

2. Interviews:

- PREA Compliance Manager:

i. PREA Compliance Manager was interviewed. She indicated records/ID conduct initial screening. They use the same process as the male facilities. They cover the screening tools and “colors.” The PREA “color” for each inmate allows them to make appropriate housing decisions.

- Staff Responsible for Risk Screening:

i. The auditor conducted an interview with the staff responsible for risk screening. They reported that information gained during the risk screening is used to make individualized determinations to ensure inmate safety.

Findings:

Based on this analysis, the facility substantially exceeds requirements of the standard.

115.42(b)

1. The facility PAQ:

- The agency/facility makes individualized determinations about how to ensure the safety of each inmate.

2. RIDOC Policy 9.33-6

- This information shall inform the individualized determination as to where an inmate will be housed with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

3. Interviews:

- Staff Responsible for Risk Screening:

i. The auditor conducted an interview with a staff member responsible for risk screening. They reported they risk screening is used to make individualized determinations to keep inmates safe from victimization or being victimized.

Findings:

Based on this analysis, the facility substantially exceeds requirements of the standard.

115.42(c)

1. The facility PAQ:

- The facility makes housing and program assignments for transgender or intersex

inmates in the facility on a case-by-case basis.

2. RIDOC Policy 9.52:

- All recommendations to assign a gender diverse or intersex inmate to a facility that houses male or female inmates must be made on a case-by-case basis by the Gender Diverse and Intersex Review Board to the ADIO and seek to ensure the inmate's health and safety, while maintaining the safety and security of the facility.

3. Interviews:

- PREA Compliance Manager:

- i. The auditor interviewed the PREA Compliance Manager who indicated that housing is determined by policy, procedure and SOP. She indicated housing of transgender and intersex inmates is always handled on a case-by-case basis.

- Transgender Inmates:

- i. The auditor conducted interviews with at least 2 transgender inmates while at the facility. All inmates surveyed indicated they were asked about their housing preferences and where they would feel safe.

Findings:

Based on this analysis, the facility substantially exceeds requirements of the standard.

115.42(d)

1. Interviews

- Staff Responsible for Risk Screening:

- i. The auditor interviewed the staff responsible for risk screening. They indicated placement and programming assignments for transgender and intersex inmates occurs at least twice per year. This is policy driven as well.

- PREA Compliance Manager:

- i. The auditor interviewed the PREA Compliance Manager who reiterated that placement and programming assignments for transgender and intersex inmates occurs at least twice per year. This is policy driven as well.

Findings:

Based on this analysis, the facility substantially exceeds requirements of the standard.

115.42(e)

1. Interview:

- Staff Responsible for Risk Screening:

- i. The auditor interviewed the staff responsible for risk screening. They indicated transgender and intersex inmates' views of their safety are given serious consideration in placement and programming assignments.

- PREA Compliance Manager:

i. The auditor interviewed the PREA Compliance Manager who reiterated transgender and intersex inmates' views of their safety are given serious consideration in placement and programming assignments.

- Transgender and Intersex Inmates:

i. The auditor conducted interviews with at least 2 transgender inmates while at the facility. All inmates surveyed indicated they were asked about their housing preferences and where they would feel safe.

Findings:

Based on this analysis, the facility substantially exceeds requirements of the standard.

115.42(f)

1. Interviews:

- PREA Compliance Manager:

i. The auditor interviewed the PREA Compliance Manager. She indicated transgender and intersex inmates were given the opportunity to shower separately. She indicated the inmates are even able to go to medical to shower privately.

- Staff Responsible for Risk Screening:

i. The auditor interviewed the staff responsible for risk screening. They indicated transgender and intersex inmates were given the opportunity to shower separately.

- Transgender and Intersex Inmates:

i. The auditor conducted interviews with at least 2 transgender inmates while at the facility. All inmates surveyed indicated they were given the opportunity to shower separately from other inmates.

2. Site Review Observations:

- During the site review the auditor observed showers that had excellent shower curtains and privacy. Inmates were informally interviewed indicating they felt they had privacy in the shower areas. Transgender inmates also indicated if they really wanted to they could go to medical to shower privately.

Findings:

Based on this analysis, the facility substantially exceeds requirements of the standard.

115.42(g)

1. RIDOC Policy 9.52

- Risk Gender diverse and intersex inmates must not be placed in dedicated facilities, units, or wings based solely on such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for protecting such inmates.

2. Interviews:

- Agency PREA Coordinator:

	<p>i. The auditor interviewed the PREA Coordinator who indicated this is policy driven and that RIDOC does not house transgender and intersex inmates in dedicated housing units, wings or facilities based solely on such identification.</p> <ul style="list-style-type: none"> • PREA Compliance Manager: <p>i. The auditor interviewed the PREA Compliance Manager who indicated the facility is not subject to any consent decree, judgments or legal settlements that require a specific facility, housing unit or wing for transgender or intersex inmates.</p> <ul style="list-style-type: none"> • Transgender and Intersex Inmates: <p>i. The auditor conducted interviews with at least 2 transgender inmates while at the facility. All inmates interviewed indicated they were not placed in dedicated facilities, housing units or wings based on their identification status.</p> <p>Findings: Based on this analysis, the facility substantially exceeds requirements of the standard.</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 12.01-2 Protective Custody for Inmates • Interviews: Warden and Staff who Supervise Inmates in Segregated Housing • Site Review Observations <p>Reasoning and analysis (by provision):</p> <p>115.43(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. • There were zero inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment.

2. RIDOC Policy 12.01-2

- Inmates at high risk for sexual victimization cannot be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. The status of all inmates placed in protective custody pursuant to risk of sexual victimization is reviewed by the Warden/designee every thirty (30) days.

3. Interviews:

- Warden:

- i. The Warden was interviewed and she indicated department policy prohibits placing inmates 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.

Findings:

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

115.43(b)

1. Interviews:

- Staff Who Supervise Inmates in Segregated Housing:

- i. The auditor conducted an interview with a staff member who supervised inmates in segregated housing. They reported that inmates do not lose programs, privileges, education and work opportunities if they were placed there for protection of sexual abuse or having alleged sexual abuse.

Finding:

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

115.43(c)

1. The facility PAQ:

- In the past 12 months, there have been zero inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement.

2. Interviews:

- Warden:

- i. The auditor interviewed the Warden who indicated inmates at high risk of victimization or who have alleged sexual abuse are placed in involuntary segregation only until an alternative means of separation from likely abusers can be arranged.
- ii. The warden also indicated inmates minimally remain in involuntary segregation if that occurs.

Findings:

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

115.43(d)

1. The Facility PAQ:

- From a review of case files of inmates at risk of sexual victimization there were zero inmates who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged.
- Not applicable because no inmates at risk of sexual victimization were assigned to involuntary segregated housing at WF.

Findings:

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

115.43(e)

1. The Facility PAQ:

- If an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.

2. RIDOC Policy 12.01-2

- Inmates at high risk for sexual victimization cannot be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. The status of all inmates placed in protective custody pursuant to risk of sexual victimization is reviewed by the Warden/designee every thirty (30) days.

Findings:

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

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

- Gloria McDonald Women's Facility Pre-Audit Questionnaire
- Rhode Island Department of Corrections (RIDOC) Policy 12.01-2 Protective Custody for Inmates
- Inmate Handbooks
- Interviews: Random Staff, PREA Compliance Manager, Random Inmates,
- Site Review Observations

Reasoning and analysis (by provision):

115.51(a)

1. The facility PAQ:

- The agency has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents.

2. RIDOC Policy 9.49-5

- Inmates are afforded multiple ways to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff, and staff neglect or violation(s) of responsibilities that may have contributed to such incidents. These methods include, but are not limited to:

i. reporting to any staff member, contractor, volunteer, or intern – verbally or in writing;

ii. calling or writing to RIDOC's Special Investigations Unit (SIU) – *9022/ (401) 462-2282;

iii. calling or writing to RIDOC's Office of Inspections (OI) – *9024/ (401) 462- 2551;

iv. calling the Rhode Island State Police (RISP) – *9023/ (401) 462-2650;

v. calling the Helpline toll-free number – *9021/1 (800) 494-8100; or

vi. calling ICE – *9025/1 (888) 351-4024.

- Inmates may also report sexual abuse and sexual harassment to a public or private entity or office that is not part of RIDOC by telephone or mail.

- Staff has the option of reporting known or suspected acts of sexual abuse and sexual harassment up the chain of command, or privately to SIU or OI.

3. Interviews:

- Random Staff:

i. The auditor interviewed at least 12 random staff during the onsite audit. All staff reported that inmates do have multiple internal ways for reporting as cited in the PREA policy.

- Random Inmates:

i. The auditor interviewed numerous randomly selected inmates throughout the facility. Inmates advised there are multiple ways to report sexual abuse and sexual

harassment available to them. They indicated they can report to any staff member and most knew about the ability to report by phone.

4. Site Review Observations:

- The auditor carefully reviewed printed signage throughout the facility. The auditor observed obvious PREA signage in both English and Spanish. Both internal and external reporting signage was clear and obvious on inmate bulletin boards and in common areas. Inmate telephones had clear and obvious information specific to internal and external investigative agencies.

Findings:

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

115.51(b)

1. The Facility PAQ:

- The agency provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency.
- The agency does not have a policy requiring inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.
- Not applicable because RIDOC does not hold inmates detained solely for civil immigration purposes.

2. RIDOC Policy 9.49-5

- Inmates are afforded multiple ways to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff, and staff neglect or violation(s) of responsibilities that may have contributed to such incidents. These methods include, but are not limited to:

i. calling the Rhode Island State Police (RISP) - *9023/ (401) 462-2650;

ii. calling the Helpline toll-free number - *9021/1 (800) 494-8100; or

iii. calling ICE - *9025/1 (888) 351-4024.

3. Interviews:

- PREA Compliance Manager:

i. The auditor interviewed the PREA Compliance Manager who indicated that inmates can privately report to the Rhode Island State Police.

ii. She also indicated the telephone call to the State Police is recorded and responded to in a timely manner.

- Random Inmates:

i. The auditor interviewed numerous randomly selected inmates throughout the facility. Overwhelmingly inmates reported they could contact the Rhode Island State Police by telephone and that they could remain anonymous because they did not have to enter any type of identification.

4. Site Review Observations:

- The auditor visually confirmed on the inmate telephones and bulletin boards that the State Police were a reporting mechanism for PREA related incidents. The auditor tested the phone number and was able to connect and leave a message.

Finding:

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

115.51(c)

1. The facility PAQ:

- The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties.
- Staff are required to document verbal reports.
- By end of shift. All PREA Allegations are documented in the Facility Incident Database.

2. RIDOC Policy 9.49-5

- Staff shall accept all reports of sexual abuse and sexual harassment whether made verbally, in writing, anonymously or from third parties.

3. Interviews:

• Random Staff:

i. The auditor interviewed at least 12 random staff during the onsite audit. All staff indicated that inmates could report, verbally or in writing, incidents of sexual abuse or sexual harassment. Staff indicated they documented reports immediately or by the end of shift.

• Random Inmates:

i. The auditor interviewed numerous randomly selected inmates throughout the facility. Overwhelmingly inmates reported they did not have to provide any identification when reporting by telephone.

Findings:

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

115.51(d)

1. The Facility PAQ:

- From The agency has established procedures for staff to privately report sexual abuse and sexual harassment of inmates.
- Staff can report up their chain of command OR to the Office of Inspections OR the Special Investigation Unit.

2. RIDOC Policy 9.49-5:

- Staff shall make all PREA reports up the chain of command or privately to SIU or OI.

3. Interviews:

• Random Staff:

i. The auditor interviewed at least 12 random staff during the onsite audit. Most staff were clearly aware that they could minimally report incidents of sexual abuse or

	sexual harassment to the agency Office of Inspections or Special Investigations Unit.
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire Reasoning and analysis (by provision): <p>115.52(a)</p> <ol style="list-style-type: none"> 1. The facility PAQ: <ul style="list-style-type: none"> • The agency does not have an administrative procedure for dealing with inmate grievances regarding sexual abuse. • Allegations of sexual abuse and sexual harassment are not grievable areas of facility life. All allegations of sexual abuse and sexual harassment are documented in the Facility Incident Database and forwarded to the Office of Inspections or the Special Investigations Unit for investigation. Findings: <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy

- Day One Brochure
- PREA Sexual Abuse Investigations SOP
- Women's Facility Sample Referrals
- MOU with Counseling and Psychotherapy Center, INC.
- Interviews: Random Inmates and Inmates who Reported Sexual Abuse
- Site Review Observations

Reasoning and analysis (by provision):

115.53(a)

1. The facility PAQ:

- The facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse.
- The facility provides inmates with access to such services by giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations.
- Not applicable because RIDOC does not hold persons detained solely for civil immigration purposes.
- The facility provides inmates with access to such services by enabling reasonable communication between inmates and these organizations in as confidential a manner as possible.

2. RIDOC Policy 9.49-5

- Each facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates the mailing address and toll-free hotline number for Day One, a local victim advocacy/rape crisis organization.
- Communication between inmates and victim advocacy/rape crisis organizations shall be in as confidential a manner as possible. However, inmates shall also be aware of the extent to which communication will be monitored and the extent to which reports of abuse will be forwarded to SIU, OI, or other authorities in accordance with mandatory reporting laws.

3. Interviews:

• Random Inmates:

i. The auditor interviewed numerous randomly selected inmates throughout the facility. Inmates reported that they know there are telephone numbers for outside emotional support on the inmate telephone. Inmates also reported they saw flyers posted on the bulletin boards and common areas in the housing units.

• Inmates who Reported Sexual Abuse:

i. The auditor interviewed at least two inmates that reported sexual abuse while at the facility. Inmates overwhelmingly reported that they were aware of what services were available to them for emotional support even if they did not utilize the service at the time of the occurrence. They also reported that they have seen, telephone numbers and mailing addresses for the facilities' emotional support entities.

4. Site Review Observations:

- The auditor carefully reviewed printed signage throughout the facility. The auditor was easily able to locate printed information about access to emotional support and who was contracted to provide that service to inmates. This service is available by telephone calls and through mailing addresses. If telephone calls are made to the emotional support entity, inmates are not required to provide their pin numbers for identification.
- The auditor tested the phone line for emotional support while at the facility. The auditor was easily able to dial the number and place a phone call to the helpline without providing a pin number. The line was not recorded and a live person answered the phone when it was called.
- Mail drop boxes were observed immediately outside the inmate dining area. Drop boxes were locked with limited staff or inmate access. Inmates were able to drop correspondence in the mailbox without staff or other inmates assisting or having knowledge of the mail. Procedure does not allow for the opening and viewing or reading of outgoing mail.

Findings:

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

Reasoning and analysis (by provision):

115.53(b)

1. The facility PAQ:

- The facility informs inmates, prior to giving them access to outside support services, the extent to which such communications will be monitored.
- The facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law.

2. Interviews:

• Random Inmates:

i. The auditor interviewed numerous randomly selected inmates throughout the facility. Inmates advised they were aware if they made phone calls to outside emotional support services that they were not connected to the call because they did not have to enter their pin number to place the phone call. Overall inmate had a good understanding of their privacy when it comes to seeking emotional support through an outside entity and what information was required to be reported back to the facility.

• Inmates who Reported Sexual Abuse:

i. The auditor interviewed two inmates that reported sexual abuse. Only one of inmates interviewed believed that they utilized emotional support after reporting the incident. There was awareness to the extent of what conversations could be kept

	<p>confidential.</p> <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision):</p> <p>115.53(c)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency or facility maintains memorandum of understanding (MOUs) or other agreements with community service providers that are able to provide inmates with emotional support services related to sexual abuse. • The maintains copies of those agreements. <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.54</p> <p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • Visiting Population Flyer • Agency Website Information • Inmate Handbooks • Interviews: Random Staff, PREA Compliance Manager, Random Inmates, • Site Review Observations

	<p>Reasoning and analysis (by provision):</p> <p>115.54(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency provides a method to receive third-party reports of inmate sexual abuse or sexual harassment. • The agency or facility publicly distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates. <p>2. Publicly Distributed Reporting Methods by mail, electronically and by phone.</p> <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • Interviews: Random Staff, Medical and Mental Health Staff, Warden, PREA Coordinator • Site Review Observations <p>Reasoning and analysis (by provision):</p> <p>115.61(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. • The agency requires all staff to report immediately and according to agency policy

any retaliation against inmates or staff who reported such an incident.

- The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

2. RIDOC Policy 9.49-5

- Staff shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

3. Interviews:

- Random Staff:

- i. The auditor interviewed at least 12 random staff who confirmed that any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation are reported immediately.

- ii. Staff shall make all PREA reports up the chain of command or privately to SIU or OI.

Findings:

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

Reasoning and analysis (by provision):

115.61(b)

1. The facility PAQ:

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

2. RIDOC Policy 9.49-5

- Apart from reporting to designated supervisors, SIU or OI, individuals shall not reveal any information relating to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

- Non-uniform staff, contractors, volunteers, and interns shall report all allegations of sexual abuse and sexual harassment to the nearest Superior Officer, Shift Commander, SIU or OI.

3. Interviews:

- Random Staff:

- iii. The auditor interviewed at least 12 random staff. Staff confirmed that all PREA reports are made up the chain of command or privately to SIU or OI.

Findings:

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

Reasoning and analysis (by provision):

115.61(c)

1. RIDOC Policy 9.49-5

- Unless otherwise precluded by Federal or State law, medical and mental health practitioners shall be required to report sexual abuse and to inform inmates of the practitioner's duty to report and the limits of confidentiality at the initiation of services

2. Interviews:

- Medical and Mental Health Staff:

i. The auditor interviewed Medical and Mental Health Staff.

a. Medical and Mental Health Staff confirmed that inmates are advised of the limitations of confidentiality and their duty to report.

b. They advised that they are required to report all allegations of sexual abuse and sexual harassment to the nearest Superior Officer, Shift Commander, SIU or OI.

c. Medical and Mental Health Staff stated they have become aware of such incidents five or six times and reported them as required.

Findings:

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

Reasoning and analysis (by provision):

115.61(d)

1. RIDOC Policy 9.49-5

- If the alleged victim is under the age of eighteen (18), SIU/OI, as appropriate, shall report the allegation to the Department Children Youth & Families (DCYF) via DCYF's Child Abuse Hotline [1-(800) - RI -CHILD (1-800-742-4453)]

2. Interviews:

- Warden:

i. The auditor interviewed the Warden who confirmed that if the alleged victim is under 18 years of age, SIU/OI, as appropriate, shall report the allegation to the Department Children Youth & Families (DCYF) via DCYF's Child Abuse Hotline.

- PREA Coordinator:

i. The auditor the PREA Coordinator who advised that that if the alleged victim is

under 18 years of age, SIU/OI, as appropriate, shall report the allegation to the Department Children Youth & Families (DCYF) via DCYF's Child Abuse Hotline.

Findings:

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

Reasoning and analysis (by provision):

115.61(e)

1. RIDOC Policy 9.49-5

- Every allegation of inmate sexual abuse and sexual harassment is thoroughly investigated and, where warranted by evidence, proportional sanctions up to and including criminal prosecution are implemented.
- RIDOC's Special Investigations Unit (SIU) investigates allegations of inmate-on-inmate sexual abuse and sexual harassment, and the Office of Inspections (OI) investigates allegations of sexual abuse and sexual harassment of inmates involving staff, contractors, volunteers, and interns.

2. Interviews:

• Warden:

i. The auditor interviewed the Warden who stated that all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.

a. RIDOC's Special Investigations Unit (SIU) investigates allegations of inmate-on-inmate sexual abuse and sexual harassment, and the Office of Inspections (OI) investigates allegations of sexual abuse and sexual harassment of inmates involving staff, contractors, volunteers, and interns.

Findings:

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

115.62 Agency protection duties	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

- Gloria McDonald Women's Facility Pre-Audit Questionnaire
- Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy
- Rhode Island Department of Corrections (RIDOC) Policy 12.01-2 Protective Custody for Inmates
- Interviews: Agency Head, Warden and Random Staff

Reasoning and analysis (by provision):

115.62(a)

1. The facility PAQ:

- When the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay).
- In the past 12 months, there have been zero times the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse.

2. RIDOC Policy 12.01-2

- Inmates at high risk for sexual victimization cannot be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. The status of all inmates placed in protective custody pursuant to risk of sexual victimization is reviewed by the Warden/designee every thirty (30) days.

3. Interviews:

- Agency Head:

i. The auditor interviewed Interim Director Wayne Salisbury. He indicated the agency staff immediately take action to protect inmates who are subject to imminent sexual abuse.

- Warden:

i. The auditor interviewed the Warden. She reiterated her facility staff take immediate action to protect inmates who are subject to imminent sexual abuse.

- Random Staff:

i. The auditor interviewed numerous random staff throughout the facility. All staff reported they immediately take action and follow the understood facility coordinated response plan to protect inmates.

Findings:

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

115.63 Reporting to other confinement facilities

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- Gloria McDonald Women’s Facility Pre-Audit Questionnaire
- Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy
- Interviews: Agency Head, Warden
- Site Review Observations

Reasoning and analysis (by provision):

115.63(a)

1. The facility PAQ:

- The agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred.
- In the past 12 months, there has been one allegation the facility received that an inmate was abused while confined at another facility.

2. RIDOC Policy 9.49-5

- Upon receiving an allegation that an inmate was sexually abused while confined in another facility, SIU/OI shall notify the head of the facility or appropriate office of the agency where the alleged sexual abuse occurred.

Findings:

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

Reasoning and analysis (by provision):

115.63(b)

1. The facility PAQ:

- Agency policy requires that the facility head provide such notification as soon as possible, but no later than 72 hours after receiving the allegation.

2. RIDOC Policy 9.49-5

- Such notification shall be provided as soon as possible, but no more than seventy-

two (72) hours after receiving the allegation.

Findings:

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

Reasoning and analysis (by provision):

115.63(c)

1. The facility PAQ:

- The agency or facility documents that it has provided such notification within 72 hours of receiving the allegation.

2. RIDOC Policy 9.49-5

- SIU/OI shall document that it has provided such notification.

Findings:

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

Reasoning and analysis (by provision):

115.63(d)

1. The facility PAQ:

- The agency or facility policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards.

- In the past 12 months, there have been zero allegations of sexual abuse the facility received from other facilities.

2. RIDOC Policy 9.49-5

- Upon receiving notification from another correctional facility that an inmate was sexually abused while incarcerated at the RIDOC, the facility that receives the report shall forward it immediately to RIDOC's Agency PREA Coordinator, SIU and OI. The allegation shall be investigated in accordance with this policy and the PREA Standards.

3. Interviews:

- Agency Head:

- i. The auditor interviewed Interim Director Wayne Salisbury. The Director advised that when a notice from another correctional facility that an inmate was sexually abused while incarcerated at the RIDOC, the facility that receives the report shall forward it immediately to RIDOC's Agency PREA Coordinator (a designee of Agency Head), SIU and OI. The allegation shall be investigated in accordance with this policy and the PREA Standards. He stated he has seen examples of such allegations.

	<ul style="list-style-type: none"> • Warden: <p>i. The auditor interviewed the Warden who advised when a notice from another correctional facility that an inmate was sexually abused while incarcerated at the RIDOC, the facility that receives the report shall forward it immediately to RIDOC's Agency PREA Coordinator (a designee of Agency Head), SIU and OI. The allegation shall be investigated in accordance with this policy and the PREA Standards.</p> <p>ii. She stated she has seen examples of such allegations.</p> <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women's Facility Pre-Audit Questionnaire • Sexual Abuse Investigations SOP • Interviews: Security Staff and Non-Security Staff First Responders, Inmates who Reported a Sexual Abuse, Random Sample of Staff • PREA First Responder Responsibilities • Site Review Observations <p>Reasoning and analysis (by provision):</p> <p>115.64(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency has a first responder policy for allegations of sexual abuse. • The policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report to separate the alleged victim and abuser. • The policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. • The policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report 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.

- The policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report 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.
- In the past 12 months, there have been 39 allegations that an inmate was sexually abused.
- Of these allegations of sexual abuse in the past 12 months, all 39 times the first security staff member to respond to the report separated the alleged victim and abuser.
- In the past 12 months, there were 39 allegations where staff were notified within a time period that still allowed for the collection of physical evidence.
- Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there were 39 times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence.
- Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there were 39 times the first security staff member to respond to the report requested that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there were 39 times the first security staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

2. RIDOC PREA First Responder Responsibilities:

3. Interviews:

• Security Staff and Non-Security Staff First Responders:

i. The auditor interviewed multiple First Responders during the onsite audit. All staff advised that as First Responders, they separate the alleged victim and abuser, preserve and protect the crime scene until appropriate steps can be taken to collect evidence, ask the victim to not take any actions that may destroy physical evidence (such as showering, changing clothes, etc.), ensure the alleged abuser does not take any actions that may destroy physical evidence, and alert Medical and Mental Health staff.

• Inmates who Reported a Sexual Abuse:

i. The auditor interviewed two inmates who reported sexual abuse. Inmates advised that they were assisted by staff immediately after they told staff what happened.

ii. Both inmates advised staff arrived quickly.

iii. Both inmates stated that staff separated them from alleged abusers and stayed with them to maintain crime scene until evidence could be collected and alerted Medical and Mental Health Staff.

Findings:

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

Reasoning and analysis (by provision):

115.64(b)

1. The facility PAQ:

- Agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence.
- Agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to notify security staff.
- Of the allegations that an inmate was sexually abused made in the past 12 months, there were zero times a non-security staff member was the first responder.

2. Sexual Abuse Investigations SOP:

- If the first person is not a member of the security staff, s/he shall:
- the first person to respond to a report that an inmate was sexually abused
- request that the alleged victim not take any actions that could destroy physical evidence;
- immediately notify the nearest Superior Officer or the Shift Commander;
- be aware of the visual appearance and listen for any spontaneous utterance from the alleged victim or the alleged perpetrator, and
- submit a written report to the Shift Commander before the end of his/her duty/shift.

3. Interviews:

• Non-Security Staff and Non-Security Staff First Responders:

i. The auditor interviewed multiple Non- Security Staff First Responders during the onsite audit. All staff advised that as First Responders, they ask the victim to not take any actions that may destroy physical evidence (such as showering, changing clothes, etc.), ensure the alleged abuser does not take any actions that may destroy physical evidence, and alert Security Staff.

• Random Staff:

i. The auditor interviewed at least 12 randomly selected staff. All staff stated as First Responders they are to separate the alleged victim and abuser, preserve and protect the crime scene until appropriate steps can be taken to collect evidence, ask the victim to not take any actions that may destroy physical evidence (such as showering, changing clothes, etc.), ensure the alleged abuser does not take any actions that may destroy physical evidence, and alert Security Staff or Medical and Mental Health staff if they are Security Staff themselves.

Findings:

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

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections Women’s Facility Coordinated Response Plan • Interviews: Warden <p>Reasoning and analysis (by provision):</p> <p>115.65(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. <p>2. RIDOC WF Coordinated Response Plan</p> <p>3. Interviews:</p> <ul style="list-style-type: none"> • Warden: <ul style="list-style-type: none"> i. The auditor interviewed the Warden. She indicated the facility has a written plan to coordinate actions among its staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse. ii. <p>Findings:</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

	<ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Agreement Between Rhode Island Brotherhood of Correctional Officers and the State of Rhode Island • Interviews: Agency Head <p>Reasoning and analysis (by provision):</p> <p>115.66(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later. <p>2. Interviews:</p> <ul style="list-style-type: none"> • Agency Head: <ul style="list-style-type: none"> i. The auditor interviewed Interim Director Wayne Salisbury. He advised of the agreement Rhode Island Brotherhood of Correctional Officers and the State of Rhode Island which does not limit the agency’s ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. <p>Findings:</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • Interviews: Agency Head, Warden, Designated Staff Member Charged with Monitoring Retaliation, Inmates in Segregated Housing, Inmates who Reported a Sexual Abuse • Retaliation Monitoring Examples • Site Review Observations

Reasoning and analysis (by provision):

115.67(a)

1. The facility PAQ:

- The agency has 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.
- The agency designates staff member(s) or charges department(s) with monitoring for possible retaliation.

2. RIDOC Policy 9.49-5

- All third-party reporters (inmates and staff who report sexual abuse or sexual harassment), alleged inmate victims (inmates who were reported to have suffered sexual abuse or sexual harassment while incarcerated), and any other individual who cooperates with an investigation who expresses a fear of retaliation shall be protected by RIDOC from retaliation by other inmates or staff.
- For at least ninety (90) days following a report of sexual abuse or sexual harassment, the Warden/designee shall monitor the conduct and treatment of the alleged inmate victim(s) to see if there are changes that may suggest possible retaliation by other inmates or staff.

Findings:

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

Reasoning and analysis (by provision):

115.67(b)

1. Interviews:

• Agency Head:

i. The auditor interviewed Interim Director Wayne Salisbury. He explained that inmates and staff receive equal protection from retaliation. For at least 90 days, the conduct and treatment of the alleged victim is monitored for indicators such as disciplinary reports, housing or program changes, and negative performance reviews or reassignments.

• Warden:

i. The auditor interviewed the Warden who advised some of the measures taken to protect inmates and staff against retaliation include housing changes for the abuser and emotional support services.

• Designated Staff Member Charged with Monitoring Retaliation:

i. The auditor interviewed the staff member charged with monitoring retaliation. The Designee stated they meet with inmates directly to check in and confirm they do not

feel they are facing retaliation. He also monitors disciplinary records to check for possible retaliation.

ii. The retaliation monitor also moves abusers and conducts follow-up check-ins every 30 days.

- Inmates who Reported a Sexual Abuse:

i. Auditor interviewed two inmates. Both confirmed they felt safe from retaliation and reported abusers were moved. They also report they had follow-up check-ins with staff designated as Retaliation Monitoring.

Findings:

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

Reasoning and analysis (by provision):

115.67(c)

2. The facility PAQ:

- The agency/facility monitors the conduct or treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff.
- The agency/facility acts promptly to remedy any such retaliation.
- The agency/facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need.
- There have been zero instances of retaliation that occurred in the last 12 months.

3. RIDOC Policy 9.49-5

- For at least ninety (90) days following a report of sexual abuse or sexual harassment, the Warden/designee shall monitor the conduct and treatment of the alleged victim(s) to see if there are changes that may suggest possible retaliation by other inmates or staff. The Warden/designee shall:

i. act promptly to remedy any such retaliation;

ii. continue to monitor beyond ninety (90) days if the initial monitoring indicates a continued need; and

iii. terminate the monitoring if it is determined that the allegation is unfounded.

4. Interviews:

- Warden:

i. The auditor interviewed the Warden who advised that the designee will monitor the conduct and treatment of the alleged victim to see if there are changes that may suggest possible retaliation by other inmates or staff. The designee will extend the monitoring beyond 90 days if the initial monitoring period indicates a continuing need.

- Designated Staff Member Charged with Monitoring Retaliation:

i. The auditor interviewed the individual charged with Monitoring Retaliation. The

Designated Staff Member confirmed the alleged victim will be monitored for 90 days to see if there are changes that may suggest possible retaliation by other inmates or staff. The designee will extend the monitoring beyond 90 days if the initial monitoring period indicates a continuing need. Such indicators can include but are not limited to disciplinary reports, housing or program changes, and negative performance reviews or reassignments.

Findings:

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

Reasoning and analysis (by provision):

115.67(d)

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1. Interviews:

- Designated Staff Member Charged with Monitoring Retaliation:
 - i. The assigned retaliation monitor conducts follow-up check-ins every 30 days.

Findings:

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

Reasoning and analysis (by provision):

115.67(e)

1. RIDOC Policy 9.49-5

- All third-party reporters (inmates and staff who report sexual abuse or sexual harassment), alleged inmate victims (inmates who were reported to have suffered sexual abuse or sexual harassment while incarcerated), and any other individual who cooperates with an investigation who expresses a fear of retaliation shall be protected by RIDOC from retaliation by other inmates or staff.

2. Interviews:

- Agency Head:
 - i. The auditor interviewed Interim Director Wayne Salisbury. He explained that inmates and staff receive equal protection from retaliation.
- Warden:
 - i. The auditor interviewed the Warden who advised some of the measures taken to protect inmates and staff against retaliation include housing changes for the abuser and emotional support services. If retaliation is suspected, we initiate immediate intervention to assess and act promptly to remedy any such retaliation.

Findings:

	Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • Rhode Island Department of Corrections (RIDOC) Policy 12.01-2 Protective Custody for Inmates • Sexual Abuse Investigations SOP • Interviews: Warden and Staff who Supervise Inmates in Segregated Housing • Site Review Observations <p>Reasoning and analysis (by provision):</p> <p>115.68(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. • There were zero inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment. • There were zero inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement. • If an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population. <p>2. RIDOC Policy PREA Sexual Abuse Investigations SOP</p> <ul style="list-style-type: none"> • Confer with the facility Warden/designee and/or supervisor and recommends where the alleged victim shall be housed in keeping with his/her custody, medical and psychological needs; and When possible, the alleged victim of sexual abuse shall not be denied any rights and privileges consistent with his/her classification, discipline status or custody level (e.g., if the victim was in general population at the time the

	<p>incident was reported, all attempts will be made to afford him/her whatever personal property and schedule of activity that s/he held prior to the reporting of the incident).</p> <p>3. Interviews:</p> <ul style="list-style-type: none"> • Warden: <ul style="list-style-type: none"> i. The auditor interviewed the Warden. The Warden indicated that policy prohibits placing inmates at high risk of victimization for have alleged sexual abuse in involuntary segregated housing in lieu of housing areas unless an assessment has determined there are no available alternative means of separation from potential abusers. ii. She indicated inmates at high risk of victimization or who have alleged sexual abuse are placed in involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged. • Staff who Supervise Inmates in Segregated Housing: <ul style="list-style-type: none"> i. The auditor interviewed a staff member who supervises segregated housing. They indicated that when or if inmates are placed in segregated housing for protection, they do not lose their access to programs, privileges, education and work opportunities. ii. They reported inmates are only placed in segregated housing until alternative means of separation from likely abusers can be arranged. iii. They reported the length of stay in segregation is very limited. iv. They also reported that policy dictates the facility must review the inmate’s circumstances every 30 days while in segregation. <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • Rhode Island Department of Corrections (RIDOC) Policy 9.50-1 Office of Inspection • Rhode Island Department of Corrections (RIDOC) Policy 9.42-3 Special Investigations Unit • PREA Sexual Abuse Investigations SOP • Rhode Island Department of Corrections (RIDOC) Policy 5.01-5 Management of Semi-Active and Archival Records • Investigative File Reviews

- Interviews: Investigative Staff, Inmates who Reported Sexual Abuse, Warden, PREA Coordinator, PREA Compliance Manager
- Investigator Training Records
- Site Review Observations

Reasoning and analysis (by provision):

115.71(a)

1. The facility PAQ:

- The agency/facility has a policy related to criminal and administrative agency investigations.

2. Interviews:

- Investigative Staff:

i. The auditor interviewed the Investigative Staff Supervisor. He indicated that after they receive a report of sexual abuse or sexual harassment their response is immediate.

ii. He also explained that no matter how they receive a report of sexual abuse or sexual harassment, all regular response protocols are followed. This includes third party reporting of incidents.

3. Investigative File Reviews:

- The auditor reviewed at least six investigative files while at the facility. All investigations were noted as prompt after the initial report of an incident of sexual abuse or sexual harassment.

Findings:

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

Reasoning and analysis (by provision):

115.71(b)

1. Interviews:

- Investigative Staff:

i. The auditor interviewed the Investigative Staff Supervisor. He indicated that he and all of his staff have received specific training on how to conduct sexual abuse investigations in confinement settings.

ii. He reported the training was provided by NIC and covered techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative or prosecution referral.

- Investigator Training Records:

Findings:

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

Reasoning and analysis (by provision):

115.71(c)

1. Interviews:

- Investigative Staff:

i. The auditor interviewed the Investigative Staff Supervisor. He explained the process the department utilized from the moment the a PREA complaint is received, the response from investigative staff, the investigative process, the final outcome of the investigation and the notification to the inmate.

ii. The investigator indicated their processes for obtaining direct and circumstantial evidence through witnesses, victims, phones, tablets and other electronic means.

2. Investigative File Reviews:

- The auditor reviewed multiple investigative files completed by RIDOC Office of Inspection and Special Investigation Unit. Files reviewed clearly illustrated the requirements under provision 115.71(c).

Findings:

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

Reasoning and analysis (by provision):

115.71(d)

1. Interviews:

- Investigative Staff:

i. The auditor interviewed the Investigative Staff Supervisor. He indicated when they discover evidence that a prosecutable crime may have taken place, they consult with prosecutors before conducting compelled interviews.

ii. He also reported they are in direct communication with the Rhode Island State Police if the case rises to the level of a criminal offense.

2. Investigative File Reviews:

- The The auditor reviewed multiple investigative files completed by RIDOC Office of

Inspection and Special Investigation Unit. Files reviewed clearly illustrated the requirements under provision 115.71(d).

Findings:

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

Reasoning and analysis (by provision):

115.71(e)

1. Interviews:

• Investigative Staff:

i. The auditor interviewed the Investigative Staff Supervisor. He indicated the credibility of an alleged victim, suspect or witness is assessed individually and not by staff or inmate status. Also, polygraphs are not required.

• Inmates that Reported Sexual Abuse:

i. The auditor interviewed at least two inmates that reported sexual abuse. They indicated that they were not required to submit to a polygraph test by facility investigators.

Findings:

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

Reasoning and analysis (by provision):

115.71(f)

1. Interviews:

• Random Investigative Staff:

i. The auditor interviewed the Investigative Staff Supervisor. He indicated administrative investigations all included an effort to determine whether staff actions or failure contributed to the abuse situation. He also indicated they looked at the use of force continuum.

ii. The investigator also indicated administrative investigations are always documented in written reports that include descriptions of physical and testimonial evidence, investigative facts and findings and the reasoning behind credibility assessments.

2. Investigative File Reviews:

- The auditor reviewed multiple investigative files completed by RIDOC Office of Inspection and Special Investigation Unit. Files reviewed clearly illustrated the requirements under provision 115.71(f).

Findings:

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

Reasoning and analysis (by provision):

115.71(g)

1. Interviews:

- Investigative Staff:

i. The auditor interviewed the Investigative Staff Supervisor. He indicated that all criminal reports are documented in a written report that contains thorough description of physical, testimonial and documentary evidence and attaches copies of all documentary evidence where feasible. He reported these types of cases were completed by the Rhode Island State Police.

2. Investigative File Reviews:

- The auditor reviewed one criminal investigative file completed by the Rhode Island State Police. The file reviewed clearly illustrated the requirements under provision 115.71(g).

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Findings:

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

Reasoning and analysis (by provision):

115.71(h)

1. The facility PAQ:

- Substantiated allegations of conduct that appear to be criminal are referred for prosecution.
- There was one substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012, or since the last PREA audit, whichever is later.

2. Interviews:

- Investigative Staff:

i. The auditor interviewed the Investigative Staff Supervisor. He indicated that all cases that appear to be criminal in nature are referred to the Rhode Island State Police and are referred for prosecution if necessary.

Findings:

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

Reasoning and analysis (by provision):

115.71(i)

1. The facility PAQ:

- The agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

2. RIDOC Policy 5.01-5

- Internal affairs records: Documents of investigations into department personnel or staff criminal or suspect activities, use of force, or unprofessional behavior. Retention of these records is permanent. All other records retain for five years after termination of the individual's employment.

Findings:

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

Reasoning and analysis (by provision):

115.71(j)

4. Interviews:

- Investigative Staff:

i. The auditor interviewed the Investigative Staff Supervisor. He indicated it does not matter if the employee terminates his employment with the department. The process continues as normal and as required by policy until there is a final outcome.

Findings:

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

	<p>Reasoning and analysis (by provision):</p> <p>115.71(l)</p> <p>1. Interviews:</p> <ul style="list-style-type: none"> • Warden, PREA Coordinator, PREA Compliance Manager Investigative Staff: <p>i. The auditor interviewed all above entities who indicated they collaborate very closely with the Rhode Island State Police about the status of any and all investigations that are being handled by that agency. They indicated there is also an MOU in place to dictate the sharing of case information.</p> <p>Findings:</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • Interviews: Investigative Staff <p>Reasoning and analysis (by provision):</p> <p>115.72(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated. <p>2. PREA Sexual Abuse Investigations SOP</p> <ul style="list-style-type: none"> • Preponderance of evidence standard shall be used in determining whether allegations of sexual abuse are substantiated. <p>3. Interviews:</p> <ul style="list-style-type: none"> • Investigative Staff:

	<p>i. The auditor interviewed Investigative Staff Supervisor who confirmed the preponderance of evidence standard is used to determine whether allegations of sexual abuse are substantiated.</p> <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.73	Reporting to inmates
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	Auditor Overall Determination: Meets Standard
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	Auditor Discussion
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Evidence relied upon in making the compliance determinations:

- Gloria McDonald Women’s Facility Pre-Audit Questionnaire
- Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy
- Interviews: Warden, Investigative Staff, Inmates who Reported a Sexual Abuse
- Site Review Observations

Reasoning and analysis (by provision):

115.73(a)

1. The facility PAQ:

- The agency has a policy requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency.
- There were a total of 38 criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months.
- Of the alleged sexual abuse investigations that were completed in the past 12 months, all 38 inmates who were notified, verbally or in writing, of the results of the investigation.

2. RIDOC Policy 9.49-5:

- Following an investigation into an allegation that an inmate suffered sexual abuse or sexual harassment by another inmate, SIU shall inform the alleged victim as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded.
- Following an allegation that a staff member has committed sexual abuse or sexual harassment against an inmate, OI shall inform the alleged victim as to whether the

allegation has been determined to be substantiated, unsubstantiated or unfounded.

3. Interviews:

- Warden:

i. The auditor interviewed the Warden reported that all inmates are notified of the outcome of an investigation. The outcomes are substantiated, unsubstantiated or unfounded.

- Investigative Staff:

i. The auditor the Investigative Staff Supervisor who confirmed that following an investigation into an inmate's allegation of sexual abuse, the agency will inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

- Inmates who Report Sexual Abuse:

i. The auditor interviewed two inmates who reported abuse. Both advised they were aware the agency is required to notify them whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

Findings:

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

Reasoning and analysis (by provision):

115.73(b)

1. The facility PAQ:

- When the Rhode Island State Police conduct criminal sexual abuse investigations, the agency requests the relevant information from the investigative entity in order to inform the inmate of the outcome of the investigation.
- There was a total of zero investigations of alleged inmate sexual abuse in the facility that were completed by the Rhode Island State Police in the past 12 months.

Findings:

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

Reasoning and analysis (by provision):

115.73(c)

1. The facility PAQ:

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency/facility subsequently informs the inmate (unless the

agency has determined that the allegation is unfounded) whenever:

- The staff member is no longer posted within the inmate's unit;
- The staff member is no longer employed at the facility;
- The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
- The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.
- There has been a substantiated or unsubstantiated complaint (i.e., not unfounded) of sexual abuse committed by a staff member against an inmate in an agency facility in the past 12 months.
- If YES, in each case the agency subsequently informed the inmate whenever:
 - The staff member was no longer posted within the inmate's unit;
 - The staff member was no longer employed at the facility;
 - The agency learned that the staff member has been indicted on a charge related to sexual abuse within the facility; or
 - The agency learned that the staff member has been convicted on a charge related to sexual abuse within the facility.

2. RIDOC Policy 9.49-5

- Following an allegation that a staff member has committed sexual abuse or sexual harassment against an inmate, OI shall inform the alleged victim as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. OI shall also inform the alleged victim of sexual abuse whenever:
 - i. the staff member is no longer posted within the inmate's unit;
 - ii. the staff member is no longer employed at the facility;
 - iii. OI learns that the staff member has been indicted on a charge related to sexual abuse within the facility, or
 - iv. OI learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

3. Interviews:

- Inmates who Reported a Sexual Abuse:
 - i. The auditor interviewed two inmates who reported abuse. Inmates advised they were informed if/when accused staff member was no longer posted within their unit, no longer employed at the facility, the agency learned that the staff had been indicted on a charge related to sexual abuse within the facility, or the agency learned that the staff member had been convicted on a charge related to sexual abuse within the facility when applicable.

Findings:

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

Reasoning and analysis (by provision):

115.73(d)

1. The facility PAQ:

- Following an inmate's allegation that he or she has been sexually abused by another inmate in an agency facility, the agency subsequently informs the alleged victim whenever:
 - The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or
 - The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

2. RIDOC Policy 9.49-5

- Following an investigation into an allegation that an inmate suffered sexual abuse or sexual harassment by another inmate, SIU shall inform the alleged victim as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. SIU shall also inform the alleged victim of sexual abuse whenever:
 - i. SIU learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or
 - ii. SIU learns the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

3. Interviews:

- Inmates who Reported a Sexual Abuse:
 - i. The auditor interviewed two inmates who reported abuse. Inmates advised they were informed as applicable when the alleged abuser has been indicted on a charge related to sexual abuse within the facility or the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

Findings:

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

Reasoning and analysis (by provision):

115.73(e)

1. The facility PAQ:

- The agency has a policy that all notifications to inmates described under this standard are documented.
- In the past 12 months, there have been a total of 38 notifications to inmates that were provided pursuant to this standard.
- Of those notifications made in the past 12 months, 38 were documented.

2. RIDOC Policy 9.49-5

- All notifications or attempted notifications shall be documented by SIU or OI, as appropriate.

Findings:

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

	<p>corrective action is not required.</p> <p>Reasoning and analysis (by provision):</p> <p>115.73(f) - N/A</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • Rhode Island Department of Corrections (RIDOC) Policy 3.14-4 Staff Code of Ethics and Conduct <p>Reasoning and analysis (by provision):</p> <p>115.76(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. <p>2. RIDOC Policy 9.49-5</p> <ul style="list-style-type: none"> • RIDOC staff members, volunteers, contractors, or interns who commit acts of sexual abuse or sexual harassment toward inmates shall be sanctioned in accordance with the most recent version of RIDOC policy 3.14 DOC, Code of Ethics and Conduct; up to and including termination and criminal prosecution (i.e., RIGL § 11-25-24). <p>Findings:</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision):</p> <p>115.76(b)</p>

1. The facility PAQ:

- In the past 12 months, there have been zero staff from the facility who have violated agency sexual abuse or sexual harassment policies.
- In the past 12 months, there have been zero staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies

2. RIDOC Policy 9.49-5

- Disciplinary sanctions for staff who commit acts of sexual abuse or sexual harassment shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed on other staff with similar histories for comparable offenses.

Findings:

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

Reasoning and analysis (by provision):

115.76(c)

1. The facility PAQ:

- The disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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.
- In the past 12 months, there have been zero staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse).

2. RIDOC Policy 9.49-5

- Disciplinary sanctions for staff who commit acts of sexual abuse or sexual harassment shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed on other staff with similar histories for comparable offenses.

Findings:

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

Reasoning and analysis (by provision):

115.76(d)

	<p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • 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, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies. • In the past 12 months, there have been zero staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies. <p>2. RIDOC Policy 9.49-5</p> <ul style="list-style-type: none"> • Any contractor, volunteer, or intern who engages in sexual abuse or sexual harassment shall be prohibited from contact with inmates, banned from entering secure RIDOC facilities, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any licensing authorities. <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • Interviews: Warden • Site Review Observations <p>Reasoning and analysis (by provision):</p> <p>115.77(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • Agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies. • Agency policy requires that any contractor or volunteer who engages in sexual

	<p>abuse be prohibited from contact with inmates.</p> <ul style="list-style-type: none"> • In the past 12 months, there have not been any contractors or volunteers who have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates. • In the past 12 months, there have been zero contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates. <p>2. RIDOC Policy 9.49-5</p> <ul style="list-style-type: none"> • Any contractor, volunteer, or intern who engages in sexual abuse or sexual harassment shall be prohibited from contact with inmates, banned from entering secure RIDOC facilities, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any licensing authorities. <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision):</p> <p>115.77(b)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The facility takes appropriate remedial measures and considers whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. <p>2. Interviews:</p> <ul style="list-style-type: none"> • Warden <p>i. The auditor interviewed the Warden who confirmed that the facility takes appropriate remedial measures and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

- Gloria McDonald Women's Facility Pre-Audit Questionnaire
- Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy
- Rhode Island Department of Corrections (RIDOC) Policy 11.01-7 Code of Inmate Discipline
- Interviews: Warden, Medical and Mental Health Staff

Reasoning and analysis (by provision):

115.78(a)

1. The facility PAQ:

- Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse.
- Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse.
- In the past 12 months, there have been 6 administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility.
- In the past 12 months, there have been zero criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility.

2. RIDOC Policy 9.49-5

- Inmates who commit acts of inmate-on-inmate sexual abuse or sexual harassment shall be punished in accordance with the most recent version of RIDOC policy 11.01 DOC, Code of Inmate Discipline, up to and including criminal prosecution.

Findings:

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

Reasoning and analysis (by provision):

115.78(b)

1. RIDOC Policy 11.01-7

- A form of temporary separation from the general population for those inmates who are found guilty of serious disciplinary infractions; place of confinement to be designated by the Warden/designee; duration is commensurate with the seriousness of the offense, consistent with RIDOC's Discipline Severity Scale; includes a loss of privileges and loss of good time.

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2. Interviews:

- Warden:

i. The auditor interviewed the Warden who confirmed that sanctions are 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.

Findings:

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

Reasoning and analysis (by provision):

115.78(c)

1. RIDOC Policy 9.49-5

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

2. Interviews:

- Warden:

i. The auditor interviewed the Warden who confirmed that the disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his behavior when determining what type of sanctions, if any, should be imposed.

Findings:

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

Reasoning and analysis (by provision):

115.78(d)

1. The facility PAQ:

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

2. RIDOC Policy 9.49-5

- Therapy, counseling, or other interventions designed to address and correct underlying reasons or motivation for the sexual abuse shall be considered when determining whether to allow inmate access to programming or other privileges.

3. Interviews:

- Medical and Mental Health Staff:

- i. The auditor interviewed Medical and Mental Health staff. Staff confirmed the facility offers therapy, counseling, or other intervention services designed to address and correct underlying reasons or motivations for sexual abuse.
- ii. The facility does not require participation in these services as a condition of access to programming or other benefits.

Findings:

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

Reasoning and analysis (by provision):

115.78(e)

1. The facility PAQ:

- The agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact.

2. RIDOC Policy 9.49-5

- Inmates may be disciplined for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

Findings:

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

Reasoning and analysis (by provision):

115.78(f)

1. The facility PAQ:

- The agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

2. RIDOC Policy 9.49-5

- RIDOC prohibits disciplinary action for a report of sexual abuse or sexual harassment that is made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Findings:

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

	<p>Reasoning and analysis (by provision):</p> <p>115.78(g)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency prohibits all sexual activity between inmates. • If the agency prohibits all sexual activity between inmates and disciplines inmates for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced. <p>2. RIDOC Policy 9.49-5</p> <ul style="list-style-type: none"> • All sexual activity between inmates is prohibited and subject to disciplinary action. <p>i. Sexual activity between inmates shall not be found to be sexual abuse if it is determined after an investigation that the activity was consensual and not coerced.</p> <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 18.30-2 Receiving Screening and Mental Health Evaluation of New Commitments • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • Interviews: Inmates who Disclose Sexual Victimization at Risk Screening, Staff Responsible for Risk Screening, Medical and Mental Health Staff <p>Reasoning and analysis (by provision):</p> <p>115.81(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • All inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner.

- The follow-up meeting was offered within 14 days of the intake screening.
- In the past 12 months, 100 percent of inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner.
- Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.

2. RIDOC Policy 18.30-2

- When referred by security staff, medical and behavioral healthcare practitioners offer follow-up examinations within fourteen (14) days of commitment on all newly committed inmates, who are identified by security staff, as having experienced prior sexual victimization or having perpetrated sexual abuse. These offers of follow-up examinations are documented in the inmate's Electronic Medical Record (EMR), and indicate whether the inmate accepted or rejected the offer.
- Nursing staff performs receiving screenings on all inmates upon commitment. These screenings are documented in the inmate's EMR.

3. Interviews:

- Inmates who Disclose Sexual Victimization at Risk Screening:
 - i. The auditor interviewed two inmates and one inmate confirmed they were offered a follow-up meeting with a medical or mental health practitioner.

- Staff Responsible for Risk Screening:

- i. The auditor interviewed one staff member and was advised they do offer follow-up meetings with medical or mental health staff.

4. Samples of EMR were reviewed by the auditor.

Findings:

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

Reasoning and analysis (by provision):

115.81(b)

1. The facility PAQ:

- All prison inmates who have previously perpetrated sexual abuse, as indicated during the screening pursuant to § 115.41, are offered a follow-up meeting with a mental health practitioner.
- The follow-up meeting was offered within 14 days of the intake screening.
- In the past 12 months, 100 percent of inmates who have previously perpetrated sexual abuse, as indicated during the screening, who were offered a follow-up meeting with a mental health practitioner.
- Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.

2. RIDOC Policy 18.30-2

- When referred by security staff, medical and behavioral healthcare practitioners offer follow-up examinations within fourteen (14) days of commitment on all newly committed inmates, who are identified by security staff, as having experienced prior

sexual victimization or having perpetrated sexual abuse. These offers of follow-up examinations are documented in the inmate's Electronic Medical Record (EMR), and indicate whether the inmate accepted or rejected the offer.

- Nursing staff performs receiving screenings on all inmates upon commitment. These screenings are documented in the inmate's EMR.

3. Interviews:

- Staff Responsible for Risk Screening:

i. The auditor interviewed one staff member and was advised they do offer follow-up meetings with medical or mental health staff.

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4. Site Review Observations:

- The auditor reviewed samples in EMR.

Findings:

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

Reasoning and analysis (by provision):

115.81(c)

1. The facility PAQ:

- All inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner.
- The follow-up meeting was offered within 14 days of the intake screening.
- In the past 12 months, 100 percent of inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner.
- Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.

2. RIDOC Policy 18.30-2

- When referred by security staff, medical and behavioral healthcare practitioners offer follow-up examinations within fourteen (14) days of commitment on all newly committed inmates, who are identified by security staff, as having experienced prior sexual victimization or having perpetrated sexual abuse. These offers of follow-up examinations are documented in the inmate's Electronic Medical Record (EMR), and indicate whether the inmate accepted or rejected the offer.
- Nursing staff performs receiving screenings on all inmates upon commitment. These screenings are documented in the inmate's EMR.

3. Interviews:

- Inmates who Disclose Sexual Victimization at Risk Screening:

i. The auditor interviewed two inmates and one inmate confirmed they were offered a follow-up meeting with a medical or mental health practitioner.

- Staff Responsible for Risk Screening:

- i. The auditor interviewed one staff member and was advised they do offer follow-up meetings with medical or mental health staff.
4. Samples of EMR were reviewed by the auditor.

Findings:

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

Reasoning and analysis (by provision):

115.81(d)

1. The facility PAQ:

- Information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners.
- The information shared with other staff is strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.

2. RIDOC Policy 9.49-5

- Apart from reporting to designated supervisors, SIU or OI, individuals shall not reveal any information relating to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

3. Site Review Observations:

- The auditor confirmed information is secured and access is limited only to authorized staff.
- Electronic files are password protected.

Findings:

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

Reasoning and analysis (by provision):

115.81(e)

1. The facility PAQ:

- Medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.

2. RIDOC Policy 9.49-5

- Inmates Medical and mental health practitioners shall obtain informed consent from

	<p>inmates before reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of eighteen (18).</p> <p>3. Interviews:</p> <ul style="list-style-type: none"> • Medical and Mental Health Staff: <p>i. The auditor interviewed Medical and Mental Health staff who confirmed informed consent was obtained from inmates who reported.</p> <p>ii. Medical and Mental Health staff also confirmed there is a separate process for inmates under the age of 18. There are no individuals under the age of 18 at this facility.</p> <p>4. Samples of consent documentation were reviewed by the auditor.</p> <p>Findings:</p> <p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • SOP PREA Sexual Abuse Investigations • Interviews: Medical and Mental Health Staff, Inmates who Reported a Sexual Abuse, Security Staff and Non-Security Staff First Responders • Site Review Observations <p>Reasoning and analysis (by provision):</p> <p>115.82(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. • The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. • Medical and mental health staff maintain secondary materials (e.g., form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the

provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis.

2. Interviews:

- Medical and Mental Health Staff:

- i. The auditor interviewed medical and mental health staff during the onsite audit. Both medical and mental health staff indicated that inmate victims of sexual abuse receive timely unimpeded access to emergency medical treatment and crisis intervention.
- ii. Medical staff reported treatment is offered almost immediately after an incident is reported to have occurred.
- iii. Medical staff reported the nature and scope of these services are determined by professional judgement.

Findings:

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

Reasoning and analysis (by provision):

115.82(b)

1. Interviews:

- Security Staff and Non-Security Staff First Responders:

- i. The auditor interviewed numerous staff throughout the facility that were security and non-security staff. All staff interviewed were able to articulate their first responder duties to take preliminary steps to protect victims and immediately notify the appropriate medical and mental health practitioners.

Findings:

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

Reasoning and analysis (by provision):

115.82(c)

1. The facility PAQ:

- Inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care,

	<p>where medically appropriate.</p> <p>2. Interviews:</p> <ul style="list-style-type: none"> • Medical and Mental Staff: <ul style="list-style-type: none"> i. The auditor interviewed medical and mental health staff who both indicated that inmates are offered timely information about access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. • Inmates who Reported Sexual Abuse: <ul style="list-style-type: none"> i. The auditor interviewed two inmates who reported sexual abuse at the facility. Both inmates reported that they thought they were offered information required under 115.82, the need for that access was not applicable to their situations. <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision):</p> <p>115.82(d)</p> <p>1. The facility PAQ: <ul style="list-style-type: none"> • Treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. </p> <p>2. RIDOC Policy 9.49-5 <ul style="list-style-type: none"> • Treatment services shall be provided to the inmate victim of sexual abuse while incarcerated without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. </p> <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

- Gloria McDonald Women's Facility Pre-Audit Questionnaire
- Rhode Island Department of Corrections (RIDOC) Policy 9.49-5
- Interviews: Medical and Mental Health Staff, Inmates who Reported a Sexual Abuse
- Site Review Observations

Reasoning and analysis (by provision):

115.83(a)

1. The facility PAQ:

- The facility offers 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.

2. RIDOC Policy 9.49-5

- The evaluation and treatment of inmate victims of sexual abuse while incarcerated shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities or their release from custody.
- The facility shall provide the inmate victims of sexual abuse while incarcerated with medical and mental health services consistent with the community level of care.

Findings:

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

Reasoning and analysis (by provision):

115.83(b)

1. RIDOC Policy 9.49-5

- The evaluation and treatment of inmate victims of sexual abuse while incarcerated shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities or their release from custody.
- The facility shall provide the inmate victims of sexual abuse while incarcerated with medical and mental health services consistent with the community level of care.

2. Interviews:

- Medical and Mental Health Staff:

- i. The auditor interviewed Medical and Mental Health staff who advised evaluation and treatment included verbal interview, treatment plans and referral for outside

services if necessary.

- Inmates who Reported a Sexual Abuse:

- i. The auditor interviewed two inmates who reported and both confirmed they were offered medical and mental health evaluation and treatment in a timely manner.

3. Sample EMR records were reviewed by auditor.

Findings:

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

Reasoning and analysis (by provision):

115.83(c)

1. Interviews:

- Medical and Mental Health Staff:

- i. The auditor interviewed Medical and Mental Health staff and both confirmed that medical and mental health services offered are consistent with community level of care.

2. Sample EMR records were reviewed by auditor.

Findings:

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

Reasoning and analysis (by provision):

115.83(d)

1. The facility PAQ:

- Female victims of sexual abusive vaginal penetration while incarcerated are offered pregnancy tests.

2. RIDOC Policy 9.49-5

- Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.

3. Interviews:

- Inmates who Reported Sexual Abuse:

- i. The auditor interviewed 2 inmates that reported sexual abuse at the facility. Both inmates reported pregnancy tests were not applicable to their situations.

Findings:

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

corrective action is not required.

115.83(e)

1. The facility PAQ:

- If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services.

2. RIDOC Policy 9.49-5

- If pregnancy results from the conduct described in section IV.F.6.c., such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

3. Interviews:

- Medical Staff:

- i. The auditor interviewed medical staff who confirmed if victims become pregnant as a result, they will receive timely and compressive information about access to lawful pregnancy related services.

- Inmates who Reported Sexual Abuse:

- i. The auditor interviewed 2 inmates that reported sexual abuse at the facility. Both inmates reported they did not become pregnant as a result of the sexual abuse incidents.

Findings:

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

Reasoning and analysis (by provision):

115.83(f)

1. The facility PAQ:

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

2. RIDOC Policy 9.49-5

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

3. Interviews:

- Inmates who Reported Sexual Abuse:

- i. The auditor interviewed two inmates who reported that follow-up care was not applicable and other reported that she was taken to the hospital for follow-up testing and care.

Findings:

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

Reasoning and analysis (by provision):

115.83(g)

1. The facility PAQ:

- Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

2. RIDOC Policy 9.49-5

- Treatment services shall be provided to the inmate victim of sexual abuse while incarcerated without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

3. Interviews:

- Inmates who Reported a Sexual Abuse:

- i. The auditor interviewed two inmates and both reported they were not required to pay for any treatment.

Findings:

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

Reasoning and analysis (by provision):

115.83(h)

1. The facility PAQ:

- If the facility is a prison, it attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.

2. RIDOC Policy 9.49-5

- RIDOC shall attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within sixty (60) days of learning of such abuse history and offer treatment when deemed appropriate by mental health services.

3. Interviews:

- Medical and Mental Health Staff:

- i. The auditor interviewed Medical and Mental Health staff who confirmed a mental health evaluation is conducted of all known inmate-on-inmate abusers within sixty (60) days of learning of such abuse history and offer treatment when deemed appropriate by mental health services.

	<p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 12.01-2 Protective Custody for Inmates • Sample Completed Sexual Abuse Incident Reviews • Interviews: Warden, PREA Compliance Manager, Incident Review Team Member <p>Reasoning and analysis (by provision):</p> <p>115.86(a)</p> <ol style="list-style-type: none"> 1. The facility PAQ: <ul style="list-style-type: none"> • The facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. • In the past 12 months, there have been 27 criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents 2. RIDOC Policy 9.49-5 <ul style="list-style-type: none"> • The Warden/designee shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. 3. Document Review of Completed Sexual Abuse Incident Reviews: <ul style="list-style-type: none"> • The auditor completed at least six reviews of sexual abuse incident reviews completed by the facility. All reports reviewed were completed within 30 days of the completion of the investigation. <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>

Reasoning and analysis (by provision):

115.86(b)

1. The facility PAQ:

- The facility ordinarily conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation.
- In the past 12 months, there were a total of 27 criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only, "unfounded." incidents

2. RIDOC Policy 9.49-5

- Inmates Sexual abuse incident reviews shall occur within thirty (30) days of the conclusion of the investigation.

3. Document Review of Completed Sexual Abuse Incident Reviews:

- The auditor completed at least six reviews of sexual abuse incident reviews completed by the facility. All reports reviewed were completed within 30 days of the completion of the investigation.

Findings:

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

Reasoning and analysis (by provision):

115.86(c)

1. The facility PAQ:

- The sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.

2. RIDOC Policy 9.49-5

- The review team shall include, at a minimum, the Warden/designee, the Facility PREA Compliance Manager, line supervisor, SIU (for reviews involving inmate- on-inmate sexual abuse), OI (for all inmate sexual abuse reviews) and health care services or mental health practitioners, as well as any other "ad hoc" members deemed necessary.

3. Interviews:

- Warden:
 - i. The auditor interviewed the Warden at the facility. She indicated they absolutely

have an incident review team and it includes higher level staff at the facility with investigators and medical and mental health staff if necessary.

Findings:

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

Reasoning and analysis (by provision):

115.86(d)

1. The facility PAQ:

- The facility prepares a report of its findings from sexual abuse incident reviews including, but not necessarily limited to, determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section and any recommendations for improvement, and submits such report to the facility head and PREA Compliance Manager.

2. Interviews:

- Warden:

- i. The auditor interviewed the Warden. She indicated the team uses the information obtained in the review to assess the facility response, facility strategies, layout, monitoring technology and potential barriers to determine if corrective action is needed.

- PREA Compliance Manager:

- i. The auditor interviewed the PREA Compliance Manager reported the facility conducts sexual abuse incident reviews as required and the facility prepares a report of its findings. She also reported that all completed sexual abuse incident reviews are forwarded to her for her review.

Findings:

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

Reasoning and analysis (by provision):

115.86(e)

1. The facility PAQ:

- The facility implements the recommendations for improvement or documents its reasons for not doing so.

	<p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • 2021 Annual Survey of Sexual Victimization <p>Reasoning and analysis (by provision):</p> <p>115.87(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. <p>2. RIDOC Policy 9.49-5</p> <ul style="list-style-type: none"> • RIDOC’s Planning & Research Unit shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its control, using standardized instruments and set definitions. RIDOC’s Planning & Research Unit shall aggregate the incident- based sexual abuse data at least annually. • The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. • RIDOC’s Planning & Research Unit shall provide such data from the previous calendar year to the Department of Justice no later than June 30th of the current calendar year. <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>

Reasoning and analysis (by provision):

115.87(b)

1. The facility PAQ:

- The agency aggregates the incident-based sexual abuse data at least annually.

Findings:

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

Reasoning and analysis (by provision):

115.87(d)

1. The facility PAQ:

- The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

2. RIDOC Policy 9.49-5

- RIDOC's Planning & Research Unit shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its control, using standardized instruments and set definitions. RIDOC's Planning & Research Unit shall aggregate the incident-based sexual abuse data at least annually.
- The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.
- RIDOC's Planning & Research Unit shall provide such data from the previous calendar year to the Department of Justice no later than June 30th of the current calendar year.

Findings:

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

Reasoning and analysis (by provision):

115.87(f)

	<p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency provided the Department of Justice (DOJ) with data from the previous calendar year upon request. <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • RIDOC Annual Report Examples • Interviews: Agency Head, PREA Coordinator, PREA Compliance Manager <p>Reasoning and analysis (by provision):</p> <p>115.88(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency reviews data collected and aggregated pursuant to §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including: <ul style="list-style-type: none"> • Identifying problem areas; • Taking corrective action on an ongoing basis; and • Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole. <p>2. Interviews:</p> <ul style="list-style-type: none"> • Agency Head: <ol style="list-style-type: none"> i. The auditor interviewed Interim Director Wayne Salisbury. He indicated agency reviews data collected and aggregated pursuant to §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including, identifying problem areas and taking corrective action on an ongoing basis. • Agency PREA Coordinator: <ol style="list-style-type: none"> i. The auditor interviewed the Agency PREA Coordinator who indicated annual data

collected and aggregated pursuant to §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including, identifying problem areas and taking corrective action on an ongoing basis.

- PREA Compliance Manager

i. The auditor interviewed the PREA Compliance Manager who reinforce the collection of annual data for the purposes of enhancing response, detection and training of staff.

Findings:

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

Reasoning and analysis (by provision):

115.88(b)

1. The facility PAQ:

- The annual report includes a comparison of the current year's data and corrective actions with those from prior years.
- The annual report provides an assessment of the agency's progress in addressing sexual abuse.

Findings:

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

Reasoning and analysis (by provision):

115.88(c)

1. The facility PAQ:

- The agency makes its annual report readily available to the public at least annually through its website.
- The annual reports are approved by the agency head.

2. Interviews:

- Agency Head:

i. The auditor interviewed interim Director Wayne Salisbury. He indicated he provides a final approval of the annual report.

	<p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision):</p> <p>115.88(d)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • When the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. • The agency indicates the nature of material redacted. <p>2. Interviews:</p> <ul style="list-style-type: none"> • Agency PREA Coordinator: <ul style="list-style-type: none"> i. The auditor interviewed the Agency PREA Coordinator who indicated that personally identifying information is redacted from the report. <p>Findings: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ul style="list-style-type: none"> • Gloria McDonald Women’s Facility Pre-Audit Questionnaire • Rhode Island Department of Corrections (RIDOC) Policy 9.49-5 PREA Policy • Interviews: PREA Coordinator <p>Reasoning and analysis (by provision):</p> <p>115.89(a)</p> <p>1. The facility PAQ:</p> <ul style="list-style-type: none"> • The agency ensures that incident-based and aggregate data are securely retained.

2. RIDOC Policy 9.49-5

- RIDOC's Planning & Research Unit shall ensure that data collected is securely retained.

3. Interviews:

- Agency PREA Coordinator:
- The auditor interviewed the Agency PREA Coordinator and she indicated that all data collected is securely retained electronically and password protected for staff authorized to have access.

Findings:

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

115.89(b)

1. The facility PAQ:

- Agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website.

2. RIDOC Policy 9.49-5

- RIDOC's Planning & Research Unit shall make all aggregated sexual abuse data collected from facilities readily available to the public at least annually through its website.

3. Auditor reviewed website to validate information was available.

Findings:

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

Reasoning and analysis (by provision):

115.89(c)

1. The facility PAQ:

- Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.
- The agency maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.

Findings:

	Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facility was compliant with all provisions under standard 115.401.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facility was compliant with all the provisions under standard 115.403.

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.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

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

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

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

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

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

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

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

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

	Has the agency documented its efforts to provide SAFEs or SANEs?	no
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?	no
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

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

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

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

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	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.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
115.43 (c)	Protective Custody	

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

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	na
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	na
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	na

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

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	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.).	na
	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.)	na
	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.)	na
	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.)	na
	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.)	na
	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.)	na
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	na
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	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.)	yes
115.73 (c) Reporting to inmates		
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d) Reporting to inmates		
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

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

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

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

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

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	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.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

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

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
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