Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails		
	nterim 🗵 Final	
Date of Interim Audit If no Interim Audit Report, sel Date of Final Audit R		
Aud	ditor Information	
Name: Ray Reno	Email: rayreno1@gmail.com	
Company Name: 360 Correctional Consulting		
Mailing Address: PO Box 31	City, State, Zip: McPherson, KS 67460	
Telephone: 620-285-1405	Date of Facility Visit: December 2-3, 2019	
Age	ency Information	
Name of Agency: Wilson County Sheriff	Department	
Governing Authority or Parent Agency (If Applicable):	Wilson County	
Physical Address: 925 Pierce City, State, Zip: Fredonia, KS 66736		
Mailing Address: 925 Pierce	City, State, Zip: Fredonia, KS 66736	
The Agency Is:	☐ Private for Profit ☐ Private not for Profit	
☐ Municipal ☐ County	☐ State ☐ Federal	
Agency Website with PREA Information: Click or 1	tap here to enter text.	
Agency Chief Executive Officer		
Name: Pete Figgins		
Email: pmfiggins@wilsoncountykansas.o	rg Telephone: 620-378-3622	
Agency-Wide PREA Coordinator		
Name: Dana Moodie		
Email: dmoodie@wilsoncountykansas.org	-	
PREA Coordinator Reports to:	Number of Compliance Managers who report to the PREA Coordinator:	
Sheriff Figgins	1	

	Facility In	formatio	า	
Name of Facility: Wilson Co	ounty Correction Center			
Physical Address: 925 Pierce	Э	City, State, Z	ip: Fredonia,	KS 66736
Mailing Address (if different fro 925 Pierce	m above):	City, State, Z	ip: Fredonia,	KS 66736
The Facility Is:	☐ Military	☐ Private	☐ Private for Profit ☐ Private not for	
☐ Municipal	□ County	☐ State		☐ Federal
Facility Type:	☐ Prison		⊠ J	ail
Facility Website with PREA Info	ormation: www.wilsoncour	ntykansas.d	org	
Has the facility been accredited	within the past 3 years?	∕es ⊠ No		
If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years): ACA NCCHC CALEA Other (please name or describe: Click or tap here to enter text. N/A If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe: N/A Warden/Jail Administrator/Sheriff/Director Name: Undersheriff Dana Moodie				
Email: dmoodle@wilsor	countykansas.org Facility PREA Cor	Telephone:	620-378-3622	
N It Day Dage	Tuoliny TREA OOI	inplication with	anagei	
Name: Lt Roy Reese Email: rreese@wilsonco	ountykansas.org	Telephone:	620-378-362	22
Facility Health Service Administrator N/A				
Name: Jen Isaacs				
Email: jen.isaacs@adva	incedch.com	Telephone:	309-272-3476	3
	Facility Cha	racteristics		
Designated Facility Capacity:		98		
Current Population of Facility:		63		

Average daily population for the past 12 months:		53		
Has the facility been over capacity at any point in the past 12 months?		☐ Yes ⊠ No		
Which population(s) does the facility hold?		☐ Females ☐ Mal	es Both Females and Males	
Age range of population:		18-62		
Average length of stay or time under supervision:		18 days		
Facility security levels/inmate custody levels:		Minimum, Medium,	Maximum	
Number of inmates admitted to facility during the past	12 mont	hs:	991	
Number of inmates admitted to facility during the past in the facility was for 72 hours or more:	12 mont	hs whose length of stay	Information not provided	
Number of inmates admitted to facility during the past in the facility was for <i>30 days or more:</i>	12 mont	hs whose length of stay	Information not provided	
Does the facility hold youthful inmates?		☐ Yes ☒ No		
Number of youthful inmates held in the facility during facility never holds youthful inmates)	the past	12 months: (N/A if the	Click or tap here to enter text. N/A	
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?			⊠ Yes □ No	
Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):	U.S Bur U.S Sta Sta Cor Gity city jail)	vate corrections or detention ner - please name or describ	agency on agency detention facility or detention facility (e.g. police lockup or	
Number of staff currently employed by the facility who	may hav	ve contact with inmates:	20	
Number of staff hired by the facility during the past 12 months who may have contact with inmates:		10		
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:		0		
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:		1		
Number of volunteers who have contact with inmates, currently authorized to enter the facility:		5		

Physica	al Plant			
Number of buildings:				
Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.		1		
Number of inmate housing units:				
Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.		10		
Number of single cell housing units:		7		
Number of multiple occupancy cell housing units:		0		
Number of open bay/dorm housing units:		2		
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):		12		
In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)		☐ Yes	□ No	⊠ N/A
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?		⊠ Yes	□No	
Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?		⊠ Yes	□No	
Medical and Mental Health Servi	ces and Forensic Me	dical Exan	ns	
Are medical services provided on-site?	⊠ Yes □ No			
Are mental health services provided on-site?	⊠ Yes □ No			

	☐ On-site	☐ On-site		
Where are sexual assault forensic medical exams prov Select all that apply.	ded? Rape Crisis C	enter		
	Other (please	name or describe: Click or tap here to enter		
	text.)			
1	nvestigations			
Crii	ninal Investigations			
Number of investigators employed by the agency and/of for conducting CRIMINAL investigations into allegation harassment:				
When the facility received allegations of sexual abuse	or sovual harassment (who	Facility investigators		
staff-on-inmate or inmate-on-inmate), CRIMINAL INVES				
Select all that apply.		An external investigative entity		
	Local police departmen	t		
	☑ Local sheriff's department			
Select all external entities responsible for CRIMINAL	☐ State police			
INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal	A U.S. Department of Justice component			
investigations)	☑ Other (please name or describe: Kansas Bureau of			
	Investigation)	estigation)		
	□ N/A			
Admin	istrative Investigations			
Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?				
When the facility receives allegations of sexual abuse of	or savual harassment (who	Facility investigators		
staff-on-inmate or inmate-on-inmate), ADMINISTRATIV		Agency investigators		
conducted by: Select all that apply		☐ An external investigative entity		
Soloat all outernal antition recognition for	Local police departmen	t		
Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that	☐ Local sheriff's department			
apply (N/A if no external entities are responsible for administrative investigations)	☐ State police			
	A U.S. Department of Justice component			
	Other (please name or	describe: Click or tap here to enter text.)		
	□ N/A			

Audit Findings

Audit Narrative (including Audit Methodology)

The auditor provided the facility with "Notice of Scheduled PREA Audit" posters and posting instructions six weeks prior to the auditor's visit. Posters were provided in both English and Spanish. The audit announcements contained the auditor's mailing address for inmates to write, if desired. Documentation was received to show the posters had been placed as instructed. The auditor received one letter from an inmate requesting to be interviewed during the on-site visit.

Upon arrival to the facility, the auditor met with senior staff to go over the audit process and schedule. The auditor was then led on a full tour of the facility, visiting all areas. During the tour, the auditor conducted informal interviews with both staff and inmates about PREA and the purpose of the visit.

At the conclusion of the tour, the auditor asked for and received several additional items of documentation including:

- Alpha roster by cell house.
- List of names of inmates who have reported being sexually abused during their initial risk screening.
- List of inmates who are LGBTQI.
- List of inmates with mental health issues.
- List of inmates who do not speak English.
- List of inmates in segregation.
- List of inmates who have reported a sex abuse or sexual harassment in the facility.
- List of inmates who are blind, deaf, or hard of hearing.
- List of correctional staff who were hired having previous correctional/institutional experience.
- Duty rosters for Tuesday and Wednesday.
- List of correctional staff hired or promoted during the past 12 months.

During the on-site visit, the auditor conducted 12 random inmate interviews, seven (7) male and five (5) female. The inmates were selected at random from each housing unit, by the auditor selecting names from the inmate alpha roster. There were no inmates at the facility to interview who were deaf or hard of hearing, blind, or who could not speak English. The auditor interviewed one inmate who identified as bisexual. There were no inmates housed in the facility who had reported an allegation of sex abuse. The auditor interviewed two inmates who disclosed sexual abuse during the intake process. A total of 15 inmates were interviewed.

The auditor conducted interviews with eight (8) random staff, including a non-uniform food service worker. In addition, specialized interviews were completed with the Sheriff, Undersheriff, (who also serves as the facility contract administrator, PREA Coordinator, Jail Administrator, Human Resource officer, Investigator, Incident Review Team Member, and Designated officer for staff and inmate Monitoring), PREA Compliance Manager, Medical/Mental Health staff, Segregation Supervisor, Intermediate Supervisory staff, Contractors, Intake Officers, and Community Members. A total of 18 staff were interviewed. One volunteer was interviewed.

Facility Characteristics



The Wilson county jail is a single story structure, built in 2002 and is part of the Wilson County Sheriff's Department. The jail contains the following housing units:

- B-4 Female Trustees
- B-18 Male Trustees
- B-21 Department of Corrections inmates
- B-22 Empty/Renovation
- B-25 Female Pod #2
- B-27 General Population males
- B-30 General Population males
- B-31 General Population males
- B-34 Sex Offenders-Male
- Segregation Unit

During the tour, the auditor made the observations listed below.

- There are several blind spots where inmates are authorized that are not covered by video security cameras.
- A number of windows in the living units were covered with black plastic, preventing staff from viewing the occupants.
- Camera placement was well thought out, although additional cameras could help to reduce blind spots.
- Camera placement in the segregation cells provide the needed ability for observation, yet do not show the toilet. Very well thought out.
- Only six of the segregation cells have cameras.
- All of the windows in the segregation cell doors were covered, which prevents staff from seeing inside.
- There are a number of solid doors throughout the facility with no windows.
- Additional PREA signage is recommended for all areas of the facility.
- All of the showers are used as singles; there are no gang showers.
- Many of the overhead lights in the living units are kept off during the day, making it difficult to observe activity in the inmate areas.

Summary of Audit Findings

The summary should include the number and list of standards exceeded, number of standards met, and number and list of standards not met.

Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

Standards Exceeded

Number of Standards Exceeded: 0

List of Standards Exceeded: Click or tap here to enter text.

Standards Met

Number of Standards Met: 45

Standards Not Met

Number of Standards Not Met: 0

List of Standards Not Met: Click or tap here to enter text.

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11	(a)		
•		he agency have a written policy mandating zero tolerance toward all forms of sexual and sexual harassment? $\ oxtimes$ Yes $\ oxtimes$ No	
•		he written policy outline the agency's approach to preventing, detecting, and responding ual abuse and sexual harassment? $\ oxdot$ Yes $\ oxdot$ No	
115.11	(b)		
•	Has the	e agency employed or designated an agency-wide PREA Coordinator? ⊠ Yes □ No	
•	Is the F	PREA Coordinator position in the upper-level of the agency hierarchy? \boxtimes Yes \Box No	
•	overse	he PREA Coordinator have sufficient time and authority to develop, implement, and se agency efforts to comply with the PREA standards in all of its facilities? \square No	
115.11	(c)		
•		agency operates more than one facility, has each facility designated a PREA compliance per? (N/A if agency operates only one facility.) \square Yes \square No \boxtimes NA	
•	facility'	he PREA compliance manager have sufficient time and authority to coordinate the s efforts to comply with the PREA standards? (N/A if agency operates only one facility.) \square No \square NA	
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

Instructions for Overall Compliance Determination Narrative

There is a written policy which states that the facility has a zero tolerance toward all forms of sex abuse and sexual harassment. There is not a singular PREA policy, but rather a conglomeration of 15 separate

policies to address the PREA standards. Although the policies are cumbersome and repetitive, the information required by the PREA standards is contained within. The facility has named a jail lieutenant as the PREA Compliance Manager (PCM); however at the time of the on-site audit, he had only recently been promoted and therefore, he had not had time to become familiar with the PREA standards. For that reason, the Undersheriff, who is the Lieutenant's direct supervisor and who is the PREA Coordinator (PC), served as the auditor's main source of PREA information. The Undersheriff serves as the Warden of the jail and by his rank, has the authority and time necessary to oversee the facility's PREA compliance efforts.

Staff and inmates who were interviewed by the auditor were all very aware of the facility's zero tolerance policy toward sex abuse and sexual harassment.

Policy W-20.1 Prison Rape Elimination Act, reads in part, as follows:

POLICY:

The Wilson County Jail (WCJ) will have written policy and procedures mandating zero-tolerance towards all forms of sexual abuse and sexual harassment. WCJ will describe in detail approaches taken to prevent, detect, and respond to such conduct. Policy and procedure will be in accordance with the DOJ Title 28 Code of Federal Regulations, Part 115, and National Standards, to prevent, detect, and respond to prison rape.

PROCEDURE:

Zero Tolerance for Sexual Abuse and Sexual Harassment

- A. WCJ has zero tolerance toward all forms of sexual abuse and sexual harassment within the facility
- B. The PREA policies drafted for WCJ will implement the agency's zero tolerance approach to preventing, detecting, and responding to sexual abuse and sexual harassment
- C. WCJ identified disciplinary sanctions for those found to have participated in prohibited behaviors (see Policy....)
- D. WCJ has designated an upper-level, agency-wide PREA coordinator who has sufficient time and authority to implement and oversee WCJ efforts and comply with WCJ standards.

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (a)

•	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 or
	or after August 20, 2012? (N/A if the agency does not contract with private agencies or other
	entities for the confinement of inmates.) \square Yes \square No \boxtimes NA

115.12 (b)

Does any new contract or contract renewal signed on or after August 20, 2012 provide for

	(N/A if	y contract monitoring to ensure that the contractor is complying with the PREA standards? the agency does not contract with private agencies or other entities for the confinement ates.) \Box Yes \Box No \boxtimes NA
Audit	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions	for Overall Compliance Determination Narrative
	tandard nmates.	is not applicable as the Wilson County Jail does not contract with another facility to house
Stan	dard 1	115.13: Supervision and monitoring
All Ye	s/No Q	uestions Must Be Answered by the Auditor to Complete the Report
115.13	3 (a)	
•		he facility have a documented staffing plan that provides for adequate levels of staffing there applicable, video monitoring, to protect inmates against sexual abuse?
•	staffing	culating adequate staffing levels and determining the need for video monitoring, does the g plan take into consideration: Generally accepted detention and correctional practices? \Box No
•		culating adequate staffing levels and determining the need for video monitoring, does the g plan take into consideration: Any judicial findings of inadequacy? \boxtimes Yes \square No
•	staffing	culating adequate staffing levels and determining the need for video monitoring, does the g plan take into consideration: Any findings of inadequacy from Federal investigative les? \boxtimes Yes \square No
•	staffing	culating adequate staffing levels and determining the need for video monitoring, does the g plan take into consideration: Any findings of inadequacy from internal or external ght bodies? \boxtimes Yes \square No
•	staffing	culating adequate staffing levels and determining the need for video monitoring, does the g plan take into consideration: All components of the facility's physical plant (including spots" or areas where staff or inmates may be isolated)? \boxtimes Yes \square No

•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No \square NA
•	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? $\ \ \ \ \ \ \ \ \ \ \ \ \ $
115.13	3 (b)
•	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.) \boxtimes Yes \square No \square NA
115.13	3 (c)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.13	3 (d)
•	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? \boxtimes Yes \square No
•	Is this policy and practice implemented for night shifts as well as day shifts? \boxtimes Yes $\ \square$ No 20

■ 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 □ No
Auditor Overall Compliance Determination
☐ Exceeds Standard (Substantially exceeds requirement of standards)
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (Requires Corrective Action)
Instructions for Overall Compliance Determination Narrative
The jail does abide by a written staffing plan which was first developed in 2013. Documentation was provided to the auditor which shows how the staffing plan was developed. The documentation shows that the 11 items required by this standard were taken into account in determining the number and placemen of security staff. The staffing plan is reviewed every year by the Undersheriff and jail Lieutenant to evaluate whether changes to the plan are needed. The plan documents that a minimum of three staff are needed at all times to safely and effectively run the jail. The annual review also includes an assessmen of the number and placement of the facility's video and surveillance cameras. The most recent review was completed on June 12th, 2019. It was indicated that there were zero times during the period currently under review, where the minimum number of staff was not met. Documentation was provided to show that the Undersheriff and other senior level staff conduct unannounced rounds in the facility at random times and on all shifts. Security staff who were interviewed reported that senior staff do periodically show up at the jail and make administrative rounds. Those who were interviewed reported that it has never been a practice at the jait to call ahead to others to let them know that senior staff are on grounds. At the time of the on-site visit, there were two vacant staff positions in the jail. Through interviews with staff, it was learned that there is a very high turnover rate for jail officers. The starting pay for a jail office is extremely low, several dollars per hour lower than comparable positions in the state. For that reason overtime is often used to ensure that minimum staffing numbers are met.
Standard 115.14: Youthful inmates
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.14 (a)
■ Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
115.14 (b)

• In areas outside of housing units does the agency maintain sight and sound separation be youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmate years old].) ☐ Yes ☐ No ☒ NA	
In areas outside of housing units does the agency provide direct staff supervision when yo inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not lyouthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA	
115.14 (c)	
 Does the agency make its best efforts to avoid placing youthful inmates in isolation to com with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) □ Yes □ No ⋈ NA 	
■ Does the agency, while complying with this provision, allow youthful inmates daily large-me exercise and legally required special education services, except in exigent circumstances? if facility does not have youthful inmates [inmates <18 years old].) □ Yes □ No ☒ NA	(N/A
 Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☐ Yes ☐ No ☒ NA 	
Auditor Overall Compliance Determination	
☐ Exceeds Standard (Substantially exceeds requirement of standards)	
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
□ Does Not Meet Standard (Requires Corrective Action)	
Instructions for Overall Compliance Determination Narrative	
This standard is not applicable as no inmates under the age of 18 are housed at the jail.	
Standard 115.15: Limits to cross-gender viewing and searches	
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report	
115.15 (a)	
 Does the facility always refrain from conducting any cross-gender strip or cross-gender vis body cavity searches, except in exigent circumstances or by medical practitioners? ☑ Yes □ No 	ual
115.15 (b)	

•	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.) \boxtimes Yes \square No \square NA
•	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.) \boxtimes Yes \square No \square NA
115.15	i (c)
•	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? \boxtimes Yes $\ \square$ No
•	Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.) \boxtimes Yes \square No \square NA
115.15	5 (d)
110.10	, (u)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? \boxtimes Yes \square No
115.15	5 (e)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.15	5 (f)
•	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? \boxtimes Yes \square No

•	Does the facility/agency train security staff in how to conduct searches of transgender are intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? \boxtimes Yes \square No			
Audite	Auditor Overall Compliance Determination			
	☐ Exceeds Standard (Substantially exceeds requirement of standards)			
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		

Instructions for Overall Compliance Determination Narrative

The facility policy prohibits cross gender searches of any kind, except in exigent circumstances. Staff who were interviewed said that even though they have been trained on how to complete cross gender searches, they had never actually done a cross gender pat search. The policy also requires staff to log any such searches in the jail computer database. When asked to describe what they believed would be an exigent circumstance when it would be allowed to perform such a search, the staff could not think of a time because there is always at least one female officer on duty. Further, it was reported that if needed, they would call an off duty female officer to respond to the facility. In addition, the agency female 911 dispatchers have all been trained in how to conduct pat down and strip searches of female inmates. Inmates who were interviewed reported that they have never been searched by a staff person of the opposite sex. Female inmates who were interviewed reported that there had never been a time when they were denied a call-out because there were no female officers on duty who could perform a pat down search. Staff who were interviewed were knowledgeable about the restrictions on viewing inmates of the opposite gender when the inmates are showering, changing clothes or using the toilet, except as part of regular security rounds.

During the tour of the facility, the auditor checked to make sure that staff posted in the control room could not view inmates who were using the toilet. The facility has digitized the image over the toilet which scrambles the image on the video monitors. This, in effect, prevents staff from being able to clearly see an inmate who is using the toilet. Unfortunately, the inmates were not told about this feature which resulted in several complaints to the auditor from inmates who believed that staff could watch the video monitor and see them using the toilet. Once they were told about the scrambled image around the toilet, they were less offended. The auditor observed that showers all had shower curtains which would prevent staff from seeing the inmates while the inmates are naked in the shower stalls.

The majority of the inmates who were interviewed reported that staff are very good about announcing when opposite gender staff enter the living units.

Policy 20.3 reads in part, as follows:

Staff will not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.

If the inmate's genital status is unknown, it may be determined through conversation 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.

During the initial booking process with a transgender or intersex inmate, staff will ask the inmate if they prefer to be searched by a male or female officer. This information will be recorded on the PREA screening form in the open text area following question #5.

Inmates will be allowed 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/dorm checks.

Officers of the opposite gender shall announce their presence when entering a living unit.

Staff who were interviewed all reported that they had received training on how to complete cross gender pat down searches and on how to search transgender inmates, although none of the staff could remember ever having a transgender inmate in the jail. The auditor was provided with documentation of the training and signature pages where staff had acknowledged receiving the training. The training materials indicated that staff who were performing cross gender pat searches and those who may perform searches of transgender inmates are to do so in a professional and respectful manner and in the least intrusive way possible.

Strip searches are performed using only one officer. The inmate and the officer go into a room and close the door behind them. There are no surveillance cameras in the room, there is no window in the door and no audio recording is made during the strip search. The auditor spoke with the Undersheriff about this practice and offered recommendations for needed improvement in this area.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.16 (a)

•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No

•	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? \boxtimes Yes \square No
•	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)? \boxtimes Yes \square No
•	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.16	(b)
•	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? \boxtimes Yes \square No
•	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? \boxtimes Yes \square No
115.16	(c)
•	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? \boxtimes Yes \square No
Audito	or Overall Compliance Determination
	☐ Exceeds Standard (Substantially exceeds requirement of standards)

\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

At the time of the auditor's onsite visit, there were no inmates who were deaf or hard of hearing, no inmates who were blind, and no inmates who could not speak English. There were no inmates identified with a substantial mental illness and no inmates with speech impairment which would prevent them from communicating with staff. The facility has provisions in place in the event such inmates are booked into the jail in the future. Staff who were interviewed reported that there have been no inmates in the jail meeting the definitions described above during the period currently under review. The only exceptions have been that periodically, an inmate will be booked into the jail who does not speak fluent English. The most common non-English language spoken in the area is Spanish. There are several staff employed in the facility who can speak Spanish, if needed. If none are on duty at the time, staff would be called in to perform translation service. In addition, the facility has entered into an agreement with a translation service called Language Line. This is an organization which, for a fee, can translate almost any language needed by use of the telephone. The inmate needs only to identify what language they speak and then staff will call the Language Line and request a translator who speaks that language. In addition, the facility can request that all written PREA orientation materials be translated into the specific language needed.

The facility keeps on-hand, PREA orientation and education materials in the Spanish language. These materials include the PREA video titled, *PREA: What You Need to Know.* All PREA education material and PREA grievance information are available in Spanish via the inmate kiosk located in each living unit. If an inmate is booked who is blind or cannot read, a staff person would be assigned to read the PREA materials to them. The PREA video, both English and Spanish, are close-captioned.

Staff who were interviewed reported that they would not allow an inmate to serve as an interpreter except in an emergency. When asked, none of the staff reported ever needing to use an interpreter to take an allegation of sex abuse or sexual harassment from an inmate.

Policy W-20.14 reads in part, as follows:

The Wilson County Jail (WCJ)shall take appropriate steps to ensure that Inmates with disabilities (including, for example inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech 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, provide access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using necessary specialized vocabulary. In addition, the agency shall ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision.

WCJ will not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first response duties under 115.64 or investigation of the inmate's allegations.

WCJ has entered into an agreement with Language Line Solutions to provide interpretive assistance for classification purposes.

WCJ provides written PREA expectations in both English and Spanish for inmates who may be hard of hearing.

WCJ has entered into an agreement with Braille Works to provide PREA materials in braille for inmates who may be blind and deaf.

WCJ has a PREA Video that can be shown to inmates with psychiatric or intellectual disabilities.

Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.17	(a)
•	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 □ No
•	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? \boxtimes Yes \square No
•	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? \boxtimes Yes \square No
•	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)? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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 question immediately above? \boxtimes Yes \square No
115.17	(b)
•	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates? \boxtimes Yes \square No
•	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? $\ \ \ \ \ \ \ \ \ \ \ \ \ $
115.17	(c)
•	Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check? \boxtimes Yes \square No

•	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? \boxtimes Yes \square No
115.17	" (d)
•	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? \boxtimes Yes \square No
115.17	(e)
•	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? \boxtimes Yes \square No
115.17	' (f)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? \boxtimes Yes $\ \square$ No
115.17	(g)
•	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? \boxtimes Yes \square No
115.17	' (h)
•	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.) \boxtimes Yes \square No \square NA
Audito	or Overall Compliance Determination
	☐ Exceeds Standard (Substantially exceeds requirement of standards)

\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

Hiring of contact staff to work in the jail is completed by the Undersheriff. All applicants applying for a job in the jail go through a thorough background investigation which includes checking their criminal history, checking their references, and previous employers. Each applicant's name is checked through the National Crime Information Center (NCIC), and the Interstate Identification Index (III). Background checks are completed at least every five years. Applicants with a conviction for any sex offenses are not considered for hire. If the applicant was previously employed by a detention type of facility, the PC will check to see if the applicant was involved in any substantiated allegations of sex abuse or sexual harassment with an inmate or resident, of if the applicant resigned during any such investigation. Each applicant is also asked directly both prior to being hired and prior to any promotion, about any previous sexual misconduct either in a facility or in the community. The PC advised that until recently, he has contacted previous employers by telephone and did not document the checks, other than possibly making a note in the applicants file of the phone call. He now documents this aspect of the background check by use of a form letter that he sends to pervious institutional employers which askes about substantiated allegations of sex abuse and sexual harassment. The auditor requested and was provided with a list of staff who have inmate contact who were hired within the past year, who had previous institutional experience. From the list, the auditor selected names and was provided with documentation which showed that the PC had made his best effort to contact the previous employers for PREA information. According to the PC, he considers any incidents and allegations of sex abuse or sexual harassment before hiring or promoting anyone. A form is completed where promotional candidates are asked directly if they are guilty of any crimes for which they have not yet been charged. Employees are required to selfreport any significant contact they have with law enforcement while off duty.

Each contract staff and volunteer who will have inmate contact also goes through the background check and criminal history check.

Policy W-20.4 reads in part, as follows:

WCJ does not hire or promote anyone who may have contact with inmates, and shall no enlist 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

WCJ shall consider 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

WCJ performs a criminal background check on all individuals that have accepted a contingent job offer. A background records check is also completed on contractors and volunteers that may have contact with the inmates

 Criminal background checks will be also completed on employees/contractors/volunteers at least once every 5 years from date of hire WCJ will also attempt to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegations of sexual abuse (Form 103)

WCJ will ask all applicants and employees who may have contact with the inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions and in any interview or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.

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

Unless prohibited by law, WCJ will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.

If the agency designed or acquired any new facility or planned any substantial expansion or

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

11	15.1	8 ((a)
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	expans if agen facilitie	cation of existing facilities, did the agency consider the effect of the design, acquisition, sion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A cy/facility has not acquired a new facility or made a substantial expansion to existing as since August 20, 2012, or since the last PREA audit, whichever is later.) \square No \square NA
115.18	(b)	
•	other nagency update techno	igency installed or updated a video monitoring system, electronic surveillance system, or nonitoring technology, did the agency consider how such technology may enhance the y 's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or ed a video monitoring system, electronic surveillance system, or other monitoring alogy since August 20, 2012, or since the last PREA audit, whichever is later.)
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

The facility has implemented additional cameras and DVRs during this period of review. During the interview with the County Sheriff, he explained how they had added this enhancement as part of their effort to increase their ability to successfully implement PREA standards. He further explained that with the placement of the cameras, they attempted to eliminate blind spots, and also to aid as an investigative tool in the event that they had to investigate an allegation of sexual harassment or abuse.

RESPONSIVE PLANNING

11	5	.21	(a)

Standard 115.21: Evidence protocol and forensic medical examinations
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.21 (a)
■ 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 □ No □ NA
115.21 (b)
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 □ No □ NA
■ Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes □ No □ NA
115.21 (c)
■ 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 □ No
■ Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? ☑ Yes □ No
• 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 □ No

•	Has th	e agency documented its efforts to provide SAFEs or SANEs? ⊠ Yes □ No	
115.21	(d)		
•		he agency attempt to make available to the victim a victim advocate from a rape crisis ? \boxtimes Yes $\ \square$ No	
•	make a	be crisis center is not available to provide victim advocate services, does the agency available to provide these services a qualified staff member from a community-based zation, or a qualified agency staff member? (N/A if the agency <i>always</i> makes a victim ate from a rape crisis center available to victims.) \boxtimes Yes \square No \square NA	
•		e agency documented its efforts to secure services from rape crisis centers? □ No	
115.21	(e)		
•	qualifie	uested by the victim, does the victim advocate, qualified agency staff member, or ed community-based organization staff member accompany and support the victim h the forensic medical examination process and investigatory interviews? ⊠ Yes □ No	
•		uested by the victim, does this person provide emotional support, crisis intervention, ation, and referrals? \boxtimes Yes $\ \square$ No	
115.21	(f)		
	agency through	agency itself is not responsible for investigating allegations of sexual abuse, has the y requested that the investigating agency follow the requirements of paragraphs (a) h (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND strative sexual abuse investigations.) \square Yes \square No \boxtimes NA	
115.21	(g)		
•		r is not required to audit this provision.	
115.21	(h)		
•	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 <i>always</i> makes a victim advocate from a rape crisis center available to victims.) \boxtimes Yes \square No \square NA		
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	

Instructions for Overall Compliance Determination Narrative
The Wilson County Jail falls under the authority of the Wilson County Sheriff's Office (WCSO). The WCSO is a law enforcement agency and is responsible for investigating any allegations of sex abuse or sexual harassment occurring within the jail. The facility houses adult offenders, both male and female, but does not house any juvenile or youthful offenders. The agency follows a uniform evidence protocol which is in accordance with the Kansas Law Enforcement Training Center (KLETC). The facility sex abuse investigator has completed the required basic training provided by KLETC to be a certified law enforcement officer, as well as an online course through the National Institute of Corrections (NIC) titled, <i>Investigating Sex Abuse in a Confinement Setting</i> . During interview with the PREA Coordinator, it was learned that the nursing staff at the facility are not responsible for conducting a sexual assault examination or for collecting forensic evidence. During the current period of review, there were no substantiated allegations of sex abuse. However, in the event the facility does receive an allegation of sex abuse that would require the collection of any type of forensic evidence, the inmate victim would be transported to a local hospital where treatment would be provided by trained medical staff. The facility has entered into a MOU with the Neosho Regional Memorial Medical Center (NRMMC) for a Sexual Assault Nurse Examiner (SANE) to perform forensic medical examinations. Facility nurses would only be responsible for administering emergency first aid. Documentation was discovered which shows that there are no qualified rape crisis centers nearby. For that reason, there is no MOU. Per the PREA policy, the PREA Coordinator has entered a MOU with Hope Unlimited, located in Iola, Kansas, who has agreed to make a victim advocate available upon request. According to the PREA policy, the facility would also provide a qualified staff member to accompany the victim of sexual abuse throughout the forensic medical examinat
Standard 115.22: Policies to ensure referrals of allegations for investigations
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.22 (a)
■ Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? ⊠ Yes □ No
■ Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? Yes □ No
115.22 (b)
■ 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 □ No

Does Not Meet Standard (Requires Corrective Action)

•		e agency published such policy on its website or, if it does not have one, made the policy ole through other means? \boxtimes Yes \square No
•	Does th	he agency document all such referrals? $oxtimes$ Yes \oxtimes No
115.22	(c)	
•	the res	parate entity is responsible for conducting criminal investigations, does the policy describe ponsibilities of both the agency and the investigating entity? (N/A if the agency/facility is sible for criminal investigations. See 115.21(a).) \boxtimes Yes \square No \square NA
115.22	(d)	
•	Auditor	r is not required to audit this provision.
115.22	2 (e)	
•	Auditor	r is not required to audit this provision.
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions f	or Overall Compliance Determination Narrative
abuse to say intervie	or sexu that all wed re	licy states very clearly that an investigation will be completed for every allegation of sex al harassment made. Staff who were interviewed were clear about the policy and went on allegations would be taken seriously and investigated thoroughly. Inmates who were ported that, if they were to make an allegation, staff would take it seriously. The PREA d to the facility website at. http://www.wilsoncountykansas.org/main/county-offices/sheriff
		TRAINING AND EDUCATION
Stone	dard 1	145 24. Employee training
Stand	aard 1	115.31: Employee training
		uestions Must Be Answered by the Auditor to Complete the Report
115.31	(a)	
•		he agency train all employees who may have contact with inmates on its zero-tolerance for sexual abuse and sexual harassment? \boxtimes Yes \square No

•	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? \boxtimes Yes \square No
•	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? \boxtimes Yes \square No
•	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.31	(b)
	Is such training tailored to the gender of the inmates at the employee's facility? $oximes$ Yes \odots No
•	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? \boxtimes Yes \square No
115.31	(c)
•	Have all current employees who may have contact with inmates received such training? \boxtimes Yes $\ \square$ No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No

115.31 (d)

•	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? \boxtimes Yes \square No		
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	

Instructions for Overall Compliance Determination Narrative

Does Not Meet Standard (Requires Corrective Action)

The Wilson County Jail does not have a staff development department or fulltime training staff. Most training for jail staff is completed through on the job training (OJT) with a more senior staff person. However, PREA training is done in the classroom and is taught by the PC. Training includes going over the PREA policy, watching a PREA video provided by Lockup USA, and reviewing the facility coordinated response plan for allegations of sex abuse and sexual harassment. The auditor reviewed the PREA training materials and written training outlines, including the outline from Lockup, and found that the training provided contains the information required by this standard (115.31(a)1-10). Staff are required to pass a PREA test as part of class completion. According to the PC, all new staff are required to complete PREA training before they are allowed to work on their own in the jail. The auditor reviewed training records of several randomly selected staff and found their training signature page documenting that they attended the class and passed the test. In addition to the initial PREA training, all jail staff are required to complete refresher training at least every other year.

The auditor interviewed some jail staff who had less than six months on the job and some staff who had worked in the jail for several years. In each case, staff who were interviewed reported that they had completed PREA training, either their initial PREA training or their refresher training, within the past two or three months. Staff were able to describe the facility's zero tolerance approach to sex abuse and sexual harassment, the staff and inmates' right to be free from sex abuse and sexual harassment, how to report sex abuse and sexual harassment, and employees' and inmates' right to be free from retaliation if they were to make an allegation. Staff reported that they were trained on how to avoid inappropriate relationships with inmates and what signs to look for that might show an inmate is being sexually abused or harassed. Although none of the staff who were interviewed could remember ever having an inmate who was transgender or intersex, they have received training on how professionally manage this population, including how to do pat down searches, and how to complete book-in and risk assessments. The facility houses both male and female inmates, so the training is tailored for both sexes. The PREA policy reads in part, as follows:

Employee Training

WCJ will train all employees who may have contact with inmates on the following topics:

- 1) Its zero-tolerance policy for sexual abuse and sexual harassment;
- 2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment, prevention, detection, reporting, and response policies and procedures;
- 3) Inmates' right to be free from sexual abuse and sexual harassment;

- 4) The right of inmates and employees to be free from retaliations for reporting sexual abuse and sexual harassment:
- 5) The dynamics of sexual abuse and sexual harassment in confinement;
- 6) The common reactions of sexual abuse and sexual harassment victims;
- 7) How to detect and respond to signs of threatened and actual sexual abuse;
- 8) How to avoid inappropriate relationships with inmates;
- 9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and
- 10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities

WCJ will train all employees during orientation

WCJ shall provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures.

- In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies through
 - o NIC online training
 - Coordinated response posters
 - PREA materials throughout the facility

WCJ shall document, through employee signature or electronic verification that employees understand the training they have received.

Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

11	5	.32	2 (a)
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•	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? $oximes$ Yes \oximes No

115.32 (b)

•	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 □ No

115.32 (c)

■ Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?

☑ Yes □ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards
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		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions	for Overall Compliance Determination Narrative
people to hav pass a for the volunte abuse becom the au-	e are volue inmate written e class, eers. The and selection called had befine we	as a number of volunteers/contractors who have inmate contact. The majority of these funteers providing faith-based drug and alcohol recovery assistance. Before being allowed e contact, volunteers are required to go through a PREA training class with the PC, then multiple choice test. The auditor was provided with the training materials used as an outline along with the signed acknowledgement sheets and completed tests for each of the ne training material does cover the facility's zero tolerance stance toward all forms of sex sual harassment, as well as how and who they are to contact to report abuse if it were to n. The auditor was provided with a list of the names of current volunteers. From that list, led a volunteer and spoke to him about the training he had received. The volunteer reported een through the PREA training class. He was knowledgeable about PREA and knew what re to become aware of an abusive situation in the jail. The PREA policy reads in part, as
All vol tolerar incider The ty with in	unteers nce poli nts. pe and mates. a) b)	and contractors who have contact with inmates shall be notified of the agency's zero- icy regarding sexual abuse and sexual harassment and informed how to report such level of training is based on the services they provide and the level of contact they have Unsupervised contractors/volunteers will receive classroom training on PREA Supervised contractors/volunteers will review and acknowledge understating of the facilities zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents by signing the PREA acknowledgement form (#115- 2)
they h	ave rec	nintain documentation confirming that volunteers and contractors understand the training eived. e repeated every 2 years.
Stan	dard 1	115.33: Inmate education
All Ye	s/No Q	uestions Must Be Answered by the Auditor to Complete the Report
115.33	3 (a)	
•		intake, do inmates receive information explaining the agency's zero-tolerance policy ing sexual abuse and sexual harassment? \boxtimes Yes \square No
•		intake, do inmates receive information explaining how to report incidents or suspicions of abuse or sexual harassment? \boxtimes Yes \square No

115.33 (b)

•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.33	3 (c)
•	Have all inmates received the comprehensive education referenced in 115.33(b)? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.33	3 (d)
•	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? \boxtimes Yes \square No
•	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? \boxtimes Yes $\ \square$ No
•	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? \boxtimes Yes \square No
•	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? \boxtimes Yes \square No
•	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? \boxtimes Yes \square No
115.33	B (e)
•	Does the agency maintain documentation of inmate participation in these education sessions? \boxtimes Yes $\ \Box$ No
115.33	3 (f)
•	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? \boxtimes Yes \square No

Exceeds Standard (Substantially exceeds requirement of standards) Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

Auditor Overall Compliance Determination

All inmates are provided with a PREA tri-fold pamphlet titled. End the Silence, during the book-in process. The pamphlet contains the definitions of sex abuse and sexual harassment, along with information on how to report abuse. The pamphlet contains instructions for several ways to make a report including: a phone number for the National Sexual Assault Hotline; the phone number for the facility PC and Undersheriff; and instructions for dialing the facility's internal sex abuse hotline, which goes directly to the 911 dispatcher. Inmates can make the phone calls from the inmate phones located in each living unit. There are posters throughout the facility and in the living units which contain the PREA phone numbers. PREA reporting information is also located on the inmate kiosk in each unit. In addition to the PREA information each inmate receives during intake, at least once per month, more comprehensive PREA education is provided via the inmate television system. At least once per month, a 15-minute PREA video titled, PREA, What You Need to Know, provided by the PREA Resource Center (PRC), is played across all inmate dayroom televisions. Inmates are required to watch the video at least once, and each inmate signs an acknowledgement form indicating that he/she received the PREA information. Staff are available to privately answer any questions an inmate may have after watching the video. Information contained in the video includes the inmates' right to be free from sex abuse and sexual harassment, and their right to not be retaliated against if they do make a report. The video has closed captioning in the event an inmate is deaf or hard of hearing. The video is also available in Spanish. Inmates who were interviewed reported getting PREA information during the book-in process. Most said that they received a pamphlet to take with them. Almost all said the information was provided within one to two hours of their arrival in the jail. Inmates who were interviewed were able to name at least two separate ways that they could report sex abuse or sexual harassment if they needed to.

The PREA policy reads in part, as follows:

Offender Orientation

Written policy, procedure and practice ensure that information is provided to offenders about sexual abuse/assault including:

- Prevention/intervention
- Self-protection
- Reporting sexual/assault
- Treatment and counseling

During the initial intake meeting with the booking staff, the inmates will receive a copy of the "Zero-tolerance" pamphlet. The booking staff will document on the acknowledgement of receipt that the offender has received the pamphlet.

• Inmates will be required to sign for the receipt of the PREA pamphlet.

Appropriate provisions will be made as necessary for the inmates not fluent in English, those with disabilities and t hose with low literacy levels.

Standard 115.34: Specialized training: Investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.34 (a)		
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 □ No □ NA		
115.34 (b)		
 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 ⋈ No ⋈ NA 		
 Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) ⋈ Yes ⋈ No ⋈ NA 		
■ 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 ☑ No ☑ NA		
 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 ☐ NO ☐ NA 		
115.34 (c)		
■ 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 □ No □ NA		
115.34 (d)		
 Auditor is not required to audit this provision. 		
Auditor Overall Compliance Determination		
☐ Exceeds Standard (Substantially exceeds requirement of standards)		

		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions f	or Overall Compliance Determination Narrative
abuse enforce the NIC training collecti provide	and sexement of by congring included on in a led by the second se	the onsite visit, only one staff member, the PC, had been properly trained to conduct sex kual harassment investigations. The PC is not only a fulltime, professional, certified law fficer in the state of Kansas, but also has completed additional specialized training through appleting the online course titled, <i>Investigating Sexual Abuse in a Confinement Setting</i> . This ed information on use of the Miranda and Garrity warnings and sex abuse evidence confinement setting. In addition, he has completed or taught all the onsite PREA training the agency. The auditor was provided copies of the certificates showing the PC has the required training.
Cton	dord 4	45 25. Charielized training. Medical and mantal health care
Stand	aara 1	15.35: Specialized training: Medical and mental health care
All Yes	s/No Qı	lestions Must Be Answered by the Auditor to Complete the Report
115.35	(a)	
•	who wo	he agency ensure that all full- and part-time medical and mental health care practitioners ork regularly in its facilities have been trained in how to detect and assess signs of sexual and sexual harassment? (N/A if the agency does not have any full- or part-time medical tal health care practitioners who work regularly in its facilities.) \boxtimes Yes \square No \square NA
•	who wo	he agency ensure that all full- and part-time medical and mental health care practitioners ork regularly in its facilities have been trained in how to preserve physical evidence of abuse? (N/A if the agency does not have any full- or part-time medical or mental health actitioners who work regularly in its facilities.) \boxtimes Yes \square No \square NA
•	who wo profess have a	he agency ensure that all full- and part-time medical and mental health care practitioners ork regularly in its facilities have been trained in how to respond effectively and sionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not ny full- or part-time medical or mental health care practitioners who work regularly in its s.) \boxtimes Yes \square No \square NA
•	who wo suspici or part-	ne agency ensure that all full- and part-time medical and mental health care practitioners ork regularly in its facilities have been trained in how and to whom to report allegations or ons of sexual abuse and sexual harassment? (N/A if the agency does not have any full-time medical or mental health care practitioners who work regularly in its facilities.) \square No \square NA
115.35	(b)	

•	receive facility	cal staff employed by the agency conduct forensic examinations, do such medical staff appropriate training to conduct such examinations? (N/A if agency medical staff at the do not conduct forensic exams or the agency does not employ medical staff.) \square No \square NA
115.35 (c)		
•	receive the age work re	he agency maintain documentation that medical and mental health practitioners have ad the training referenced in this standard either from the agency or elsewhere? (N/A if ency does not have any full- or part-time medical or mental health care practitioners who egularly in its facilities.) \boxtimes Yes \square No \square NA
115.35 (d)		
•	manda medica	dical and mental health care practitioners employed by the agency also receive training ted for employees by §115.31? (N/A if the agency does not have any full- or part-time of the number of the second of the se
•	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.) \boxtimes Yes \square No \square NA	
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instructions for Overall Compliance Determination Narrative		

verall Compliance Determination Narrative

Medical/MH services are provided through contract with Advanced Correctional Healthcare (ACH). ACH has one staff who is a Nurse Practitioner and a Mental Health Practitioner, who comes to the facility once every two weeks. There is also a medical Doctor who is on-call if needed. The facility nurse completed the same PREA training that is required for the security staff, taught by the PC. In addition, she has completed PREA training through ACH, taught by the regional manager. She also completed the specialized training online through NIC titled, Medical Health Care for Sexual Assault Victims in a Confinement Setting and Behavioral Health Care for Sexual Assault Victims in a Confinement Setting. The training received includes what is required by standard 115.35(a)(1-4). ACH staff are not responsible for completing sexual assault forensic examinations.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41	(a)
•	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.41	(b)
•	Do intake screenings ordinarily take place within 72 hours of arrival at the facility? \boxtimes Yes $\ \square$ No
115.41	(c)
•	Are all PREA screening assessments conducted using an objective screening instrument? ☑ Yes □ No
115.41	(d)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No

•	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? \boxtimes Yes \square No	
•	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-conformi or otherwise may be perceived to be LGBTI)? \boxtimes Yes \square No	
•	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? \boxtimes Yes \square No	
•	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? \boxtimes Yes \square No	
•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? \boxtimes Yes \square No	
115.41	(e)	
•	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 □ No	
•	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? \boxtimes Yes \square No	
•	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? \boxtimes Yes \square No	
115.41	(f)	
-	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? \boxtimes Yes \square No	е
115.41	(g)	
	Does the facility reassess an inmate's risk level when warranted due to a referral? Yes $\ oxdot$ No	
•	Does the facility reassess an inmate's risk level when warranted due to a request? Yes $\ \boxtimes\ No$	

•		he facility reassess an inmate's risk level when warranted due to an incident of sexual \mathbb{R}^2 \mathbb{R}^2 Yes \mathbb{R}^2 No
•	informa	he facility reassess an inmate's risk level when warranted due to receipt of additional ation that bears on the inmate's risk of sexual victimization or abusiveness? \Box No
115.41	(h)	
•	comple	e case that inmates are not ever disciplined for refusing to answer, or for not disclosing ete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), or (d)(9) of this section? \boxtimes Yes \square No
115.41	(i)	
•	respon	e agency implemented appropriate controls on the dissemination within the facility of ses to questions asked pursuant to this standard in order to ensure that sensitive ation is not exploited to the inmate's detriment by staff or other inmates? \boxtimes Yes \square No
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Every inmate who is booked into the jail is screened for risk of being sexually abused and risk of being sexually abusive. Female inmates are booked in by female officers and male inmates are booked in by male officers. The risk assessment normally takes place within the first few hours of the arrestee's arrival to the jail. The jail houses inmates for other county jails within the state of Kansas. If an inmate needs to be returned to the sending county jail, a PREA risk assessment is completed prior to his/her return. The auditor reviewed several of the risk screening forms for these inmates and found that they conform to the requirements of this standard.

The screening form that is used is an objective instrument in that it contains all of the screening risk factors required by this standard (115.41(d)(1-9) and it can be weighted by the screener's opinion of the risk factors present. Every officer working in the jail has been trained in the book-in process, which includes the procedure for completing the risk screening for each inmate. The auditor interviewed more than one of the book-in officers about how they complete the screening and what risk factors they look for. The book-in officer demonstrated the process using the screening tool and discussed the questions that are asked. The form contains questions to be asked about the inmate's previous criminal behaviors, including whether their criminal history is exclusively non-violent and whether they had ever perpetrated a sex offence or ever been the victim of a sex crime. There were no substantiated cases of sex abuse during the period currently under review and for that reason, there were no assessments warranted for a sexual incident. Inmates are never disciplined for not answering the risk assessment questions. If an inmate is unable to cooperate due to intoxication or is unwilling to answer intake questions at the time of

book-in, they will be housed in a single cell in the book-in area and the officer will attempt to complete the required assessments at a later time. All the materials and information gathered during the intake process are securely stored in the jail management software or in the inmate's paper file. Only uniformed jail staff and facility administrative staff are authorized to view this information, and it is not available for any unauthorized persons to view. The PREA policy reads in part, as follows:

Screening for risk of victimization and abusiveness:

Within 72 hours of arrival at WCJ all inmates will be assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive towards other inmates.

Such assessments shall be conducted using an objective screening instrument (attached). The screening instrument considers the following criteria (Sexual Victimization):

- a. Whether the inmate has a behavioral, physical or developmental disability;
- b. Age of the inmate;
- c. Physical stature of the inmate;
- d. Whether the inmate has been previously incarcerated;
- e. Whether the inmate's criminal history if exclusively nonviolent;
- f. Whether the inmate has prior convictions of sex offenses against an adult or child;
- g. How does the inmate perceive their sexual orientation;
- h. Whether the inmate has previously experienced sexual victimization;
- i. The inmates own perception of vulnerability

Inmates identified as high-risk to abuse others will be "tagged" on the master count board located in Master Control. This tag will serve as a reminder to the officers that when housing these inmates special consideration is required as they can only be house with other high-risk abusers.

The jail does not house inmates solely for civil immigration purposes.

Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.42 (a)

•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No

•	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? \boxtimes Yes \square No
115.42	(b)
•	Does the agency make individualized determinations about how to ensure the safety of each inmate? \boxtimes Yes \square No
115.42	(c)
•	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)? \boxtimes Yes \square No
•	When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? \boxtimes Yes \square No
115.42	(d)
•	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? \boxtimes Yes \square No
115.42	(e)
•	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? \boxtimes Yes \square No
115.42	(f)
•	Are transgender and intersex inmates given the opportunity to shower separately from other inmates? \boxtimes Yes $\ \square$ No
115.42	(g)
	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.) \boxtimes Yes \square No \square NA
	consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay,

	transg identifi placen	al, transgender, or intersex inmates, does the agency always refrain from placing: ender inmates in dedicated facilities, units, or wings solely on the basis of such cation or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the nent of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal nent.) \boxtimes Yes \square No \square NA
•	conser bisexu interse or stat	s placement is in a dedicated facility, unit, or wing established in connection with a nt decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, al, transgender, or intersex inmates, does the agency always refrain from placing: ex inmates in dedicated facilities, units, or wings solely on the basis of such identification us? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) NA
Audite	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions	for Overall Compliance Determination Narrative
inform a Preceive infeach in name staff. inmate as an inform all inmonent bo a trans where be bes	ation obtator (P) ormation mate is denotin When a who ha inmate ation is ates as oked in sgender the inmat.	booked into the jail has a risk screening completed as described in 115.41. Using the stained through the screening and interview process, each inmate is then classified as being provided (V), or No-Issues (N). This information is provided daily to the PC, who then uses not update the daily prisoner log. The log contains the name and current living unit where is placed. In addition, the risk assessment designation of P, V, or N is listed by each inmate's general their classification. The prisoner log is provided daily to the shift supervisor and other jail a new inmate is booked in, jail staff use the risk designation as a way to ensure that an as been designated as a previous victim of sex abuse is not housed in the same living unit who was designated as a person with a history of perpetrating a sex offense. This also used to make work assignments, although there are very few work opportunities, and a transgender or intersex inmate during their employment. The auditor was assured that if or Intersex inmate were to be booked in, their housing assignment would be based on the attention of the safest, taking into account the inmate's own perception of where would mates shower alone in this facility; there are no gang showers. There are no living units assignated for inmates who are Lesbian, Gay, Bi-sexual, Transgender, or Intersex (LGBTI).

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.43 (a)

	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? \boxtimes Yes \square No
	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? \boxtimes Yes \square No
115.43	(b)
	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? \boxtimes Yes \square No
	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? \boxtimes Yes \square No
	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? \boxtimes Yes \square No
	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? \boxtimes Yes \square No
	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 <i>never</i> restricts access to programs, privileges, education, or work opportunities.) \boxtimes Yes \square No \square NA
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility <i>never</i> restricts access to programs, privileges, education, or work opportunities.) \boxtimes Yes \square No \square NA
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility <i>never</i> restricts access to programs, privileges, education, or work opportunities.) \boxtimes Yes \square No \square NA
115.43	(c)
	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? \boxtimes Yes \square No
	Does such an assignment not ordinarily exceed a period of 30 days? ⊠ Yes □ No
115.43	(d)
	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? \boxtimes Yes \square No

	section	voluntary segregated housing assignment is made pursuant to paragraph (a) of this i, does the facility clearly document the reason why no alternative means of separation arranged? ⊠ Yes □ No	
115.43	(e)		
	risk of	case of each inmate who is placed in involuntary segregation because he/she is at high sexual victimization, does the facility afford a review to determine whether there is a ling need for separation from the general population EVERY 30 DAYS? Yes No	
Audito	Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

According to staff who were interviewed, there has never been an inmate who was identified as high risk for sexual victimization that was placed into involuntary segregation. According to the PC, if such an inmate were to be identified, there are several other options available that can be used to ensure the inmate was safely housed. There are ten housing units in which to move an inmate who feels threatened by another inmate. Additionally, there is very little off-unit movement. All meals are eaten in the individual dayrooms and there are no programs for inmates to attend that are not directly supervised by staff. According to the PC, if it were ever necessary to place an inmate into involuntary segregation due to being at a high risk for sexual victimization, the inmate would only be placed there for the shortest time possible, likely for only a couple of days at the most. If the issue could not be resolved using internal options, the inmate would likely be moved to a different jail. The inmate would not have any additional restrictions placed upon him/her during the stay in segregation. The PC was fully aware of the requirement to document why the inmate needed to be placed in segregation and to fully outline what other options were considered and explain why they were not used. While it is very unlikely that an inmate would be placed into involuntary segregation for this reason, the PC knows that placement for more than 30 days would require a report documenting why placement is still needed. The PREA policy reads in part, as follows:

Inmates that are considered at risk to be victimized based on the responses recorded on the inmate PREA screening form will be placed in locations that are easily observable by staff members, have limited if any blind spots, and are not occupied by inmates that have a history of violence and/or sex-related crimes. The shift supervisor is responsible to make this housing assignment. Continual monitoring and assessing a housing assignment is completed and any indication that the risk of sexual misconduct is rising a new housing assignment will be ordered.

- Use of Protective Custody:
 - Involuntary placement into segregated housing is NOT permitted simply because an inmate is at high risk for victimization. The shift supervisor with the assistance of the Administrator and Sheriff will assess all available alternatives and segregated housing will only be issued if all alternatives are deemed inappropriate or pose a direct threat to the well-being of the inmate.

- In completing this assessment an inmate can be housed in protective custody for no longer than 24 hours.
- If placed in protective custody on an involuntary basis WCJ staff will document the following.
 - Basis of the facilities concern for inmates safety
 - o Reason why no alternative means of separation can be arranged
 - Every 30 days a review will be completed on the inmate to determine if there is a continuing need for separation from the general population
 - Such assignment shall not ordinarily exceed 30 days as alternative means of separation likely can be arranged
- Inmates placed in protective custody for the above purpose shall have access to programs, privileges, and work opportunities to the extent possible.
 - o If there is restricted access the facility will document:
 - The opportunities that have been limited
 - Duration of the limitation
 - Reasons for such limitations
- Assigning a transgendered or intersex inmate
 - WCJ will consider each housing and programming assignment for a transgendered or intersex inmate on a case-by-case basis always focused on inmate health and safety and whether placement would present a security issue.
 - Serious consideration must be given to the inmate's own views with respect to his/her own safety.
 - Transgendered and intersex inmates must be given the ability to shower separately from other inmates.

REPORTING

Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.51 (a)

•	Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No

■ 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 □ No

115.51 (b)

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? \boxtimes Yes \square No

•		private entity or office able to receive and immediately forward inmate reports of sexual and sexual harassment to agency officials? \boxtimes Yes \square No
•		that private entity or office allow the inmate to remain anonymous upon request? \Box No
•	contac Securi	mates detained solely for civil immigration purposes provided information on how to st relevant consular officials and relevant officials at the Department of Homeland ty? (N/A if the facility <i>never</i> houses inmates detained solely for civil immigration purposes) \square No \square NA
115.51	(c)	
•		staff accept reports of sexual abuse and sexual harassment made verbally, in writing, mously, and from third parties? \boxtimes Yes \square No
•		staff promptly document any verbal reports of sexual abuse and sexual harassment? $\hfill\Box$ No
115.51	(d)	
•		the agency provide a method for staff to privately report sexual abuse and sexual sment of inmates? \boxtimes Yes $\ \square$ No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

There are several internal ways for an inmate to make a report of sex abuse or sexual harassment. Inmates who were interviewed reported that they were given information about how to report upon admission, and there are also posters and memos posted throughout the facility with reporting instructions. The most common ways mentioned by inmates were to tell a staff member, file a correspondence form (kite), call the internal hotline number written on the posters, file a grievance using the kiosk, or submit a letter. Inmates were aware of their right to be free from sex abuse and sexual harassment and also their right to not be retaliated against if they do make a report. Inmates were also aware of at least one way they could make a report to an outside agency not affiliated with the jail. Although most inmates who were interviewed reported that they feel very safe in the jail and do not fear being sexually assaulted by staff or other inmates, they knew that there is a phone number and address that they could call or write to make an outside report. Listed in the inmate PREA materials is a toll-free phone number for the National Sexual Assault Hotline (NSAH) and a toll-free phone number and address for the Four County Mental Health Center (FCMHC). The auditor spoke with staff from NSAH and the FCMHC and was told that if they were to receive information on an allegation of sex abuse or sexual harassment from an inmate housed in the Wilson County Jail, they would make the PC at the jail aware

of the allegation so an investigation could be started. In addition, staff from both facilities said that an inmate could make an allegation anonymously or for a third party. Staff at the Wilson County Jail can also use either source as a way to privately report sex abuse or sexual harassment of any inmates without having to go through the reporting channels set up inside the jail.

Standard 115.52: Exhaustion of administrative remedies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

11	5	.52	(a)	۱

•	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 □ No

115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) ⋈ Yes □ No □ 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.)

 ✓ Yes

 ✓ No

 ✓ NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)

 ☑ Yes □ No □ NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)

 ✓ Yes

 ✓ No
 ✓ NA

115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) ☑ Yes ☐ No ☐ 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.) \boxtimes Yes $\ \square$ No $\ \square$ 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.) \boxtimes Yes \square No \square NA
115.52	2 (e)
•	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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square NA
115.52	2 (f)
•	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.) \boxtimes Yes \square No \square 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.). \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square NA

•		ne agency's final decision document the agency's action(s) taken in response to the ency grievance? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
115.52	2 (g)	
•	do so (gency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it DNLY where the agency demonstrates that the inmate filed the grievance in bad faith? agency is exempt from this standard.) \boxtimes Yes \square No \square NA
Audite	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

The jail does have a formal grievance procedure and therefore is not exempt from compliance with this standard. Inmates are given information about the grievance procedure as part of their orientation to the facility. In addition, information about how to use the grievance procedure to make an allegation of sex abuse or sexual harassment is contained on the kiosk located in each living unit.

Per the grievance procedure, there are no time limits for making an allegation of sex abuse, and inmates are not required to attempt any type of informal resolution prior to submitting a grievance alleging sex abuse. Staff named in any grievance alleging sex abuse are prohibited from involvement in the resolution of the grievance. Inmates may submit a sex abuse grievance by using the inmate kiosk. Grievances submitted under the PREA tag go directly to the PC for resolution. The grievance procedure does have written timeframes for answering complaints, but in reality, most grievances are resolved within a few days. There have been no grievances alleging sex abuse submitted during the period currently under review. The facility will allow third party assistance from another inmate, staff, family, or attorneys as long as the inmate requests permission first. The PREA policy reads in part, as follows:

Exhaustion of Administrative Remedies (§115.52)

There is no time limit on when an inmate may submit a report regarding an allegation of sexual abuse. Inmates are not required to use an informal report process or to otherwise attempt to resolve with staff an alleged incident of sexual abuse.

WCJ ensures that:

- 1. An inmate who alleges sexual abuse may submit a report without submitting it to a staff member who is the subject of the complaint.
- 2. Such report is not referred to a staff member who is the subject of the complaint.

The Jail Administrator will issue a final decision on the merits of any portion or a report alleging sexual abuse within 90 days of the initial filing of the report. An extension to the normal reporting time period may exist if 90 days is not sufficient to make an appropriate decision.

The Jail Administrator will notify the inmate of the extension and provide a date by which the decision will be made.

EMERGENCY GRIVANCE POLICY/PROCEDURE:

Emergency Grievance is defined as (specifically but limited to):

Perceived substantial risk of eminent sexual abuse Perceived substantial risk of physical assault Perceived substantial risk of Staff/Inmate retaliation

POLICY/PROCEDURE DURING NORMAL BUSINESS HOURS:

Upon receipt of such grievance, immediate action by either the Corrections Sargent and/or Corrections Lt. will be made to isolate and to provide acceptable safety measures for the Inmate if deemed necessary. This action will occur within a 48 hr. time period. A final decision on the incident will occur within a 5 day time period. Inmate reporting of such incident may be made in person, in writing or anonymously. Initial action taken will be reported to the Lt and Undersheriff as soon as possible.

POLICY/PROCEDURE DURING NON-BUSINESS HOURS:

The Corrections Sargent or Supervisory Corrections Officer on duty at that time will review Electronic and Handwritten Grievances for any indications of an Emergency Grievance situation. If such situation is noted, the Corrections Sargent or Supervisory Corrections Officer will take immediate action to insure the safety and welfare of the Inmate. This action will occur within a 48 hr. time period. Upon taking such action, the Corrections Sargent or Supervisory Corrections Officer will notify the Corrections Lt. in charge of that Shift Rotation. If necessary, the Corrections Lt. will notify the Undersheriff as well. A final decision regarding the incident will be made within a 5 day time period.

DOCUMENTATION OF INCIDENT:

Documentation of the Emergency Grievance will contain the initial grievance, related agency incident reports/statements, video graphic evidence (if available), agency response to the incident and agency determination of the incident.

Staff who were interviewed were knowledgeable about the grievance procedure and said that all grievances related to sex abuse or sexual harassment are handled by the PC. Staff are aware of the provision that allows inmates to seek assistance in filing a grievance from a third party, another inmate, or family or friends, if the inmate requests and is granted approval to do so from the PC. Staff were generally aware of the emergency grievance procedure, although again, there have been no such grievances filed during this period of review. The process for filing an emergency grievance requires the inmate to submit the grievance through the inmate kiosk. The grievance would again go directly to the PC for resolution. The PC has the authority to effect whatever action deemed necessary to resolve the emergency grievance.

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.53 (a)

•	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 of
	rape crisis organizations? ⊠ Yes □ No

•		ne facility provide persons detained solely for civil immigration purposes mailing ses and telephone numbers, including toll-free hotline numbers where available of local,
	State, o	or national immigrant services agencies? (N/A if the facility <i>never</i> has persons detained for civil immigration purposes.) \boxtimes Yes \square No \square NA
•		ne facility enable reasonable communication between inmates and these organizations encies, in as confidential a manner as possible? \boxtimes Yes \square No
115.53	(b)	
•	commu	he facility inform inmates, prior to giving them access, of the extent to which such unications will be monitored and the extent to which reports of abuse will be forwarded to ties in accordance with mandatory reporting laws? \boxtimes Yes \square No
115.53	(c)	
•	agreen	he agency maintain or attempt to enter into memoranda of understanding or other hents with community service providers that are able to provide inmates with confidential hal support services related to sexual abuse? \boxtimes Yes \square No
•		ne agency maintain copies of agreements or documentation showing attempts to enter ch agreements? \boxtimes Yes $\ \square$ No
Audito	or Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	or Overall Compliance Determination Narrative

During the book-in process, inmates are given a pamphlet which contains PREA information. Also contained in the materials are instructions on how the inmate can contact a sex abuse victim advocate or a mental health person for emotional support services. The pamphlet contains toll-free telephone numbers and the address where an inmate can write. Most of the inmates who were interviewed were aware if this information, although a couple of inmates reported that they never looked at any of the materials they were given upon entry. Staff who were interviewed reported that they were aware of the information and said that they would encourage an inmate to reach out to the organizations if they were having any issues related to sex abuse and they wanted to talk to someone not affiliated with the jail. The auditor observed that the same information was posted in many places in the facility, including in every housing unit. The auditor contacted staff at the National Sexual Assault Hotline and at the FCMHC and was told that their staff always go over the limits of confidentiality prior to working with an inmate. The PREA policy reads in part, as follows.

WCJ inmates are provided with access to outside victim advocates for emotional support services related to sexual abuse through mailing addresses and telephone numbers, including toll-free hotline numbers

to the organizations identified above. Communication to these outside support services will be as confidential as possible in relation to security needs.

Staff will inform inmates, prior to giving them access to outside support services, 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.

[Insert info about MOU once they are complete]

The jail does not hold inmate solely for civil immigration purposes. There is an MOU with FCMHC where staff there have agreed to inform the PC when or if an inmate contacts them. There is no MOU with the National Sexual Assault Hotline because one is not required.

Standard 115.54: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.54 (a)

•	Has the agency established a method to receive third-party reports of sexual abuse and sexual
	harassment? ⊠ Yes □ No
•	Has the agency distributed publicly information on how to report sexual abuse and sexual

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

harassment on behalf of an inmate? \boxtimes Yes \square No

During the book-in process, inmates are given a pamphlet which contains PREA information. Also contained in the materials are instructions on how the inmate can contact a sex abuse victim advocate or a mental health person for emotional support services. The pamphlet contains toll-free telephone numbers and also the address where an inmate can write. Most of the inmates who were interviewed were aware if this information, although a couple of inmates reported that they never looked at any of the materials they were given upon entry. Staff who were interviewed reported that they were aware of the information and said that they would encourage an inmate to reach out to the organizations if they were have any related issues. The auditor observed that the same information was posted in many places in the facility, including on every housing unit. The auditor contacted staff at the National Sexual Assault Hotline and at the FCMHC and was told that their staff always go over the limits of confidentiality prior to working with an inmate. The PREA policy reads in part, as follows.

WCJ inmates are provided with access to outside victim advocates for emotional support services related to sexual abuse through mailing addresses and telephone numbers, including toll-free hotline numbers

to the organizations identified above. Communication to these outside support services will be as confidential as possible in relation to security needs.

Staff will inform inmates, prior to giving them access to outside support services, 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.

[Insert info about MOU once they are complete]

The jail does not hold inmate solely for civil immigration purposes. There is an MOU with FCMHC where staff

there have agreed to inform the PC when or if an inmate contacts them. There is no MOU with the National Sexual Assault Hotline because one is not required.

The PREA policy reads in part, as follows:

Third-Party Reporting (§115.54)

WCJ will accept third-party reports of sexual abuse or sexual harassment on behalf of inmates. The process to make a third party report is posted in our visitation area, outside the booking window, and will be given to all inmates so they can pass it along to family as well.

There is also a method for inmate family members to make a report of sex abuse or sexual harassment using the facility website.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.61 (a)

- 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

 ✓ No
- 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 □ No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?
 ☑ Yes □ No

115.61 (b)

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 □ No

113.01 (0)	
prac	ss otherwise precluded by Federal, State, or local law, are medical and mental health titioners required to report sexual abuse pursuant to paragraph (a) of this section? es $\ \square$ No
	medical and mental health practitioners required to inform inmates of the practitioner's duty port, and the limitations of confidentiality, at the initiation of services? \boxtimes Yes \square No
115.61 (d)	
local	e alleged victim is under the age of 18 or considered a vulnerable adult under a State or vulnerable persons statute, does the agency report the allegation to the designated State cal services agency under applicable mandatory reporting laws? Yes No
115.61 (e)	
	is the facility report all allegations of sexual abuse and sexual harassment, including third-vand anonymous reports, to the facility's designated investigators? \boxtimes Yes \square No
Auditor Ove	erall Compliance Determination
	Exceeds Standard (Substantially exceeds requirement of standards)
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)
Instructions	s for Overall Compliance Determination Narrative
	ere interviewed all indicated they were aware of their requirement to report any knowledge, rinformation regarding an incident of sex abuse or sexual harassment to their shift supervisor

Staff who were interviewed all indicated they were aware of their requirement to report any knowledge, suspicion, or information regarding an incident of sex abuse or sexual harassment to their shift supervisor or to the PREA Coordinator. When asked, staff replied that yes, they would report even an unsubstantiated rumor. Staff all indicated they understood that they are required to report any instances of retaliation against either an inmate or a staff person. Medical staff who were interviewed reported that they are required to report to their supervisor and the Sheriff or Undersheriff any knowledge, suspicion, or rumor they are aware of regarding an allegation of sex abuse or sexual harassment. Medical staff also reported that they do make inmates aware that information regarding allegations of sex abuse or harassment will not be kept confidential. All staff who were interviewed reported understanding that they are prohibited from disclosing information about an allegation of sex abuse or sexual harassment to others who do not have a legitimate need to know. The facility does not house inmates under the age of 18.

Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.62 (a)	
	the agency learns that an inmate is subject to a substantial risk of imminent sexual , does it take immediate action to protect the inmate? $oxed{\boxtimes}$ Yes $\oxed{\square}$ No
Auditor Over	all Compliance Determination
	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)
Instructions	for Overall Compliance Determination Narrative
of immediate o would keep the the circumstan	e interviewed reported that, if they were made aware that an inmate was in danger of any kind or imminent risk of being sexually abused, they would take immediate action. Staff said that they inmate under their direct observation until the risk was eliminated. Staff said they would report uses to their supervisor, or the Undersheriff, then document the incident. None of the staff who ed could ever recall an incident where an inmate was reported to be in imminent danger of sex
moving the inn in restrictive h	ne PREA policy, there are several things that can be done to help keep an inmate safe, such as nate to a different cell, or transferring the inmate to another jail. The aggressor could be placed ousing or transferred to another unit. It was reported that a supervisor could direct staff to ional security checks in the area.
Standard 1	115.63: Reporting to other confinement facilities
Stariuaru	1 13.03. Reporting to other commement facilities
All Yes/No Q	uestions Must Be Answered by the Auditor to Complete the Report
115.63 (a)	
facility	receiving an allegation that an inmate was sexually abused while confined at another, does the head of the facility that received the allegation notify the head of the facility or priate office of the agency where the alleged abuse occurred? \boxtimes Yes \square No
115.63 (b)	
	n notification provided as soon as possible, but no later than 72 hours after receiving the ion? \boxtimes Yes $\ \square$ No
115.63 (c)	
Does t	he agency document that it has provided such notification? $oxtimes$ Yes \oxtimes No
115.63 (d)	

•		he facility head or agency office that receives such notification ensure that the allegation stigated in accordance with these standards? \boxtimes Yes \square No
Audite	or Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	or Overall Compliance Determination Narrative
instand Nor had upon a Under Per tha allegat County investing In ord Under document	ces where as there arrival as sheriff we PRE foot a little arrivation. If they Jail clargation. The sheriff conentation	erview with the Undersheriff, he stated that as far as he knows, there has not been any re an incoming inmate reported being sexually abused while housed in a previous facility. been an instance where an inmate previously housed in the Wilson County Jail alleged, their new facility, to have been sexually abused during their stay in Wilson county. The rent on to say that there is a provision dealing with such issues in the updated PREA policy. A policy, any notifications required would be made within 72 hours after receipt of the refacility ever receives notification that an inmate who was previously housed in the Wilson aimed to have been sexually abused while there, the PC will conduct a full and complete eet this standard in the future, the auditor recommends creating a form letter that the can complete, sign, copy, and mail to the previous facility. The letter can serve as a for audit compliance in the future.
Stan	dard 1	15.64: Staff first responder duties
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.64	l (a)	
•	membe	earning of an allegation that an inmate was sexually abused, is the first security staffer to respond to the report required to: Separate the alleged victim and abuser?
•	membe	earning of an allegation that an inmate was sexually abused, is the first security staffer to respond to the report required to: Preserve and protect any crime scene until riate steps can be taken to collect any evidence? \boxtimes Yes \square No
•	member actions changi	earning of an allegation that an inmate was sexually abused, is the first security staff or to respond to the report required to: Request that the alleged victim not take any that could destroy physical evidence, including, as appropriate, washing, brushing teeth, and clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred a time period that still allows for the collection of physical evidence? Yes No

•	member actions changi	earning of an allegation that an inmate was sexually abused, is the first security staff er to respond to the report required to: Ensure that the alleged abuser does not take any a that could destroy physical evidence, including, as appropriate, washing, brushing teething clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred a time period that still allows for the collection of physical evidence? \boxtimes Yes \square No
115.64	(b)	
•	that the	rst staff responder is not a security staff member, is the responder required to request e alleged victim not take any actions that could destroy physical evidence, and then notify y staff? \boxtimes Yes \square No
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (Requires Corrective Action)

Uniformed staff who were interviewed were all well versed in that actions they were to take upon learning of a sex abuse allegation. Staff were asked to explain what they would do if they were the first to learn about an allegation, or if they were to discover a sexual assault in progress. Every person interviewed reported that the first thing they would do would be to separate the victim and the abuser and notify their supervisor. Almost all staff reported that they would protect any known crime scene to prevent the loss of possible evidence. They reported that they would keep the victim safe and ask both the victim and the perpetrator not to use the restroom, not to change their clothes or wash up, not to drink or smoke, not to brush their teeth or rinse their mouth or eat anything. Staff reported that they may take the victim's and perpetrator's clothing as evidence. Staff reported that they would notify the PC and seek advice and guidance on what steps to take after that, depending on the circumstances. There was some confusion among the staff as to the timeframe forensic evidence may be present. However, all were aware of the need to have an examination completed at the hospital, if needed, and that forensic evidence would be collected by medical staff. The PREA policy reads in part, as follows:

1) First Responder

- a. Separate the alleged victim from alleged abuse
- b. Notify shift supervisor/co-worker
- c. Preserve and protect the crime scene until steps can be taken to collect evidence
- d. If alleged incident occurred in the past 120 hours, instruct the alleged victim to not take any action that may destroy evidence. This includes, showering, brushing teeth, changing clothes, urinating defecating, eating, or drinking.
 - i. Item 1 subp. (d) also applies to the alleged abuser.

2) Shift supervisor/Co-worker

- a. Notify the jail administrator and Sheriff of the incident
 - i. Jail administrator will notify the Wilson County Sheriff if it hasn't already been done.
- b. Ensure that the crime scene is being preserved by a delegated officer.

- c. Ensure both the alleged victim and alleged abuser have an officer assigned to them.
- d. Notify medical staff of the alleged incident and utilize medical services provided for the alleged victim.

There have been no cases of sex abuse during the current period of review which would have required actions from a first responder.

Standard 115.65: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.65 ((a)
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■ Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?

Yes
No

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

There is a written Coordinated Response plan for the facility, and it does outline the actions to be taken in the event a response to an allegation of sex abuse is made. The plan outlines the responsibilities of the uniformed first responders. The medical/MH staff, the shift supervisors, the investigator, and the PREA Coordinator. Because the PC is also the Undersheriff, facility leadership is also included. The auditor interviewed someone from each of the categories listed in the plan and learned that staff generally knew what they were supposed to do if an allegation of sex abuse were made.

However, because of the size of the facility and because of the extremely low number of allegations of sex abuse made in any given year, the auditor recommends having periodic PREA response drills as a way of keeping staff ready for when an emergency PREA allegation happens. A couple of officers carried with them note cards which outlined their duties in case of a PREA response. The PREA policy reads in part, as follows:

Coordinated Response-Investigations of Sexual Abuse or Sexual Harassment

WCJ will institute the following written plan to coordinate efforts taken in response to an incident of sexual assault. Response includes staff first responders, shift supervisors, medical health practitioners, investigators, and facility leadership.

When any staff receives a report of an alleged assault or sexual harassment, that staff person is responsible to forward that report to his/her supervisor. The PREA coordinator will ensure each and every allegation is investigated.

Sexual Abuse:

3) First Responder

- a. Separate the alleged victim from alleged abuse
- b. Notify shift supervisor/co-worker
- c. Preserve and protect the crime scene until steps can be taken to collect evidence
- d. If alleged incident occurred in the past 120 hours, instruct the alleged victim to not take any action that may destroy evidence. This includes, showering, brushing teeth, changing clothes, urinating defecating, eating, or drinking.
 - i. Item 1 subp. (d) also applies to the alleged abuser.

4) Shift supervisor/Co-worker

- a. Notify the jail administrator and Sheriff of the incident
 - i. Jail administrator will notify the Wilson County Sheriff if it hasn't already been done.
- b. Ensure that the crime scene is being preserved by a delegated officer.
- c. Ensure both the alleged victim and alleged abuser have an officer assigned to them.
- d. Notify medical staff of the alleged incident and utilize medical services provided for the alleged victim.

5) Medical Personnel

- a. Assess the alleged victims acute needs
- b. If a sexual assault exam is appropriate explain the necessity and process of the examination to the alleged victim.
 - i. Reaffirm efforts to avoid damaging evidence as described in item 1 supb. (d)
 - ii. If victim refuses to be examined document the refusal on, [medical document form?]
- c. If examination is accepted, the alleged victim will be transported in accordance with WCJ transportation policy.
- d. Offer victim services to the alleged victim (Victim Advocate)
- e. Contact the hospital to notify them of the alleged incident and share necessary information.
- f. Ensure STD testing and prophylactic treatment is completed
- g. Ensure pre- and post-HIV counseling has been conducted
 - i. Ensure follow-up infectious disease testing is completed on the abuser if the allegation is substantiated

6) Investigator

- a. Investigator will be assigned based on WCJ's PREA investigation policy
- b. Investigator will conduct necessary interviews
- c. Investigator will collect and control evidence obtained
- d. Determine outcome of the alleged incident
- e. Compile all documentation and send to PREA coordinator for file

7) PREA Coordinator

- a. Assist in any manner necessary throughout all facets of the process
- b. Review action taken and document
- c. Provide report to inmate regarding outcome of the investigation along with other necessary reporting based on PREA standards. (Investigator may provide report to inmate also.)

Sexual Harassment:

1) First Responder and/or Shift Supervisor/Co-worker

- a. Separate the alleged victim and alleged harasser
- b. Forward information to PREA coordinator so investigation can be initiated

2) PREA Coordinator

- a. Investigate alleged incident
- b. Notify Washington County Sheriff of investigation and results

Sexual Harassment by staff member, contractor, volunteer

- All allegations of sexual harassment by staff, contractor, or volunteer will be handled internally.
- 2. Jail administrator will notify the Wilson County Sheriff's department of the alleged incident
- 3. Jail administrator will ensure that the alleged victim and accused harasser will be separated during the investigation, not as punishment but to maintain the integrity of the investigation.
- 4. Jail administrator will conduct all necessary interviews.
 - a. If jail administrator is the alleged harasser the investigation will be conducted by the Wilson County Sheriff
- 5. If a crime may have been committed the investigation will be turned over to the Wilson County Sheriff's Office
- 6. During an investigation employees shall cooperate fully by providing all pertinent information. Failure of an employee to answer any inquiry will be grounds for disciplinary action.
- 7. Employees implicated or interviewed may not make any attempt to contact the inmate victim from the time the allegation is first made until the completion of the investigation.
- 8. Retaliation of any form by an employee is prohibited.
- 9. If the investigation yields a false accusation the inmate is subject to disciplinary action.
- 10. Any staff member, contractor, volunteer that is found to have engaged in sexual harassment of an inmate is subject to disciplinary action up to and including termination of employment.
- 11. PREA coordinator will make necessary reports to the inmate at the conclusion of the investigation.
- 12. PREA coordinator will compile all documentation and maintain in file.

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

1	1	5	.6	6	(a)
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ı	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 limits the agency's ability to remove alleged staff sexual
	abusers from contact with any inmates pending the outcome of an investigation or of a
	determination of whether and to what extent discipline is warranted? $oximes$ Yes \odots No

115.66 (b)

Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

	Does Not Meet Standard (Requires Corrective Action)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Exceeds Standard (Substantially exceeds requirement of standards)

This standard is not applicable as there is no collective bargaining at the jail.

Standard 115.67: Agency protection against retaliation

A

1	1	5	67	(a)
		J.	.07	\ai

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.67 (a)
 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?
■ Has the agency designated which staff members or departments are charged with monitoring retaliation? ⊠ Yes □ No
115.67 (b)
■ 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 □ No
115.67 (c)
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 □ No
■ 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 □ No
■ Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? Yes □ No
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 □ No
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 □ No

 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 ⋈ No 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 ⋈ No Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? ⋈ Yes ⋈ No In the case of inmates, does such monitoring also include periodic status checks? ⋈ Yes ⋈ No 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 ⋈ No Auditor Overall Compliance Determination □ Exceeds Standard (Substantial period) □ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period) □ Does Not Meet Standard (Requires Corrective Action) 	•	for at I	t in instances where the agency determines that a report of sexual abuse is unfounded, east 90 days following a report of sexual abuse, does the agency: Monitor inmate m changes? ⊠ Yes □ No
for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? ☑ Yes ☐ No Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? ☑ Yes ☐ No 115.67 (d) In the case of inmates, does such monitoring also include periodic status checks? ☑ Yes ☐ No 115.67 (e) 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 ☐ No 115.67 (f) Auditor Overall Compliance Determination ☐ Exceeds Standard (Substantially exceeds requirement of standards) ☑ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (Requires Corrective Action)	•	for at I	east 90 days following a report of sexual abuse, does the agency: Monitor negative
continuing need? ☑ Yes ☐ No 115.67 (d) In the case of inmates, does such monitoring also include periodic status checks? ☑ Yes ☐ No 115.67 (e) 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 ☐ No 115.67 (f) Auditor Overall Compliance Determination ☐ Exceeds Standard (Substantially exceeds requirement of standards) ☑ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (Requires Corrective Action)	•	for at I	east 90 days following a report of sexual abuse, does the agency: Monitor reassignments
 In the case of inmates, does such monitoring also include periodic status checks?	•		
 Yes □ No 115.67 (e) 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?	115.67	' (d)	
 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?	•		·
the agency take appropriate measures to protect that individual against retaliation? ☐ Yes ☐ No 115.67 (f) ☐ Auditor is not required to audit this provision. Auditor Overall Compliance Determination ☐ Exceeds Standard (Substantially exceeds requirement of standards) ☐ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (Requires Corrective Action)	115.67	(e)	
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Auditor Overall Compliance Determination Exceeds Standard (Substantially exceeds requirement of standards) Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period) Does Not Meet Standard (Requires Corrective Action)	115.67	(f)	
 Exceeds Standard (Substantially exceeds requirement of standards) Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period) Does Not Meet Standard (Requires Corrective Action) 	•	Audito	r is not required to audit this provision.
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standard for the relevant review period) Does Not Meet Standard (Requires Corrective Action)			Exceeds Standard (Substantially exceeds requirement of standards)
		\boxtimes	•
Instructions for Overall Compliance Determination Narrative			Does Not Meet Standard (Requires Corrective Action)
	Instru	ctions	for Overall Compliance Determination Narrative

According to the PC and the PREA policy, the PC is responsible for monitoring inmates or staff who report sex abuse or sexual harassment, or who cooperate with investigations, to ensure that they are not retaliated against for making the report. The monitoring is maintained for at least 90 days, and the PC meets with the individuals to make sure no retaliation is occurring. The PC documents the meetings with the individuals using a form created for that purpose titled, *PREA Retaliation Monitoring Sheet*. According to the PC, there were no substantiated or unsubstantiated cases to monitor during the period of time currently under review. The PC said that he would specifically watch for signs of retaliation by watching for disciplinary actions taken against inmates who had reported, or for sudden changes in their behavior.

Additionally, he would watch to make sure that supervisors did not inexplicably give a subordinate officer a bad review/evaluation after they had made a report of sex abuse or sexual harassment inside the facility. The PC indicated that, because there are a number of different living units, an inmate could be moved to a different unit if retaliation from another inmate was suspected. The PREA policy reads in part, as follows:

Agency Protection against Retaliation (§115.67)

Inmates and staff who report sexual abuse or sexual harassment or cooperate with an investigation into sexual abuse or sexual harassment will be free from retalitation from other inmates or staff. It is the task of the Jail Administrator and Sheriff to protect inmates and staff from retaliation efforts of others. Multiple protection factors will be available:

- Inmate housing change
- Transfer of inmates (both abused and abuser)
- Removal of alleged staff or inmate abusers from contact with alleged victims
- Emotional support service for inmates and staff that fear retaliation as a result of making a report or cooperating with an investigation

The Jail Administrator or designee will monitor the conduct and treatment of inmates or staff who reported sexual abuse or sexual harassment of inmates. This monitoring period will be no less than 90 days. Any suggestion of possible retaliation will be acted upon promptly and the monitoring stage will be extended. Conduct/treatment that may suggest retaliation against an inmate:

- Inmate disciplinary reports
- Change of inmate housing
- Unfair, inconsistent practices regarding inmate rights/privileges/needs

Conduct/treatment that may suggest retaliation against a staff member:

- Negative performance reviews
- Post assignment non consistent with practice

Monitoring for retaliation will include a monthly status check with inmates. This check will be documented by the Jail Administrator.

Allegations of sexual abuse or sexual harassment that are unfounded will ultimately terminate WCJ's responsibility to monitor for retaliation.

There were no cases of retaliation reported or discovered in the facility where an inmate or staff person made an allegation of sex abuse or sexual harassment and then were retaliated against for making the report or cooperating with the investigation.

Standard 115.68: Post-allegation protective custody

\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the
	standard for the relevant review period)

Exceeds Standard (Substantially exceeds requirement of standards)

□ Does Not Meet Standard (Requires Corrective Action)				
Instructions for Overall Compliance Determination Narrative				
The facility administrative staff are making improvements in the area of segregation placement. In the past, it was much more likely that an inmate who may have been at higher risk of sex abuse, or who had reported being sexually abused, would be housed in a segregation cell for their own safety. However, the culture of the facility is changing, and now, segregation placement is much less likely. It is required that staff consider other options first, and to document what the options are, and why they were not used before placing an inmate into protective custody.				
At the time of the on-site visit, there were no inmates involuntarily housed in protective custody due to being sexually abused. Additionally, during the period currently under review, no inmates were placed into segregation due to being sexually abused.				
INVESTIGATIONS				
Standard 115.71: Criminal and administrative agency investigations				
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report				
115.71 (a)				
When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ⋈ Yes □ No □ NA				
■ 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 □ No □ NA				
115.71 (b)				
• Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? \boxtimes Yes \square No				
115.71 (c)				
lacktriangle Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? $oximes$ Yes $oximes$ No				
 ■ Do investigators interview alleged victims, suspected perpetrators, and witnesses? ☑ Yes □ No 				
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•	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? \boxtimes Yes $\ \square$ No
115.71	(d)
•	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? \boxtimes Yes \square No
115.71	(e)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.71	(f)
•	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.71	(g)
•	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? \boxtimes Yes \square No
115.71	(h)
•	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? \boxtimes Yes $\ \square$ No
115.71	(i)
•	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? \boxtimes Yes \square No
115.71	(j)
•	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? \boxtimes Yes \square No
115.71	(k)

Auditor is not required to audit this provision.

115.71 (I)

•	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 □ No □ NA

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The WCJ is part of a law enforcement organization operated by the Wilson County Sheriff. As such, all allegations of sex abuse or sexual harassment are investigated by professional, full-time law enforcement officers. During the period currently being reviewed, only one allegation of sex abuse was made. The facility investigator reviewed the images taken from the video surveillance system and interviewed those involved. There was no physical evidence to collect. In speaking with the PC, it was learned that the investigator does not judge the credibility of any victim or witnesses based solely on their status as an inmate, or as a employee, but judgements are made through the totality of the evidence available. All investigations completed are documented in writing and logged by case number. Any associated evidence collected is also collected and stored using the corresponding case number. According to the PREA policy and the PC, inmates are never required to submit to a polygraph as a means of establishing their truthfulness in making an allegation of sex abuse or sexual harassment. Because the facility is a county jail, and inmates are not free to leave, all interviews can be considered compelled for the purpose of meeting this standard. According to the PC, substantiated allegations of sex abuse that are criminal in nature would be forwarded to the county attorney for review and possible filing of criminal charges. However, during this period of review, there were no substantiated allegations forwarded for review. Per the facility policy and the PC, all documentation assigned to a case of sex abuse and sexual harassment are kept stored in the facility for as long as the inmates named in the case are housed in the jail, plus an additional five years. According to the PC, an investigation would not be concluded just because the participates were released from the jail or terminated from employment. The PC would continue to investigate until the case was completed. The PREA policy reads in part, as follows:

Criminal and Administrative Agency Investigations

- A. When WCJ conducts its own investigations into allegations of sexual abuse and sexual harassment, it will initiate a thorough and objective investigation for all allegations within 24 hours or as circumstances dictate, including third-party and anonymous reports.
- B. Where sexual abuse is alleged, WCJ shall utilize investigators who have received specialized training in sexual abuse investigations pursuant to §115.34.
- C. Investigators shall:

- a. Gather and preserve direct and circumstantial evidence, including available physical and DNA evidence and available electronic data
- b. Interview alleged victims
- c. Interview suspected perpetrators
- d. Interview witnesses
- e. Review prior complaints and reports of sexual abuse involving the alleged perpetrator
- D. When the quality of evidence appears to support criminal prosecution, WCJ will cease any administrative investigation while the criminal investigation is being conducted.
- E. The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's' status as an inmate or staff. WCJ will not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegations.
- F. Administrative Investigations:
 - a. Must include an effort to determine whether staff actions or failures to act contributed to the abuse; and
 - b. Must be documented in written reports that include the description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.
- G. Criminal investigations must be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.
- H. Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.
- I. WCJ shall retain all administrative and criminal written reports referenced for as long as the alleged abuse is incarcerated or employed by the agency, plus 5 years.
- J. Investigations are completed regardless of employee status or inmate custody status.
- K. When Wilson County Sheriff's Office investigates sexual abuse, WCJ staff shall cooperate with outside investigators and shall remain informed about the progress of the investigation.

Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

11	5.7	72 ((a)
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•	eviden	e that the agency does not impose a standard higher than a preponderance of the ce in determining whether allegations of sexual abuse or sexual harassment are ntiated? ⊠ Yes □ No	
Audito	Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

Because the facility is a law enforcement agency, any case that is forwarded for criminal prosecution must meet the standard of proof, beyond a reasonable doubt. However, for facility PREA purposes, the standard of proof used to determine whether allegations of sex abuse or sexual harassment are substantiated is, a preponderance of the evidence, or more likely than not. Fifty-one percent. This is true even for criminal cases.

Stan	dard 115.73: Reporting to inmates
All Ye	s/No Questions Must Be Answered by the Auditor to Complete the Report
115.73	3 (a)
•	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? \square Yes \square No
115.73	3 (b)
•	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.) \square Yes \square No \square NA
115.73	3 (c)
-	Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer posted within the inmate's unit? \square Yes \square No
•	Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer employed at the facility? \square Yes \square No
•	Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? \square Yes \square No
•	Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (d)

•	does to	ring an inmate's allegation that he or she has been sexually abused by another inmate, he agency subsequently inform the alleged victim whenever: The agency learns that the d abuser has been indicted on a charge related to sexual abuse within the facility? \Box No
•	does to	ring an inmate's allegation that he or she has been sexually abused by another inmate, he agency subsequently inform the alleged victim whenever: The agency learns that the d abuser has been convicted on a charge related to sexual abuse within the facility? \Box No
115.73	(e)	
•	Does t	the agency document all such notifications or attempted notifications? \Box Yes \Box No
115.73	(f)	
•	Audito	r is not required to audit this provision.
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

According to the PC and the PREA policy, inmates are notified of the outcome of every sex abuse investigation as to whether the allegation was determined to be substantiated, unsubstantiated, or unfounded. This notification is made in person by the PC. The inmate is required to sign his/her name to the notification form, and the form is then kept by the investigator as documentation of the notification. The auditor was provided with documentation to show that inmates were provided with the required notification. For the period of time currently under review, there were no allegations of sex abuse by a staff member and therefore, there was no documentation of notifications for the auditor to review. However, according to the PC, if such an allegation were to be investigated, the inmate would be notified if the staff member were to be re-assigned to another living unit or is no longer working at the jail. Notification would also be made if the staff member involved were to be charged in district court, and if the staff were to be convicted of any charges related to the sex abuse allegation. Any notifications given to the inmate would be documented using the facility notification form.

The PREA policy reads in part, as follows:

Reporting to Inmates

A. Following an investigation, the PREA Coordinator or designee will inform the inmate or inmates verbally whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The PREA coordinator will deliver in person a statement of findings which will require

- the signature of the inmate(s). If the inmate(s) refuse to sign the findings form, the PREA coordinator will document the refusal and have a staff member witness and sign the refusal.
- B. If Wilson County Sheriff's Office conducts the investigation, WCJ shall request the relevant information in order to inform the inmate of the outcome of the investigation.
- C. If there has been a substantiated or unsubstantiated complaint of sexual abuse committed by a staff member against an inmate, the agency must subsequently inform the inmate whenever:
 - a. The staff member is no longer posted within the inmate's' unit;
 - b. The staff member is no longer employed at the facility;
 - c. WCJ learns that the staff member has been charged or convicted on a charge related to sexual abuse within the facility.
- D. Following an inmate's allegation that he or she has been sexually abused by another inmate while at WCJ, WCJ subsequently informs the alleged victim whenever;
 - a. WCJ learns that the alleged abuse has been indicted or convicted on a charge related to sexual abuse within a facility.
- E. All notifications or attempted notifications of the final determination of an allegation is documented and stored by the PREA coordinator.
- F. WCJ's obligation to report under this standard terminates if the inmate is related from WCJ custody.

There were no substantiated or unsubstantiated allegations of sex abuse concluded during this period of review.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.76 (a)	
■ Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? ✓ Yes ✓ No	
115.76 (b)	
Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? ⊠ Yes □ No	
115.76 (c)	

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 □ No

115.76 (d)

•	resign	terminations for violations of agency sexual abuse or sexual harassment policies, or ations by staff who would have been terminated if not for their resignation, reported to: nforcement agencies (unless the activity was clearly not criminal)? \boxtimes Yes \square No
•	resign	terminations for violations of agency sexual abuse or sexual harassment policies, or ations by staff who would have been terminated if not for their resignation, reported to: ant licensing bodies? \boxtimes Yes \square No
uditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	П	Does Not Meet Standard (Requires Corrective Action)

According the PREA policy, the presumptive sanction for a staff person who engages in a sexual act with an inmate shall be termination from employment. Disciplinary actions taken against a staff member for any other violation of PREA's definition of sex abuse or sexual harassment would depend on the nature and circumstance of the activity, the staff member's disciplinary history, and be comparable to any previous precedence for similar actions. According to the PC, there have been no disciplinary actions taken against staff for sex abuse or sexual harassment during the current period of review. However, it should be noted that during the auditor's visit, an inmate provided the auditor with a note written to and given to the inmate by a staff member. The note was not signed by the staff who wrote it, but the inmate told the auditor the staff person's name. The note expressed a desire by that staff person to have a relationship with the inmate upon the inmate's release from the jail. The auditor gave the note to the PC, who compared the writing on the note with a known sample of the staff member who was identified by the inmate and found the writing to be a match. The PC confronted the staff member about the note and the staff admitted to writing the note and giving it to the inmate. The staff person was terminated from employment at the jail effective immediately.

Disciplinary Sanctions for WCJ Staff

- a) A WCJ staff member that is found to have violated WCJ policy on sexual abuse or sexual harassment is subject to disciplinary sanctions up to and including terminations.
 - a. Any WCJ staff member that has engaged in sexual abuse of an inmate will be terminated.
- b) When a WCJ staff member is terminated as a result of violating sexual abuse or sexual harassment policies; this shall be reported to the Washington County Sheriff's office, unless the activity was clearly not criminal.
 - a. Relevant licensing bodies (i.e. board of Nursing, Board of Addiction Counselors Examiners) will be notified of any sexual abuse or sexual harassment policy violations by WCJ staff members that may possess a professional license.
- c) Disciplinary sanctions for violations of WCJ policies regarding sexual abuse or sexual harassment (other than actually engaging in sexual abuse) must be comparable with the nature and circumstances of the acts committed, the staff member's disciplinary history, sanctions imposed for comparable offenses b other staff with similar histories.

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.77	(a)	
•	•	contractor or volunteer who engages in sexual abuse prohibited from contact with s? \boxtimes Yes \square No
•	-	contractor or volunteer who engages in sexual abuse reported to: Law enforcement es (unless the activity was clearly not criminal)? \boxtimes Yes \square No
•		contractor or volunteer who engages in sexual abuse reported to: Relevant licensing ? \boxtimes Yes $\ \square$ No
115.77	(b)	
•	contrac	case of any other violation of agency sexual abuse or sexual harassment policies by a ctor or volunteer, does the facility take appropriate remedial measures, and consider or to prohibit further contact with inmates? \boxtimes Yes \square No
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The auditor discussed the presumptive sanction for a volunteer or contractor who engaged in sex abuse or sexual harassment during the interview with the Undersheriff. However, there were no incidents involving a staff member, volunteer, or contractor reported during the current period of review. According to the PC, any staff, volunteer, or contractor who was alleged to have perpetrated sex abuse toward an inmate at the jail would immediately be removed from working in the jail until a complete and thorough investigation was completed. If the allegation were to be substantiated, the staff would be terminated from employment in the jail, and prosecuted in court, if possible. Volunteers would be prohibited from further inmate contact and not allowed to be in the jail. If possible, the volunteer would also be prosecuted in court and the information would be forwarded to any relevant licensing bodies.

Corrective actions for any contractor or volunteer who commit an act of sexual harassment would depend on the severity of the violation. The individual may only need to receive additional training, or some other form of remedial education. According to staff who were interviewed, volunteers at the facility are directly supervised by jail staff while they are working with inmates. The PREA policy reads in part, as follows:

Corrective Action for Contractors and Volunteers

- a) Any contractor or volunteer who engages in sexual abuse will immediately removed from the approved volunteer/contractor list and will never be reconsidered at WCJ in the future. They will be prohibited immediately from contact with inmates.
- b) If the case is criminal in nature it will be reported to the Washington County Sheriff's Department a. Relevant licensing bodies will be notified of the policy violation also.

Standard 115.78: Disciplinary sanctions for inmates

Standard 113.76. Disciplinary sanctions for iniliates
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.78 (a)
■ 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 ✓ No
115.78 (b)
■ 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 □ No
115.78 (c)
■ 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 □ No
115.78 (d)
• 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 □ No
115.78 (e)
 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?
115.78 (f)

the allegation? \boxtimes Yes \square No

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

Instructions for Overall Compliance Determination Narrative

The facility does have a formal disciplinary process. According to the posted inmate rules, all types of sexual activity between inmates is prohibited and will be treated as a violation of the rules. Even though consensual sex acts between inmates do not meet the definition of sex abuse, it is the facility's stance that any inmate found to be in a consensual sexual relationship with another inmate while housed in the jail will be guilty of a rule violation. According to the PC, all disciplinary sanctions for an inmate-on-inmate sex abuse case are handed down by him. The PC reported that there were no disciplinary cases of inmate-on-inmate sex abuse to dispose of during this period of review. The PC said that all staff are aware that while all sexual activity may be a violation of facility rules, if the inmate's activity was not coerced, it may not constitute inmate-on-inmate sex abuse. Other jail staff who were interviewed understood that all sexual activity is a rule violation. According to the PC, and the PREA policy, if an inmate were to be disciplined for sex abuse, the PC would document that the punishment given out was in line with any previous penalty for a similar offense and would take into account the inmate's disciplinary history in the facility, and whether the inmate had any mental or emotional issues which may have factored into the offense. The facility does not have any programs or counseling for sex offenders and therefore, the PC would not require the inmate to complete any type of sex offender treatment or counseling as part of the disciplinary sanction. The PC reported that inmates are not disciplined for making an allegation of sex abuse that was later determined to be unsubstantiated. However, if an inmate makes an allegation of sex abuse that he/she knows is false, the inmate may be disciplined for that as a separate offense. The PREA policy reads in part, as follows:

Disciplinary Sanctions for Inmates

Disciplinary Sanctions if any will be determined by the PREA Compliance Officer and PREA Coordinator upon completion of Administrative Investigation.

- A. WCJ will impose sanctions pursuant to WCJ disciplinary processes to inmates found guilty of engaging in inmate-on-inmate sexual abuse.
- B. Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.
- C. The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.
- D. WCJ may discipline an inmate for sexual contact with a staff only upon finding the staff member did not consent to the contact.

115.78 (g)

E. Reports made in good faith may not constitute falsely reporting an incident or lying, even if the investigation does not establish evidence sufficient to substantiate the allegation.

MEDICAL AND MENTAL CARE

abuse		
All Yes/I	No Questions Must Be Answered by the Auditor to Complete the Report	
115.81 (а)	
s e p	f 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 □ No ☒ NA	
115.81 (b)	
s th	f 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 hat the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of he intake screening? (N/A if the facility is not a prison.) \square Yes \square No \boxtimes NA	
115.81 (c)	
v th	f the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual rictimization, whether it occurred in an institutional setting or in the community, do staff ensure hat the inmate is offered a follow-up meeting with a medical or mental health practitioner within 4 days of the intake screening? \boxtimes Yes \square No	
115.81 (d)	
s ir e	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 \Box No	
115.81 (e)	
re	Do medical and mental health practitioners obtain informed consent from inmates before eporting information about prior sexual victimization that did not occur in an institutional setting, inless the inmate is under the age of 18? \boxtimes Yes \square No	

Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
nstr	uctions	for Overall Compliance Determination Narrative
victim nitial revie week nowe abus Medi	risk asswed that of their exer, all e at the sexual the in 14 da setting	on the risk assessment completed during the book-in process. The nurse will review the sessment and offer the inmate an opportunity for follow-up services. Documentation was at showed that inmates are given an opportunity to visit with the nurse, usually within one radmission into the facility. The jail does not house anyone under the age of 18 years inmates are advised by the nurse of the mandatory reporting requirements regarding sextime services are offered. The PREA policy reads in part, as follows: I Mental Health Screenings; History of Sexual Abuse screening indicates an inmate has experienced prior sexual victimization or perpetrated all abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that is offered a follow-up meeting with a medical or behavioral health practitioner within the sys of the intake screening. Source of information related to sexual victimization or abuse that occurred in an institution of growth the strictly limited to staff, as necessary, to make security and management decisions of the strictly limited to staff, as necessary, to make security and management decisions.
C	requir . Medic	ling treatment plans, housing, bed, work, education, and program assignments, or as red by federal, state, or local law. cal and behavioral health practitioners shall obtain informed consent from inmates before ting information about prior sexual victimization that did not occur in an institution setting.
C40:		445.00. Access to amorgoney medical and mental health convices
		115.82: Access to emergency medical and mental health services
AII Y	es/No C	Questions Must Be Answered by the Auditor to Complete the Report
115.8	32 (a)	
•	treatn medic	mate victims of sexual abuse receive timely, unimpeded access to emergency medical nent and crisis intervention services, the nature and scope of which are determined by cal and mental health practitioners according to their professional judgment? \Box No
115.8	32 (b)	
•	sexua	qualified medical or mental health practitioners are on duty at the time a report of recent all abuse is made, do security staff first responders take preliminary steps to protect the pursuant to § 115.62? \boxtimes Yes \square No

■ Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Yes □ No		
115.82 (c)		
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 □ No		
115.82 (d)		
 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 □ No 		
Auditor Overall Compliance Determination		
☐ Exceeds Standard (Substantially exceeds requirement of standards)		
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
□ Does Not Meet Standard (Requires Corrective Action)		
Instructions for Overall Compliance Determination Narrative		
According to the nurse and the PC, if an inmate were to be sexually abused while housed in the jail, he/she would be provided with immediate access to medical treatment and mental health/emotional follow-up services. Medical treatment would include being tested for sexually transmitted diseases, contraception medication, and all legal pregnancy services. All services would be provided at no charge to the inmate receiving the services. The PREA policy reads in part, as follows:		
Access to Emergency Medical and Behavioral Health Services A. Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope determined by medical and behavioral health practitioners according to their professional judgement. B. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, first responders will take preliminary steps to protect the victim and will		

- immediately notify the appropriate medical and mental health practitioners.
- C. Inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care where medically appropriate.
- D. Medical and behavioral health services shall be provided to the victim and abuser without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

There were no cases where the services listed here were provided to an inmate during the period currently under review.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.83 ((a)
ir	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all nmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? \boxtimes Yes \square No
115.83 ((b)
tı	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, reatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? \boxtimes Yes \square No
115.83 ((c)
	Does the facility provide such victims with medical and mental health services consistent with he community level of care? \boxtimes Yes \square No
115.83 ((d)
tı e s	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy ests? (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.) \boxtimes Yes \square No \square NA
115.83 ((e)
re re iii s	f 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. <i>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.</i>) \boxtimes Yes \square No \square NA
115.83 ((f)
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted nfections as medically appropriate? $oxine$ Yes \oxine No
115.83 ((g)
tl	Are treatment services provided to the victim without financial cost and regardless of whether he victim names the abuser or cooperates with any investigation arising out of the incident? ✓ Yes □ No

115.83 (h)

•	inmate when o	acility is a prison, does it attempt to conduct a mental health evaluation of all known -on-inmate abusers within 60 days of learning of such abuse history and offer treatment deemed appropriate by mental health practitioners? (NA if the facility is a jail.) \square No \square NA
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

There have been no cases of sex abuse at this facility during the period currently under review. However, if there were to be a substantiated case of sex abuse, the facility has in place a procedure which would allow the victim to receive a medical and mental health evaluation, if requested. Follow-up services and treatment planning are also available to the victim, if necessary, through FCMHC. The care and treatment that would be afforded an inmate victim of sex abuse would be consistent with, if not better than, the level of care available in the community. If the victim was a female inmate, pregnancy testing is also available, again at no charge to the victim. According to the nurse and the PC, services would be available to the victim even if the victim refuses to name the perpetrator or is uncooperative during the investigation. The PREA policy reads in part, as follows:

Ongoing Medical and Behavioral Health Care for Sexual Abuse Victims and Abusers

- A. WCJ will offer medical and behavioral health evaluation and, as appropriate, treatment to all inmates that have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.
- B. The evaluation and treatment of such victims will include, as appropriate,
 - a. Follow-up services;
 - b. Treatment plans; and
 - c. When necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.
- C. WCJ will provide such victims with medical and behavioral health services consistent with the community level of care.
- D. Inmate victims of sexually abusive vaginal penetration while incarcerated will be offered pregnancy tests.
- E. If pregnancy results from the conduct in (D) above, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.
- F. Inmate victims of sexual abuse while incarcerated will be offered tests for sexually transmitted infections as medically appropriate.
- G. Treatment services will be provided to the victim without financial cost and regardless of whether the victim names the abuse or cooperates with any investigation arising out of the incident.

H. WCJ shall attempt to conduct behavioral health evaluations on all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by behavioral health practitioners.

DATA COLLECTION AND REVIEW

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

	•	ement and submit such report to the facility head and PREA compliance manager? $\hfill \square$ No
115.86	(e)	
•		he facility implement the recommendations for improvement, or document its reasons for ng so? \boxtimes Yes $\ \square$ No
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

There were three cases made during this period of review, each was determined to be unfounded. Even so, the auditor was provided documentation to show that the facility completed a sex abuse incident review on each case. The review team consists of the Sherriff, Undersheriff, PC, and the investigator. The process includes a review of the investigation materials and documenting the actions on a sex abuse incident review form. The form asks the team to consider several items, which are listed below in the PREA policy. The review form, once completed, contains all the information required by this standard. All reviews will take place within 30 days after the conclusion of the investigation. The PREA policy reads in part, as follows:

At the conclusion of any substantiated and unsubstantiated claims of sexual abuse a review team composed of the Sheriff, Undersheriff, Jail Administrator, PREA Coordinator, and any investigators will assemble a date no later than 30 days from the conclusion of the investigation.

The review team shall:

- 1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
- 2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian; gay; bisexual; transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
- 3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- 4) Assess the adequacy of staffing levels in that area during different shifts;
- 5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- 6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to items (1-5) of this section, and any recommendations for improvement and submit such report to the Sheriff and Jail Administrator.

WCJ shall implement the recommendations for improvement, or shall document its reasons for not doing so.

Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.87	' (a)	
_	Dess (
•		he agency collect accurate, uniform data for every allegation of sexual abuse at facilities its direct control using a standardized instrument and set of definitions? Yes No
115.87	(b)	
•		he agency aggregate the incident-based sexual abuse data at least annually? $\hfill\Box$ No
115.87	(c)	
•	from th	he incident-based data include, at a minimum, the data necessary to answer all questions be most recent version of the Survey of Sexual Violence conducted by the Department of \mathbb{R}^2 Yes \square No
115.87	' (d)	
•	docum	he agency maintain, review, and collect data as needed from all available incident-based ents, including reports, investigation files, and sexual abuse incident reviews? \Box No
115.87	(e)	
•	which i	he agency also obtain incident-based and aggregated data from every private facility with it contracts for the confinement of its inmates? (N/A if agency does not contract for the ement of its inmates.) \square Yes \square No \boxtimes NA
115.87	(f)	
•	Depart	he agency, upon request, provide all such data from the previous calendar year to the ment of Justice no later than June 30? (N/A if DOJ has not requested agency data.) \Box No \Box NA
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

Data is collected by the PC on each allegation of sex abuse and sexual harassment that is made in the facility. Annually, the information is aggregated and reported using a standardized instrument (form) provided by the United States Department of Justice (USDOJ), Bureau of Justice Statistics (BJS), titled, Survey of Sexual Victimization (SSV). The definitions utilized in the data collection are the same definitions utilized in the PREA standards. Once completed, the form is posted on the facility's website at www.wilsoncountykansas.org

The auditor was provided a copy of the information and also verified that the form was posted on the website.

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.88 (a

115.88	(a)
	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 □ No 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 □ No
•	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? \boxtimes Yes \square No
115.88	(b)
•	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 \boxtimes Yes \square No

115.88 (c)

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 □ No

115.88 (d)

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? \boxtimes Yes \square No

Auditor Overall Compliance Determination

		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions	or Overall Compliance Determination Narrative
evalua jail. Th standa evalua the jail informa	ting the is evaluated in evaluated in evaluation, the ation the ation the evaluation the evaluat	is collected is compared with the data from the previous year by the PC as a means of facility's effectiveness in preventing and responding to allegations of sex abuse inside the pation includes the identification of problem areas, if there are any specific to the PREA id what, if any, corrective actions may be needed. Utilizing the information from this ePC will assess how the facility is doing in preventing and responding to sex abuse inside assessment is included in the PREA information that s posted on the facility website. The lat is posted does not contain the personal information of any staff or inmate. The PREA in part, as follows:
Α.	The PR aggrega sexual a. b.	Review for Correction Action PEA Coordinator, Jail Administrator, Sheriff, and Undersheriff will review data collected and atted pursuant to PREA §115.87 in order to assess and improve the effectiveness of its abuse prevention, detection, and response policies, practices, and training to include: Identifying problem areas Taking corrective action on an on-going basis; and Preparing an annual report of its findings and corrective actions for each facility and the agency as a whole. i. The report must include a comparison of the current year's data and corrective actions with those from the prior years and provide an assessment of the agency's progress in addressing sexual abuse. ii. Redaction of specific material may take place when publication presents a clear and specific threat to the safety and security of the facility, but will indicate the nature of the material redacted.
Stan	dard 1	115.89: Data storage, publication, and destruction
All Ye	s/No Q	uestions Must Be Answered by the Auditor to Complete the Report
115.89	(a)	
•		he agency ensure that data collected pursuant to § 115.87 are securely retained? \Box No

115.89 (b)

•	and pri	he agency make all aggregated sexual abuse data, from facilities under its direct control ivate facilities with which it contracts, readily available to the public at least annually h its website or, if it does not have one, through other means? \boxtimes Yes \square No		
115.89	(c)			
•		he agency remove all personal identifiers before making aggregated sexual abuse data y available? \boxtimes Yes $\ \square$ No		
115.89	(d)			
•	years a	he agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 after the date of the initial collection, unless Federal, State, or local law requires rise? \boxtimes Yes \square No		
Audito	r Over	all Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)		
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		
Instruc	ctions f	for Overall Compliance Determination Narrative		
All the data collected and used to make annual reports is kept securely stored in the Undersheriff's office. None of the information that is posted on the facility website contains personal identifiers for any staff or inmate. According to the PREA policy and the PC, data will be kept for a minimum of ten years and will be destroyed after that.				
		AUDITING AND CORRECTIVE ACTION		
Stand	dard 1	115.401: Frequency and scope of audits		
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report		
115.40	1 (a)			
•	agency	the prior three-year audit period, did the agency ensure that each facility operated by the y, or by a private organization on behalf of the agency, was audited at least once? (<i>Note: sponse here is purely informational. A "no" response does not impact overall compliance is standard.</i>) \boxtimes Yes \square No		
115.40	1 (b)			

•	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.) \boxtimes Yes \square No			
•	of each facili	second year of the current audit cycle, did the agency ensure that at least one-third ity type operated by the agency, or by a private organization on behalf of the audited during the first year of the current audit cycle? (N/A if this is not the of the current audit cycle.) \square Yes \square No \boxtimes NA		
-	each facility were audited	third year of the current audit cycle, did the agency ensure that at least two-thirds of type operated by the agency, or by a private organization on behalf of the agency, diduring the first two years of the current audit cycle? (N/A if this is not the <i>third</i> year audit cycle.) \square Yes \square No \boxtimes NA		
115.40	1 (h)			
•	Did the audit ⊠ Yes □ N	tor have access to, and the ability to observe, all areas of the audited facility?		
115.40	1 (i)			
•		as the auditor permitted to request and receive copies of any relevant documents (including ectronically stored information)? Yes No		
115.40	1 (m)			
	·	litor permitted to conduct private interviews with inmates, residents, and detainees?		
115.40	1 (n)			
•		es permitted to send confidential information or correspondence to the auditor in the er as if they were communicating with legal counsel? \boxtimes Yes \square No		
Auditor Overall Compliance Determination				
	☐ Exce	eds Standard (Substantially exceeds requirement of standards)		
		s Standard (Substantial compliance; complies in all material ways with the dard for the relevant review period)		
	☐ Does	S Not Meet Standard (Requires Corrective Action)		
Instructions for Overall Compliance Determination Narrative				
This standard has been met.				

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.40	3 (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 that there has never been a Final Audit Report issued.) \square Yes \square No \boxtimes NA			
Auditor Overall Compliance Determination				
		Exceeds Standard (Substantially exceeds requirement of standards)		
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		
Instructions for Overall Compliance Determination Narrative				
This is the facility's first PREA audit.				

AUDITOR CERTIFICATION

I certify that:					
	The contents of this report are accurate to the best of my knowledge.				
	No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and				
	I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.				
Auditor Instructions:					
Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission. ¹ Auditors are not permitted to submit audit reports that have been scanned. ² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.					
Ray Reno	August 5, 2020				

Auditor Signature

Date

 $^{^{1} \}mbox{ See additional instructions here: } \underline{\mbox{https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110} \ .$

² See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.