

# PREA Facility Audit Report: Final

**Name of Facility:** Heart River Correctional Center

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 05/21/2026

**Date Final Report Submitted:** 10/11/2026

## Auditor Certification

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



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



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



**Auditor Full Name as Signed:** Jerri Worm

**Date of Signature:** 10/11/2026

## AUDITOR INFORMATION

**Auditor name:** Worm, Jerri

**Email:** jerri.worm@state.co.us

**Start Date of On-Site Audit:** 03/30/2026

**End Date of On-Site Audit:** 04/01/2026

## FACILITY INFORMATION

**Facility name:** Heart River Correctional Center

**Facility physical address:** 701 16th Avenue Southwest, Mandan, North Dakota - 58554

**Facility mailing address:**

## Primary Contact

|                          |                 |
|--------------------------|-----------------|
| <b>Name:</b>             | Chrissy Sobolik |
| <b>Email Address:</b>    | csobolik@nd.gov |
| <b>Telephone Number:</b> | 701-667-1456    |

#### Warden/Jail Administrator/Sheriff/Director

|                          |                                |
|--------------------------|--------------------------------|
| <b>Name:</b>             | Warden Connie Hackman Rivinius |
| <b>Email Address:</b>    | chackman@nd.gov                |
| <b>Telephone Number:</b> | (701) 253-3609                 |

#### Facility PREA Compliance Manager

|                          |                 |
|--------------------------|-----------------|
| <b>Name:</b>             | Chrissy Sobolik |
| <b>Email Address:</b>    | csobolik@nd.gov |
| <b>Telephone Number:</b> | (701) 667-1456  |

#### Facility Health Service Administrator On-site

|                          |                 |
|--------------------------|-----------------|
| <b>Name:</b>             | Donnette Schmit |
| <b>Email Address:</b>    | djweil@nd.gov   |
| <b>Telephone Number:</b> | (701) 667-1410  |

#### Facility Characteristics

|                                                                                |             |
|--------------------------------------------------------------------------------|-------------|
| <b>Designed facility capacity:</b>                                             | 69          |
| <b>Current population of facility:</b>                                         | 69          |
| <b>Average daily population for the past 12 months:</b>                        | 58          |
| <b>Has the facility been over capacity at any point in the past 12 months?</b> | No          |
| <b>What is the facility's population designation?</b>                          | Women/girls |

|                                                                                                                    |         |
|--------------------------------------------------------------------------------------------------------------------|---------|
| <b>Age range of population:</b>                                                                                    | 20-73   |
| <b>Facility security levels/inmate custody levels:</b>                                                             | Minimum |
| <b>Does the facility hold youthful inmates?</b>                                                                    | No      |
| <b>Number of staff currently employed at the facility who may have contact with inmates:</b>                       | 49      |
| <b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b> | 133     |
| <b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>             | 162     |

#### AGENCY INFORMATION

|                                                              |                                                                   |
|--------------------------------------------------------------|-------------------------------------------------------------------|
| <b>Name of agency:</b>                                       | North Dakota Department of Corrections and Rehabilitation         |
| <b>Governing authority or parent agency (if applicable):</b> |                                                                   |
| <b>Physical Address:</b>                                     | 3100 Railroad Avenue, PO Box 5521, Bismarck, North Dakota - 58501 |
| <b>Mailing Address:</b>                                      |                                                                   |
| <b>Telephone number:</b>                                     |                                                                   |

#### Agency Chief Executive Officer Information:

|                          |  |
|--------------------------|--|
| <b>Name:</b>             |  |
| <b>Email Address:</b>    |  |
| <b>Telephone Number:</b> |  |

#### Agency-Wide PREA Coordinator Information

|              |               |                       |                 |
|--------------|---------------|-----------------------|-----------------|
| <b>Name:</b> | Casey Traynor | <b>Email Address:</b> | ctraynor@nd.gov |
|--------------|---------------|-----------------------|-----------------|

## Facility AUDIT FINDINGS

### Summary of Audit Findings

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

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

#### Number of standards exceeded:

0

#### Number of standards met:

45

#### Number of standards not met:

0

## POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

|                                                   |            |
|---------------------------------------------------|------------|
| 1. Start date of the onsite portion of the audit: | 2026-03-30 |
| 2. End date of the onsite portion of the audit:   | 2026-04-01 |

#### Outreach

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

### AUDITED FACILITY INFORMATION

|                                                                                  |                                                                                                                                                                                                    |
|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 14. Designated facility capacity:                                                | 69                                                                                                                                                                                                 |
| 15. Average daily population for the past 12 months:                             | 58                                                                                                                                                                                                 |
| 16. Number of inmate/resident/detainee housing units:                            | 2                                                                                                                                                                                                  |
| 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees? | <input type="radio"/> Yes<br><input checked="" type="radio"/> No<br><input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility) |

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

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

|                                                                                                                                                                                                                                                                      |    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| <b>23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>                                                                                                                                 | 68 |
| <b>25. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>                                                                                                  | 1  |
| <b>26. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b> | 4  |
| <b>27. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>                                                                        | 0  |
| <b>28. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>                                                                                             | 0  |
| <b>29. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>                                                                                    | 0  |
| <b>30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>                                                                                   | 0  |

|                                                                                                                                                                                                                                                                    |                   |
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| <b>31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b>                                                                                   | 0                 |
| <b>32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b>                                                                                                 | 1                 |
| <b>33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b>                                                            | 23                |
| <b>34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b>                                     | 0                 |
| <b>35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b> | No text provided. |
| <b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>                                                                                                                                                 |                   |
| <b>36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b>                                                                                             | 49                |
| <b>37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>                                                                                 | 162               |

|                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
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| <b>38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>                        | 133                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b> | No text provided.                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>INTERVIEWS</b>                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Inmate/Resident/Detainee Interviews</b>                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Random Inmate/Resident/Detainee Interviews</b>                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>                                                                                                              | 9                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>                                                             | <div> <input checked="" type="checkbox"/> Age </div> <div> <input checked="" type="checkbox"/> Race </div> <div> <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div> |
| <b>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b>                                                                                      | HRCC only has 2 housing units so I ensured there were residents selected from each and in various areas within each dorm.                                                                                                                                                                                                                                                                                                                                                         |
| <b>43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>                                                                                                      | <div> <input checked="" type="radio"/> Yes </div> <div> <input type="radio"/> No </div>                                                                                                                                                                                                                                                                                                                                                                                           |

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| <b>44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | No text provided. |
| <b>Targeted Inmate/Resident/Detainee Interviews</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                   |
| <b>45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 9                 |
| <p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p> |                   |
| <b>47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1                 |
| <b>48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 4                 |
| <b>49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 0                 |

|                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                     |
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| <p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>                                                                                                                      | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p> | <p>HRCC had no residents identified in this category. In addition no one was identified as such during the site review.</p>                                                                                                                                                                                                         |
| <p><b>50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>                                                                    | <p>0</p>                                                                                                                                                                                                                                                                                                                            |
| <p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>                                                                                                                      | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p> | <p>HRCC had no residents identified in this category. In addition no one was identified as such during the site review.</p>                                                                                                                                                                                                         |
| <p><b>51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>                                                           | <p>0</p>                                                                                                                                                                                                                                                                                                                            |

|                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                     |
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| <p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>                                                                                                                      | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p> | <p>HRCC had no residents identified in this category. In addition no one was identified as such during the site review.</p>                                                                                                                                                                                                         |
| <p><b>52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>                                     | <p>0</p>                                                                                                                                                                                                                                                                                                                            |
| <p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>                                                                                                                      | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p> | <p>HRCC had no residents identified in this category. In addition no one was identified as such during the site review.</p>                                                                                                                                                                                                         |
| <p><b>53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>                                       | <p>0</p>                                                                                                                                                                                                                                                                                                                            |

|                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>                                                                                                                                                                                 | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>                                                            | <p>HRCC had no residents identified in this category. In addition no one was identified as such during the site review.</p>                                                                                                                                                                                                         |
| <p><b>54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>                                                                                                                                | <p>1</p>                                                                                                                                                                                                                                                                                                                            |
| <p><b>55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>                                                                               | <p>5</p>                                                                                                                                                                                                                                                                                                                            |
| <p><b>56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p> | <p>0</p>                                                                                                                                                                                                                                                                                                                            |

|                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>                                                                                                                      | <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.<br><br><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.                                                  |
| <b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b> | HRCC has no segregated or restricted housing.                                                                                                                                                                                                                                                                                                                                 |
| <b>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b>                                                                     | No text provided.                                                                                                                                                                                                                                                                                                                                                             |
| <b>Staff, Volunteer, and Contractor Interviews</b>                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                               |
| <b>Random Staff Interviews</b>                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                               |
| <b>58. Enter the total number of RANDOM STAFF who were interviewed:</b>                                                                                                                                                                                             | 18                                                                                                                                                                                                                                                                                                                                                                            |
| <b>59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b>                                                                                                                                         | <input type="checkbox"/> Length of tenure in the facility<br><br><input checked="" type="checkbox"/> Shift assignment<br><br><input checked="" type="checkbox"/> Work assignment<br><br><input checked="" type="checkbox"/> Rank (or equivalent)<br><br><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)<br><br><input type="checkbox"/> None |
| <b>60. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b>                                                                                                                                                                                  | <input checked="" type="radio"/> Yes<br><br><input type="radio"/> No                                                                                                                                                                                                                                                                                                          |

|                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>                                                                          | No text provided.                                                                                                                                                                                                                    |
| <b>Specialized Staff, Volunteers, and Contractor Interviews</b>                                                                                                                                                                                                                       |                                                                                                                                                                                                                                      |
| Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements. |                                                                                                                                                                                                                                      |
| <b>62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>                                                                                                                                                   | 21                                                                                                                                                                                                                                   |
| <b>63. Were you able to interview the Agency Head?</b>                                                                                                                                                                                                                                | <input checked="" type="radio"/> Yes<br><br><input type="radio"/> No                                                                                                                                                                 |
| <b>64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>                                                                                                                                                                                  | <input checked="" type="radio"/> Yes<br><br><input type="radio"/> No                                                                                                                                                                 |
| <b>65. Were you able to interview the PREA Coordinator?</b>                                                                                                                                                                                                                           | <input checked="" type="radio"/> Yes<br><br><input type="radio"/> No                                                                                                                                                                 |
| <b>66. Were you able to interview the PREA Compliance Manager?</b>                                                                                                                                                                                                                    | <input checked="" type="radio"/> Yes<br><br><input type="radio"/> No<br><br><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards) |

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

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

|                                                                                                                                           |                                                                                                                                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                           | <input type="checkbox"/> Other                                                                                                                                                                                                                                                      |
| <b>68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>                           | <input checked="" type="radio"/> Yes<br><input type="radio"/> No                                                                                                                                                                                                                    |
| <b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>                                                                      | 1                                                                                                                                                                                                                                                                                   |
| <b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>  | <input type="checkbox"/> Education/programming<br><input type="checkbox"/> Medical/dental<br><input type="checkbox"/> Mental health/counseling<br><input checked="" type="checkbox"/> Religious<br><input type="checkbox"/> Other                                                   |
| <b>69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>                          | <input checked="" type="radio"/> Yes<br><input type="radio"/> No                                                                                                                                                                                                                    |
| <b>a. Enter the total number of CONTRACTORS who were interviewed:</b>                                                                     | 2                                                                                                                                                                                                                                                                                   |
| <b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b> | <input type="checkbox"/> Security/detention<br><input type="checkbox"/> Education/programming<br><input type="checkbox"/> Medical/dental<br><input type="checkbox"/> Food service<br><input checked="" type="checkbox"/> Maintenance/construction<br><input type="checkbox"/> Other |
| <b>70. Provide any additional comments regarding selecting or interviewing specialized staff.</b>                                         | No text provided.                                                                                                                                                                                                                                                                   |

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

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

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

☒ Yes

☐ No

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

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

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

☒ Yes

☐ No

|                                                                                                                                                                                     |                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| <b>76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b> | No text provided. |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|

### Documentation Sampling

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

|                                                                                                                                                                               |                                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <b>77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b> | <input checked="" type="radio"/> Yes<br><br><input type="radio"/> No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|

|                                                                                                                                                                                          |                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| <b>78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b> | No text provided. |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|

## SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

### Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

|                                      | # of sexual abuse allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|--------------------------------------|-------------------------------|------------------------------|------------------------------------|---------------------------------------------------------------------------|
| <b>Inmate-on-inmate sexual abuse</b> | 2                             | 0                            | 2                                  | 0                                                                         |
| <b>Staff-on-inmate sexual abuse</b>  | 0                             | 0                            | 0                                  | 0                                                                         |
| <b>Total</b>                         | 2                             | 0                            | 2                                  | 0                                                                         |

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

|                                           | # of sexual harassment allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|-------------------------------------------|------------------------------------|------------------------------|------------------------------------|---------------------------------------------------------------------------|
| <b>Inmate-on-inmate sexual harassment</b> | 2                                  | 0                            | 2                                  | 0                                                                         |
| <b>Staff-on-inmate sexual harassment</b>  | 0                                  | 0                            | 0                                  | 0                                                                         |
| <b>Total</b>                              | 2                                  | 0                            | 2                                  | 0                                                                         |

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

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

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

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

You indicated that you are unable to provide information for one or more of the fields above. Explain why this information could not be provided.

Criminal investigations are conducted by an outside agency.

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

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

**Sexual Harassment Investigation Outcomes**

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

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

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

You indicated that you are unable to provide information for one or more of the fields above. Explain why this information could not be provided.

Criminal investigations are conducted by an outside agency.

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

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

## Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

### Sexual Abuse Investigation Files Selected for Review

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

2

86. Did your selection of **SEXUAL ABUSE** investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?

☐ Yes

☒ No

☐ NA (NA if you were unable to review any sexual abuse investigation files)

### Inmate-on-inmate sexual abuse investigation files

87. Enter the total number of **INMATE-ON-INMATE SEXUAL ABUSE** investigation files reviewed/sampled:

2

88. Did your sample of **INMATE-ON-INMATE SEXUAL ABUSE** investigation files include criminal investigations?

☐ Yes

☒ No

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

89. Did your sample of **INMATE-ON-INMATE SEXUAL ABUSE** investigation files include administrative investigations?

☒ Yes

☐ No

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

### Staff-on-inmate sexual abuse investigation files

90. Enter the total number of **STAFF-ON-INMATE SEXUAL ABUSE** investigation files reviewed/sampled:

0

|                                                                                                                                                                       |                                                                                                                                                                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>                                                       | <input type="radio"/> Yes<br><input type="radio"/> No<br><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)       |
| <b>92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>                                                 | <input type="radio"/> Yes<br><input type="radio"/> No<br><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)       |
| <b>Sexual Harassment Investigation Files Selected for Review</b>                                                                                                      |                                                                                                                                                                                           |
| <b>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b>                                                                          | 2                                                                                                                                                                                         |
| <b>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b> | <input type="radio"/> Yes<br><input checked="" type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)                  |
| <b>Inmate-on-inmate sexual harassment investigation files</b>                                                                                                         |                                                                                                                                                                                           |
| <b>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>                                                         | 2                                                                                                                                                                                         |
| <b>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b>                                                               | <input type="radio"/> Yes<br><input checked="" type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files) |

|                                                                                                                                       |                                                                                                                                                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>           | <input checked="" type="radio"/> Yes<br><input type="radio"/> No<br><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files) |
| <b>Staff-on-inmate sexual harassment investigation files</b>                                                                          |                                                                                                                                                                                           |
| <b>98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>                          | 0                                                                                                                                                                                         |
| <b>99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>                  | <input type="radio"/> Yes<br><input type="radio"/> No<br><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)  |
| <b>100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>           | <input type="radio"/> Yes<br><input type="radio"/> No<br><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)  |
| <b>101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b> | No text provided.                                                                                                                                                                         |

## SUPPORT STAFF INFORMATION

### DOJ-certified PREA Auditors Support Staff

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

☒ Yes

☐ No

**a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:**

1

### Non-certified Support Staff

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

☐ Yes

☒ No

## AUDITING ARRANGEMENTS AND COMPENSATION

**108. Who paid you to conduct this audit?**

☒ The audited facility or its parent agency

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

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

☐ Other

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

| 115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|--------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|        | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|        | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>Heart River Correctional Center Pre-Audit Questionnaire (HRCC PAQ)</li> <li>North Dakota Corrections and Rehabilitation (ND-DOCR), Policy and Procedures, 3C-04 (PREA) Prison Rape Elimination Act of 2003, last revised March 07, 2025 . For this audit report, this policy will be referred to as DOCR 3C-04.</li> <li>Agency PREA Coordinator position description</li> <li>Agency Organizational Chart</li> <li>PREA Compliance Manager job description</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>PREA Coordinator</li> <li>PREA Compliance Manager</li> </ul> |

Reasoning and analysis:

115.11(a):

- DOCR 3C-04:
  - DOCR 3C-04 is the agency's written policy that outlines the North Dakota Department of Corrections and Rehabilitation (ND-DOCR) approach to ensure compliance with the Prison Rape Elimination Act (PREA) and it mandates zero tolerance towards all forms of sexual abuse and sexual harassment in facilities it operates directly or under contract. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment as well as sanctions for staff and offenders.
  - It states:
    - "This policy with procedures applies to all employees, facility residents within and working for any department facility, as well as Parole and Probation of the Department of Corrections and Rehabilitation.
    - The department is committed to maintaining a zero-tolerance policy for sexual abuse and sexual harassment at all facilities. Department facilities shall have written policy and procedures mandating zero-tolerance towards all forms of sexual abuse, and sexual harassment and outlining the department's approach to preventing, detecting, and responding to such conduct. Policy and procedures will be in accordance with the DOJ Title 28 Code of Federal Regulations, Part 115, National Standards, to prevent, detect, and respond to prison rape."
  - 3C-04 contains definitions of prohibited behaviors regarding sexual abuse and sexual harassment, except it has voyeurism by a staff member defined by itself rather than under sexual abuse. It does state "for the purpose of PREA statistics, voyeurism is counted under sexual abuse" but this implies that it is only abuse for statistics and that otherwise it may not be considered abuse. Corrective action was needed to move this definition under sexual abuse for all purposes.
    - Corrective action was completed and voyeurism by a staff member is now included in 3C-04 under sexual abuse.
  - The policy outlines where standards are found in other policies also outlines how the agency responds to sexual abuse and sexual harassment.

115.11(b):

- The PREA Coordinator position description states that this position develops and implements policy and procedures through subordinate staff for the purposes of sentence computation, litigation coordinator, information requests, administrative rule-making, and administrative tort claims. They

also oversee services and procedures for the correctional division and law enforcement division in those subject areas and that they develop and implement policy and procedures for PREA.

- The agency organizational chart shows:
  - The PREA Coordinator falls under Adult Facility Operations, which is under the Division of Adult Services and under the agency Director.
- The NDDOCR has a PREA coordinator who oversees the agency's efforts to comply with the PREA standards in all of its facilities. There are five adult facilities and one youth facility. The PREA coordinator reports to the agency Director in the position of the PREA Coordinator. Due to the size of the agency, the PREA coordinator is also the warden of the Youth Correctional Center and reports to the Director of the Division of Juvenile Services for those responsibilities. Through interviews, the PREA coordinator's job description, and org chart demonstrated that the PREA coordinator (PC) has sufficient time and authority to develop, implement, and oversee the agency's PREA program.
- Interview with the PREA Coordinator:
  - He feels he has enough time to manage all of his PREA related responsibilities. He has five PREA Compliance Managers (PCMs) across the state who are good at managing their facilities but he fields questions from all of them throughout the year. Two of the facilities are on the same campus he is located on so he sees them regularly and also visits the other facilities and has meetings at least once a year. If an issue complying with a standard is identified he would address any immediate needs for safety and security.

115.11(c):

- The HRCC PAQ reported that the PREA Compliance Manager is the Deputy Warden at NDDOCR adult facilities and that she reports to the Warden.
- The PREA Compliance Manager/Deputy Warden job description was reviewed and under responsibility 1 PREA Compliance Manager is listed.
- DOCR 3C-04 defines the PREA Compliance Manager as:
  - "The designated facility staff at each facility with sufficient time and authority to coordinate the facility's efforts to comply with the Prison Rape Elimination Act standards.
- Interview with the PREA Compliance manager:
  - The PREA Compliance Manager (PCM) stated that she has to manage her time to cover her PREA related responsibilities.

The auditor finds the agency/facility in full compliance with PREA Provision §115.11 based upon analysis of all available evidence including the documentation provided, the site review, interviews conducted and corrective action completed.

| 115.12 | Contracting with other entities for the confinement of inmates                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|--------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|        | <p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 342 624 376">Documentation reviewed:</p> <ul data-bbox="331 443 1453 689" style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• DOCR Policy 1B-16, Contracts and Grants, Dated January 6, 2025</li> <li>• Contracts with 6 agencies/facilities (see chart below)</li> <li>• Agency public website</li> </ul> <p data-bbox="256 723 576 757">Interviews Conducted:</p> <ul data-bbox="331 824 804 857" style="list-style-type: none"> <li>• Agency Contract Administrator</li> </ul> <p data-bbox="256 902 384 936">Findings:</p> <p data-bbox="256 969 408 1003">115.12(a):</p> <ul data-bbox="331 1070 1469 2078" style="list-style-type: none"> <li>• The HRCC PAQ reported that the agency has contracts for confinement with 7 agencies. It was later clarified there are only 6 active contracts.</li> <li>• DOCR 3C-04 states: <ul data-bbox="437 1205 1347 1283" style="list-style-type: none"> <li>◦ “Contracting with other entities for the confinement of facility residents. Refer to Policy 1B-16, Contract and Grants.”</li> </ul> </li> <li>• DOCR 1B-16 states: <ul data-bbox="437 1328 1469 2078" style="list-style-type: none"> <li>◦ “All grants and contracts entered into by the department must comply with applicable state and federal laws, have sufficient appropriation authority, and be implemented in accordance with approved accounting procedures. All grants and contracts must be reviewed, prior to submission or implementation, to assure adequacy of appropriation authority and establishment of grant revenue and expenditure accounting mechanisms using the DOCR’s approved contract writing software”</li> <li>◦ It further states that: <ul data-bbox="542 1709 1469 2078" style="list-style-type: none"> <li>■ “Agencies under contract with the department to house adults in custody or juveniles must agree in any new contract or contract renewal to adopt and comply with the PREA standards.</li> <li>■ All new contracts or contract renewals for housing adults in custody or juveniles must provide for department contract monitoring to ensure compliance with the PREA standards. <ul data-bbox="647 2000 1445 2078" style="list-style-type: none"> <li>■ Contract managers shall monitor compliance through reported offenses and facility inspections.</li> </ul> </li> </ul> </li> </ul> </li> </ul> |

- Final audit reports for contract facilities must be forwarded to the department PREA Coordinator for storage.”
- Six active contracts were reviewed and most contained a section regarding PREA compliance (see chart below). It was also noted that one of the contracts covers 3 facilities. The contracts state:
  - “Contractor shall comply with the Prison Rape Elimination Act of 2003 (PREA), 42 U.S.C. § 15601 et.seq., and all applicable PREA standards and applicable DOCR Adult Services Policies related to PREA. Contractor shall report all incidents to DOCR on an annual basis. DOCR may conduct announced or unannounced compliance monitoring, including on-site monitoring. Failure to comply with PREA and applicable PREA Standards may result in termination of this contract.”
- The auditor reviewed DOCR’s website and there are links to some of the contract facilities websites, recommending updating and adding links to the other facilities.

115.12(b):

- The HRCC PAQ reported that all contracts require the agency to monitor the contractor’s compliance with PREA.
- Interview with the agency contract administrator:
  - She stated that they currently have contracts for confinement with a few facilities and that their contracts all require them to be PREA compliant. She stated that bi-annually they can do amendments to the contracts if needed.

| Contract Facility                                               | Contract Start Date | PREA compliance in contract? | Last DOJ Audit (signature date) | Do websites have PREA information? |
|-----------------------------------------------------------------|---------------------|------------------------------|---------------------------------|------------------------------------|
| Bismark Transition Center (BTC)                                 | 8/26/2025           | Yes                          | 5/8/2024                        | Yes                                |
| Bismark Transition Center-- Women's Treatment and Recovery Unit | 7/1/2025            | Yes                          | 4/25/2025                       | Yes                                |
| Dickinson Adult Detention Center (DADC)                         | 7/1/2025            | Yes                          | 3/16/2024                       | Yes                                |

|                                                                                                                                                                                                                           |                                                  |            |     |           |     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|------------|-----|-----------|-----|
|                                                                                                                                                                                                                           | Dakota Women's Correctional Rehab Center (DWCRC) | 8/21/2017  | Yes | 5/9/2024  | Yes |
|                                                                                                                                                                                                                           | McKenzie County Correctional Facility (MCCF)     | 05/16/2025 | Yes | 3/23/2025 | Yes |
|                                                                                                                                                                                                                           | Centre Inc-Fargo                                 | 7/31/2025  | Yes | 6/24/2023 | Yes |
|                                                                                                                                                                                                                           | Centre Inc-Mandan                                | 7/31/2025  | Yes | 7/26/2024 | Yes |
|                                                                                                                                                                                                                           | Centre Inc-Grand Forks                           | 7/31/2025  | Yes | 7/31/2025 | Yes |
| <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.12 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |                                                  |            |     |           |     |

| 115.13 | Supervision and monitoring                                                                                                                                                                                                                                                                                                                                                                                          |
|--------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|        | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                |
|        | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                           |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• DOCR Policy 3A-03, Patrols and Inspections, Dated September 16, 2024\</li> <li>• HRCC Staffing Plan, dated January 7, 2026</li> <li>• HRCC Post Orders</li> <li>• HRCC shift logs</li> </ul> <p>Interviews Conducted:</p> |

- HRCC Warden
- PREA Compliance Manager
- PREA Coordinator
- Intermediate or higher-level staff

Site review Observations

Findings:

115.13(a):

- The HRCC PAQ reports that since the last PREA audit, the average daily number of inmates is 57. They further report that the average daily number of inmates on which the staffing plan is predicated is 57.
- The HRCC staffing plan:
  - The 2026 HRCC staffing plan was reviewed and this auditor verified they contain all requirements of the standard including Generally accepted detention and correctional practices; Any judicial findings of inadequacy; Any findings of inadequacy from Federal investigative agencies; Any findings of inadequacy from internal and external oversight bodies; All components of the facility's physical plant (including "blind spots" or areas where staff or inmates may be isolated); The composition of the inmate population; The number and placement of supervisory staff; Institution programs occurring on a particular shift; Any applicable State or local laws, regulations, or standards; The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and Any other relevant factors.
- Interview with the Warden:
  - The Warden verified that HRCC has a staffing plan and that it includes all the information required in the PREA standards. To check for compliance she reviews logs and checks staffing levels. She stated that if someone calls out it is easy to replace them.
- Interview with the PREA Compliance Manager:
  - The PREA Compliance Manager verified HRCC has a staffing plan and that all required elements in this standard are reviewed. She stated that if there is an open shift additional staff would be called in to cover it.
- Site review observations:
  - During the site review the audit team was able to observe all areas of the facility. Correctional staff were seen in both cottages as well as throughout the other areas of the facility. A member of the audit team reviewed the cameras and no issues were noted. In the cottages no areas of concern or no blind spots were found.

115.13(b):

- The HRCC PAQ reports that there were no deviations from the staffing plan in the past year and that shifts were covered by other doles, overtime, or security.
- Interview with the Warden:
  - In the interview with the Warden she stated they would document all instances of non-compliance with the staffing plan but that this rarely happens. She stated most shifts have at least two staff in each cottage and if there was only one it would be documented.

115.13(c):

- Interview with the PREA Coordinator:
  - The PREA Coordinator confirmed he either sits in on the staffing plan meetings or gets them for review once completed.
- The 2026 HRCC staffing plan was reviewed and the PREA Coordinator is not listed on it. It is recommended that the facility adds either his signature or information as to him reviewing it annually.

115.13(d):

- DOCR 3C-04 refers you to Policy 3A-03.
- DOCR 3A-03 states:
  - “Intermediate or high-level supervisors will conduct unannounced rounds of the facility to identify and deter staff sexual abuse and sexual harassment.
  - The unannounced rounds must be documented as an electronic log entry in ELITE as ‘SUPERVISOR’S ROUND.’ Unannounced supervisor rounds must be conducted on all shifts.  
Staff may not alert other staff members when a supervisor is conducting these unannounced rounds unless such announcement is related to the legitimate operational functions of the facility.”
- The HRCC Post Orders state:
  - “RTA III is responsible to conduct a daily patrol, including holidays and weekends, of all areas occupied by adults in custody and document any concerns or corrective action in the log book.
  - RTA III’s will conduct unannounced rounds of the facility on each shift to identify and deter staff sexual abuse and sexual harassment.
  - The unannounced rounds are documented as an electronic log entry in ELITE. The entry will be logged as ‘SUPERVISOR’S ROUND.’
  - Staff will not alert other staff members when a supervisor is conducting these unannounced rounds unless such announcement is related to the legitimate operational functions of the facility.”
- Interviews with intermediate or higher staff:
  - Intermediate or higher staff were interviewed and reported that they do conduct unannounced rounds and document them in the computer system (ELITE). They stated rounds are done at least every 40 minutes

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|  | <p>and rounds are done in each cottage daily. With the size of the facility they stated there have not been any issues with staff alerting each other of the rounds. One staff member was interviewed who stated they conduct quarterly rounds during the overnight shift.</p> <ul style="list-style-type: none"> <li>• Site review observations: <ul style="list-style-type: none"> <li>◦ During the site review the audit team randomly toured all areas of HRCC. Supervisors, managers (including the Deputy Warden and Warden) have their offices in the housing units. All staff and residents knew where they were located and said they felt comfortable going to any of them at any time with issues or concerns.</li> </ul> </li> <li>• Review of logs: <ul style="list-style-type: none"> <li>◦ Electronic logs of supervisor rounds were requested and received for one week of each month. They showed supervisor rounds are being conducted and logged regularly, often daily, during daytime hours. It was noted that rounds do not appear to occur during the graveyard/overnight shift as rounds were not conducted before 7AM or after 11PM. Corrective action is needed to ensure that the unannounced supervisor rounds occur on all shifts, including overnight, at various times and days of the week. <ul style="list-style-type: none"> <li>■ Corrective action: The auditor and facility agreed that the unannounced supervisor rounds needed to occur more than once a month. During the corrective action period the auditor received documentation of these occurring during the overnight shift on various days and times for 3 months.</li> </ul> </li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.13 based upon analysis of all available evidence including the documentation provided, the site review, interviews conducted and corrective action completed.</p> |
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| 115.14 | Youthful inmates                                                                                                                                                                                                                                                         |
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|        | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                     |
|        | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• HRCC Standing Orders, Dated April 2024</li> </ul> <p>Site Review Observations</p> <p>Findings:</p> |

115.14(a, b, c):

- The HRCC PAQ reported that they have not housed youthful residents in the past 12 months.
- DOCR 3C-04 refers you to N.D.C.C. 12-46-13.
- Site review observations:
  - During the site review no inmates that appeared to be under 18 were observed. Staff were informally asked about youthful inmates during the site review and all stated that they do not house them at HRCC. The inmate roster for the first day of the audit did not show anyone under the age of 18.
  - HRCC shares a campus with the youth correctional center and some of the grounds are shared. The residents at HRCC are not permitted to be in the same area as the youthful residents.
- HRCC Standing orders state:
  - “In order to maintain sight and sound separation of the juveniles at YCC and the adult women residents at HRCC, clear barriers have been established that residents from either facility may not cross.
  - There will be no escorting juveniles (or any juvenile activities) north of the blue lines (see Appendix E: Youth and Adult Campus Boundary Map). The cutoff line on the east side of campus is in between Hickory Cottage and Pine Cottage. On the west side of the school, the cutoff line is the sidewalk that separates the chapel and courts. NDYCC juveniles will remain south of this line while being escorted on campus grounds. The reverse boundaries apply to the adult women of HRCC. They will hold their activities on the north side of the boundaries except for staff escorted access to the chapel and the Gym during authorized times and escorted visits to the medical area in Hickory cottage.
  - In the school, the juveniles will not go beyond the initial classrooms on the south side. They will always be escorted to and from the school from the south entrance.
  - In the event that a building is utilized by both juveniles and adult residents, schedules are used to designate specific times for each population to utilize the space separately. This applies only to mutually used spaces; i.e. gymnasium, chapel, medical in Hickory’s basement.
  - Staff will never allow juveniles and adult residents to occupy a building at the same time or will have barriers in place that prevent all forms of cross contact between juveniles and adult residents.
  - Adult residents are restricted from entering any living units that are occupied by NDYCC juveniles.
  - Adult residents will not be allowed access to Centennial Hall unless they are a hired Centennial Hall kitchen worker- they then will be supervised by the kitchen staff and will never be in the dining room at the same time as the NDYCC juveniles. All meals for adult residents will be eaten in their designated living units.”

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|  | <ul style="list-style-type: none"> <li>• No interviews with youthful inmates or staff who supervise youthful inmates were able to be completed as HRCC does not hold youthful inmates.</li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.14 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| <b>115.15</b> | <b>Limits to cross-gender viewing and searches</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|               | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|               | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• DOCR Policy 3A-06, Control of Contraband, Searches of Adults in Custody, Visitors and Facilities, Dated May 27, 2025</li> <li>• DOCR Policy 3C-09, Protection from Unreasonable Searches, Freedom in Personal Grooming, Dated September 16, 2024</li> <li>• raining on body searches and training rosters</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Random Staff</li> <li>• Random Inmates</li> </ul> <p>Site Review Observations</p> <p>Findings:</p> <p>115.15(a):</p> <ul style="list-style-type: none"> <li>• The HRCC PAQ reported that they do not conduct cross-gender strip or visual body cavity searches of inmates and that there have been no incidents of cross-gender strip or cross-gender visual body cavity searches of inmates in the past 12 months.</li> <li>• DOCR 3C-04 states: <ul style="list-style-type: none"> <li>◦ “DOCR employees will not conduct cross-gender unclothed searches or cross-gender visual body cavity searches (anal or genital opening) except in exigent circumstances or when performed by medical</li> </ul> </li> </ul> |

practitioners. Efforts will be made in exigent circumstances to obtain the warden's prior approval.

- Employees will document in the electronic log all cross-gender unclothed searches and cross-gender visual body searches."
- DOCR 3A-06 states:
  - "Department employees who are not of the same sex of the adult in custody (or for transgender or intersex adults in custody, of the sex approved by the Gender Identity Committee) may not conduct unclothed searches or visual body cavity searches (anal or genital opening) except in exigent circumstances or when performed by medical practitioners. Efforts will be made in exigent circumstances to obtain the warden's prior approval."
- No non-medical staff involved in cross-gender strip or visual searches were able to be interviewed as HRCC does not conduct cross-gender strip or visual searches.
- Site review observations:
  - During the site review the areas where strip searches are conducted were viewed by the audit team and it was verified that they provide enough privacy that cross-gender viewing is obstructed.

115.15(b):

- Body search training states that male staff members should not conduct searches on female inmates absent emergency circumstances creating an articulable need for the search to be conducted by that male staff member at that time.
- The HRCC PAQ reported that no pat-down searches of female residents were conducted by male staff in the past 12 months.
- Interviews with random staff:
  - Eighteen random staff from all shifts were interviewed and when asked if female inmates would have restricted access to programs or out of cell opportunities due to no female staff being available all said that female staff are always available and no one reported any instances where female staff were not available. It was noted during the site review that female staff were seen at HRCC during all shifts.
- Interviews with random inmates:
  - Eighteen residents were interviewed and none stated they were ever unable to participate in activities outside of their cell or dorm due to female staff not being available, most noted that there are always female staff.

115.15(c):

- DOCR 3A-06 states:
  - "Employees shall document in the electronic log all cross-gender unclothed searches and cross-gender visual body cavity searches."

- No cross-gender strip searches had been conducted in the past 12 months so no logs or other documentation were able to be reviewed.

115.15(d):

- DOCR 3C-04 states:
  - “Facility residents 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.
  - Staff will announce their presence when entering a housing unit of the opposite gender where facility residents may be seen using the shower, toilet, or different stages of undress.
    - This announcement will be documented as an electronic log entry in ELITE; for each security shift daily. The entry will be logged as “Cross-Gender Supervision.”
    - Signage will be posted in conspicuous areas for those facility residents who may have been absent from the housing unit when the announcement was made.”
- Site review observations:
  - During the site review the audit team saw primarily female staff in most living units. When male staff were observed entering the dorms during the site review and during interviews they announced themselves verbally.
  - Cameras were viewed by the audit team and verified they do not show areas where inmates may be in a state of undress.
  - Shower and toilet areas were viewed in each cottage. No privacy concerns were noted and the shower/restroom areas had enough privacy for the residents to change clothes, use the toilet and shower without being viewed by opposite gender staff.
- Inmate interview questionnaire:
  - A total of 18 inmates were asked if male staff announce when they enter the living units and all stated that yes that male staff announce. They all also stated that they have enough privacy to use the toilet, shower and change clothing.
- Random staff interviews:
  - A total of 18 random staff from all shifts and various posts throughout the facility were interviewed and all stated that male staff are announced when they enter a housing area. All staff stated that inmates are able to dress, shower and toilet without being viewed by opposite gender staff.

115.15(e):

- Per the DOJ memo titled "National PREA Standards Alignment with Executive

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|  | <p>Order 14168” dated December 2, 2025 this auditor is not auditing this section.</p> <p>115.15(f):</p> <ul style="list-style-type: none"> <li>Per the DOJ memo titled "National PREA Standards Alignment with Executive Order 14168” dated December 2, 2025 this auditor is not auditing this section.</li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.15 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| 115.16 | Inmates with disabilities and inmates who are limited English proficient                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|        | <p><b>Auditor Discussion</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>HRCC PAQ</li> <li>DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>DOCR Policy 4B-06, Limited English Proficiency, Dated September 16, 2024</li> <li>DOCR 2A-03 Appendix-Policy for Provision of Auxiliary Aids and Services for Communication with People with Disabilities</li> <li>PREA Coordinated Response Plan, Dated July 29, 2025</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>Agency Head</li> <li>Inmates (with disabilities or who are limited English proficient)</li> <li>Random Staff</li> </ul> <p>Site Review Observations</p> <p>Findings:</p> <p>115.16(a-b):</p> |

- DOCR 3C-04 refers to Policy 4B-06.
- DOC 4B-06 states:
  - “The department shall take reasonable steps to provide meaningful access to Limited English Proficiency adults in custody and juveniles. The department shall ensure that language does not prevent department staff from communicating effectively with Limited English Proficiency adults in custody or juveniles to ensure safe and orderly operations. The department may not prevent adults in custody or juveniles from accessing department programs and information, reviewing classification, understanding rules and disciplinary proceedings, or gaining eligibility for parole, probation, education, work, or treatment programs, alternatives to revocation of parole or probation, and alternatives to incarceration.”
  - It further states “Interpreter services for the deaf, blind, or hard of hearing adults in custody, and non-English-speaking adults in custody may be accessed using the following information.” It then provides the contact information for the services.
- DOCR 2A-03 Appendix states that the department is committed to making programs, services, and activities available to everyone, regardless of disability and that people with disabilities are entitled to fair and equal access to service.
- Written materials, including the PREA poster and brochure were reviewed that were written in clear, easy to understand language and the brochure is also available in Spanish.
- Interview with the Agency Head:
  - He stated that they do have procedures for residents with disabilities and who are limited English proficient. He stated that during the intake process they will align someone who is limited English proficient with a peer or staff member to help. The resident handbook is available in Spanish. He also stated that their case manager or mental health staff would meet with them to ensure services are provided in a way they can understand.
- Interviews with inmates with disabilities or who are limited English proficient:
  - A total of five inmates who were disabled were interviewed. Of those four, one had a physical disability and three had a mental health disability. All four stated they were given information on sexual abuse and harassment they were able to understand.

115.16(c):

- The HRCC PAQ reported they have not used an inmate to interpret during this audit period.
- DOCR 4B-06 covers working with residents who are limited English proficient and the processes available to provide interpretation services.
- The PREA Coordinated Response plan states:
  - “If someone in the custody of the DOCR is allowed to act as an

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|  | <p>interpreter, the reason for allowing this must be thoroughly documented.”</p> <ul style="list-style-type: none"> <li>Interviews of random staff: <ul style="list-style-type: none"> <li>Eighteen random staff were interviewed and asked when an inmate would be allowed to interpret for another inmate. Most knew they were supposed to use a staff member to translate or to contact a supervisor for guidance. Supervisors (RTA III) were interviewed and verified they knew how to contact the interpretation service if needed.</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.16 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| 115.17 | Hiring and promotion decisions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|        | <p><b>Auditor Discussion</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>HRCC PAQ</li> <li>DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025\</li> <li>DOCR Policy 1C-09, Selection and Promotion, Probationary Period, And Provisional Appointment, Dated May 27, 2025</li> <li>DOCR Policy 1C-11, Criminal Record Check and Fingerprinting, Dated November 10, 2025</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>Administrative (Human Resources) Staff</li> </ul> <p>Site Review Observations</p> <p>Findings:</p> <p>115.17(a-b):</p> <ul style="list-style-type: none"> <li>DOCR 3C-04 refers you to Policy 1C-09.</li> <li>DOCR 1C-09 states: <ul style="list-style-type: none"> <li>“The department may not hire or promote anyone who may have</li> </ul> </li> </ul> |

contact with juveniles or adults in custody and may not enlist the services of any contractor or volunteer who may have contact with juveniles or adults in custody 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).
  - 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
  - Has been civilly or administratively adjudicated to have engaged in the activity described in the paragraphs above.
  - The department 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 juveniles or adults in custody..”
- DOCR 1C-11 states:
    - “The DOCR may not hire or promote an employee or enlist the services of any contractor or volunteer 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);
      - Been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
      - Been civilly or administratively adjudicated to have engaged in the activity described in Subsection 5(D)(1)(a) or (b) of this policy.
      - The DOCR 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 juveniles.”
  - Documentation for the four staff hired in the past 12 months was received to show they passed the background check requirements.
  - Interview with human resources staff:
    - In the interview with human resources staff he stated that yes, the facility does consider prior incidents of sexual harassment when determining whether to hire or promote anyone, or to enlist the services on any contractor who may have contact with inmates.

115.17(c-d):

- The HRCC PAQ reports that 4 criminal background checks have been performed in the past 12 months for persons hired who may have contact with residents and that 11 contracts for services where criminal background

record checks were conducted on all staff covered in the contract.

- DOCR 1C-11 states:
  - “Before hiring new employees, who may have contact with adults or juveniles in custody, the DOCR shall: (PREA Standard 115.17 (c)-1)
    - Perform a criminal records check, and
    - Consistent with federal, state and local law, make the best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation.”
  - “The DOCR shall conduct a criminal record check before enlisting the service of any contractor or volunteer who may have contact with adults in custody or juveniles.”
- Interview with human resources staff:
  - HR staff stated that facility staff complete the initial criminal background check and also the check for promotions.

115.17(e):

- DOCR 1C-11 states:
  - “Criminal record checks must be conducted by NCIC trained staff every five years on all current employees, volunteers, and contractors, who may have contact with juveniles or adults in custody.”
- Interview with human resources staff:
  - HR staff stated that they use multiple systems including NCIC, CJIS, Odyssey, ELITHE and check if they are on any residents visitor list.

115.17(f-h):

- DOCR 1C-11 states:
  - “All applicants and employees shall disclose any misconduct described in Subsection 5(D)(1) of this policy through the following ways:
    - Written applications or interviews for hiring or promotions; or
    - Written self-evaluations conducted as part of current employee reviews.
  - Material omissions regarding such misconduct or the provision of materially false information are grounds for termination.
  - Unless prohibited by law, the DOCR shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.”
- Interview with human resources staff:
  - HR staff stated that staff do have a continuous duty to disclose any misconduct including on all applications and annual performance evaluations. He also stated that if another agency contacts them in regards to a former employee they will provide the relevant information to them and place the record in their file.

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|  | The auditor finds the agency/facility in full compliance with PREA Provision §115.17 based upon analysis of all available evidence including the documentation provided and interviews conducted. |
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| 115.18 | Upgrades to facilities and technologies                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
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|        | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|        | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Agency Head</li> <li>• Warden</li> </ul> <p>Site Review Observations</p> <p>Findings:</p> <p>115.18(a):</p> <ul style="list-style-type: none"> <li>• The HRCC PAQ indicates that the agency/facility has not acquired a new facility or made a substantial expansion or modification since the last PREA audit.</li> <li>• Interview with Agency Head: <ul style="list-style-type: none"> <li>◦ He stated that the agency is currently building a new women's facility and they have ensured that the PREA Coordinator is involved in design meetings and that they architects understand PREA as well as all other applicable standards.</li> </ul> </li> <li>• Interview with the Warden: <ul style="list-style-type: none"> <li>◦ The Warden stated that no substantial expansions or modifications have occurred since the last PREA audit.</li> </ul> </li> </ul> <p>115.18(b):</p> <ul style="list-style-type: none"> <li>• The HRCC PAQ reports that one camera was installed in a hallway in one of the living units when additional beds were added.</li> <li>• Interview with the Agency Head: <ul style="list-style-type: none"> <li>◦ He stated that every facility can request funding for cameras and that one of the main areas they try to cover is blind spots. He also said that the agency is currently working on getting body worn cameras for</li> </ul> </li> </ul> |

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|  | <p>some facilities to help reduce false accusations and investigation time.</p> <ul style="list-style-type: none"> <li>• Interview with the Warden: <ul style="list-style-type: none"> <li>◦ She stated that PREA is considered when updating or installing cameras and that physical plant staff have been very responsive. She also stated that she is very involved in the process of building the new women's facility and considers PREA in the design.</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.18 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| 115.21 | Evidence protocol and forensic medical examinations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|        | <p><b>Auditor Discussion</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• NDCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• NDCR Policy 1A-27, Investigations, Intelligence and alleged Delinquencies, Dated January 1, 2025</li> <li>• NDCR Policy 3A-12, Preservation of Physical Evidence, Dated February 15, 2023</li> <li>• PREA Coordinated Response Plan, Dated July 29, 2025</li> <li>• Memorandum of Understanding with the Abused Adult Resource Center (AARC), dated August 7, 2024</li> <li>• Memorandum of Understanding with the North Dakota Highway Patrol, dated August 6, 2020</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Random Staff</li> <li>• SAFE/SANE Staff</li> <li>• PREA Compliance Manager</li> </ul> <p>Findings:</p> <p>115.21(a-b):</p> <ul style="list-style-type: none"> <li>• The HRCC PAQ reported:</li> </ul> |

- The DOCR has a sworn officer that can do investigations but typically if criminal charges may be filed they bring in the highway patrol. They do conduct their own administrative investigations.
- DOCR 3C-04 states:
  - “All victims of sexual abuse will be offered access to forensic medical examinations.
    - Forensic medical examinations will be offered without financial cost to the victim. Forensic examinations will be conducted at Sanford Health (Bismarck) and Jamestown Regional Medical Center (Jamestown), unless exigent circumstances exist.”
- DOCR 1A-27 contains the policy and procedures for conducting internal investigations, including administrative and criminal investigations.
- The DOCR PREA Coordinated response plan contains the response plans for adult and juvenile PREA allegations as well as the investigative plan for PREA allegations. It includes details as what steps to take for each department, including medical, behavioral health and first responders.
- Interviews with random staff:
  - Eighteen random staff were asked about the agency’s protocol for obtaining usable physical evidence. The majority stated that they would separate the victim and suspect, secure the scene and notify their supervisor or the PREA Compliance Manager. Most knew a few different staff conducted the administrative investigations.

115.21(b):

The HRCC PAQ reported that they do not hold youthful residents.

115.21(c):

- The HRCC PAQ reported:
  - All inmates who experience sexual abuse are offered access to forensic medical examination at an outside facility. The PAQ further reported there were no forensic medical exams conducted in the past 12 months.
- It is recommended that the facility try to do a contract or memorandum of understanding with either the hospital or Central Dakota Forensic Nurse Examiners to document their efforts to provide these services.
- Interview with SANE Coordinator:
  - The SANE Coordinator for Central Dakota Forensic Nurse Examiners was interviewed by phone. She confirmed that they would provide forensic medical examinations at Sanford Hospital for residents of HRCC when needed. She did not recall having seen anyone from HRCC in the past year. They have a SANE nurse on-call and available at all times.

115.21(d):

- The HRCC PAQ states:
  - The facility makes a victim advocate from a rape crisis center available from Abused Adult Resource Center (AARC). They further reported that if an advocate is not available a behavioral health member would be contacted.
- The contract with AARC was reviewed and the auditor verified that they provide crisis response services including a phone line and in-person services 24/7.
- Interview with the PREA Compliance Manager:
  - The PCM stated that they have an advocate with the AARC who would provide advocacy services if requested, but she has not had that request.
- Interviews with Inmates who reported sexual abuse:
  - One offender was interviewed that had reported sexual abuse while confined but it did not require a forensic medical examination based on the nature of the allegations.
- Interview with the rape crisis center:
  - The auditor left messages at AARC but did not receive a return call. The hotline was tested while at the facility and an advocate with AARC answered and verified they provide services when requested.

115.21(e):

- The DOCR Coordinated Response plan states:
  - “If requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization, a DOCR staff member will accompany and support the victim through the forensic medical examination process and investigatory interviews. Their role is to provide emotional support, crisis intervention services, information, and referrals.”
- Interview with the PREA Compliance Manager:
  - She stated that the contract determinations for the rape crisis center is determined in consultation with the PREA Coordinator.

115.21(f):

- The MOU with the North Dakota highway patrol (NDHP) states that NDHP is the primary law enforcement responder for the DOCR and they have agreed to receive written reports of sexual abuse and harassment from inmates.

115.21(g): Auditor is not required to audit this provision.

The auditor finds the agency/facility in full compliance with PREA Provision §115.21 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.

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| <b>115.22</b> | <b>Policies to ensure referrals of allegations for investigations</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|               | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|               | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• NDCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• NDCR Policy 1A-27, Investigations, Intelligence and alleged Delinquencies, Dated January 1, 2025</li> </ul> <p>Interviews Conducted:</p> <p>Investigative Staff<br/>Agency head</p> <p>Findings:</p> <p>115.22(a):</p> <ul style="list-style-type: none"> <li>• The HRCC PAQ reported: <ul style="list-style-type: none"> <li>◦ The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. They further reported that in the past 12 months 4 allegations of sexual abuse and sexual harassment were received at HRCC, 4 were referred for administrative investigations and that 0 were referred for criminal investigation.</li> </ul> </li> <li>• Interview with the Agency Head: <ul style="list-style-type: none"> <li>◦ He stated that the agency does ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment. He further stated that the Highway Patrol would conduct the criminal investigation and that they maintain a good working relationship with them. He stated the facility conducts the initial first steps and the PREA Coordinator and PREA Compliance Manager would be involved in the process and help determine if the highway patrol is contacted or if the internal law enforcement staff would be. For administrative investigation they are handled in house by trained investigators and that the professional standards unit or human resources may be involved if staff are involved.</li> </ul> </li> </ul> <p>115.22(b-c):</p> |

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|  | <ul style="list-style-type: none"> <li>• DOCR 3C-04 states: <ul style="list-style-type: none"> <li>◦ “Policies to ensure referrals of allegations for investigations. The department is responsible for ensuring an administrative investigation is completed for all allegations of sexual abuse and/or harassment that occur within a department facility. If the act is potentially criminal, department staff also shall ensure the completion of a criminal investigation. Refer to the DOCR Coordinated Response Plan; and Policy 1A-27, Investigations, Intelligence; and Alleged Delinquencies; Policy 1A-09, Internal Investigations.”</li> </ul> </li> <li>• DOC 1A-27 states: <ul style="list-style-type: none"> <li>◦ “The department will have policy and procedures for conducting internal investigations, including administrative and criminal investigations. It is the purpose of this policy to provide department investigators and employees with guidelines and principles for the investigation of violations of DOCR policies and procedures and for the collection, analysis, and dissemination of criminal intelligence and investigative information, the enforcement and investigation of violations of criminal laws, the preservation of evidence, and the prevention of criminal activity on department property.”</li> </ul> </li> <li>• The agency website: (chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://www.docr.nd.gov/sites/www/files/documents/prea/Policies-Procedures/-3C-04%20-%20Prison%20Rape%20Elimination%20Act%20of%202003.pdf) was reviewed and verified that DOCR 3C-04 is available for the public to view.</li> <li>• Interview with facility investigator: <ul style="list-style-type: none"> <li>◦ Two administrative investigators were interviewed and stated that agency policy requires that all allegations of sexual abuse or sexual harassment be referred for investigation.</li> </ul> </li> </ul> <p>115.22(d): Auditor is not required to audit this provision.</p> <p>115.22(e): Auditor is not required to audit this provision.</p> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.22 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| <b>115.31</b> | <b>Employee training</b>                             |
|               | <b>Auditor Overall Determination:</b> Meets Standard |
|               | <b>Auditor Discussion</b>                            |
|               | Documentation reviewed:                              |

- HRCC PAQ
- DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025
- DOCR Policy 1D-03, Training Requirement and Orientation, Dated October 8, 2025
- Staff training curricula, dated 2025
- Staff roster and training documentation
- NDCR Employee Handbook, Dated July 2024
- 3C-04 PREA Acknowledgement Form

Interviews Conducted:

- Random Sample of Staff

Site Review Observations

Findings:

115.31(a-b)

- DOCR 3C-04 refers you to Policy 1D-03.
- DOCR 1D-03 states:
  - “Each department facility, division, and work unit shall have a training plan, which describes the required orientation and sustainment training for each employee class.
  - It further states:
    - Department Training Requirements for all onsite Personnel: Prison Rape Elimination Act (annually).
- The HRCC PAQ reported that they do many training tailored to the women’s population including human trafficking, gender responsive strategies in corrections and MANDT. They further reported that any staff reassigned to HRCC would go through all mandatory training.
- The training curriculum was reviewed and verified it contains some of the standards requirements.
  - The following were not found in the training slides provided:
    - (a)-3 Residents right to be free from sexual abuse and sexual harassment
    - (a)-4 Residents and employees right to be free from retaliation for reporting sexual abuse and sexual harassment
    - In addition, the training slides state “the individual involved should not” shower, wash etc. They should state that they request the victim not take these actions and ensure the suspect does not take these actions.
  - Additional information was received from the agency training coordinator that included a list of PREA-related training staff receive:
    - New Employee Orientation (NEO) training

- New Staff Facility Orientation (NSFO) training
- Module Orientation training, including Day 4 PREA-related instruction and On-The-Job Modules
- PREA Building/Staff Meeting refresher training reviewed in person throughout the year
- Annual online PREA refresher training
  - She further clarified that (a)-3 and (a)-4 are covered in the following:  
 (a)-3 and (a)-4 are addressed throughout the curriculum through the department's zero tolerance policy, reporting requirements, staff responsibilities, and professional boundaries expectations.  
 It was verified in the training slides that retaliation is covered in the On the Job module and the right to be free from sexual abuse and sexual harassment is not specifically mentioned it is stated that they have a zero tolerance policy against sexual abuse and sexual harassment.
  - It is recommended that the annual refresher training be updated to include specifically that all residents have to right to be free from sexual abuse and sexual harassment as well as free from retaliation from reporting sexual abuse or sexual harassment. In addition it is recommended that the slides regarding destruction of evidence be updated to match the standards requirements to request the victim and instruct the suspect not to take such actions.
  - Corrective action: The PREA Compliance Manager sent an email to all staff clarifying the difference between requesting the victim and instructing the suspect not to take actions that may destroy evidence.

- Interviews with random staff:  
 Eighteen random staff were interviewed and most stated they received training on PREA either at the training academy or at the facility in the past year and many said it was in the past couple of months. The majority of staff were able to recall multiple topics of the training.  
 Per the DOJ memo titled "National PREA Standards Alignment with Executive Order 14168" dated December 2, 2025 this auditor is not auditing the following section: 115.31(a)(9).

115.31(c):

- The HRCC PAQ reported that the first year there are multiple trainings that

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|  | <p>include PREA related information and there is a yearly refresher required by all staff.</p> <p>115.31(d):</p> <ul style="list-style-type: none"> <li>• The refresher training was reviewed and the last slide includes a statement in which staff have to select “I Agree” to finish the course. The standard requires that the agency document that staff members understand the training they have received so corrective action is needed. The PAQ stated that staff through their employee evaluation must sign the acknowledgement but the examples provided were from prior years, possibly when staff were hired, waiting on clarification from PCM. If the PREA Compliance Acknowledgement is completed annually, copies from the last year could be provided to show compliance.</li> <li>• Corrective action: Per the PREA Coordinator the training was updated and when it will be given this cycle it will include that staff have to acknowledge understanding versus just selecting they agree.</li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.31 based upon analysis of all available evidence including the documentation provided, the site review, interviews conducted and corrective action completed.</p> |
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| 115.32 | Volunteer and contractor training                                                                                                                                                                                                                                                                                                                                                                                                                |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>                                                                                                                                                                                                                                                                                                                                                                                      |
|        | <p><b>Auditor Discussion</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                 |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• DOCR Policy 3A-15, Facility Access and Perimeter Security, Dated May 12, 2025</li> <li>• Volunteer and Contractor Training curricula</li> <li>• Volunteer training documentation</li> <li>• Volunteer Handbook</li> </ul> <p>Interviews Conducted:</p> |

- Volunteers
- Contractors

#### Site Review Observations

#### Findings:

#### 115.32(a-c):

- The HRCC PAQ reports that 295 (162 volunteers and 133 contractors), who may have contact with inmates, have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment.
- DOCR 3C-04 refers you to Policy 3A-15.
- DOCR 3A-15 states:
  - "Each volunteer and intern shall receive a documented orientation and training appropriate to the particular position prior to assignment.
  - A department staff member shall provide training and document that training for volunteers and interns on the rules and procedures that affect their specific function or the function of the facility.
  - Volunteers and interns shall understand the terms of their service, the specific tasks, responsibilities, and authority and agree to abide by all DOCR policies and procedures. (2-CO-1G-08)
  - Volunteers shall sign acknowledgement of the DOCR code of ethics, conduct, work rules (employee handbook), computer usage, PREA, dress code, confidentiality policy, and duty to report issues, such as threats, suicide behavior, contraband, and safety security concerns."
- The volunteer training was reviewed and verified it covers all mandatory content including the zero tolerance policy and how to report sexual abuse or sexual harassment.
- The volunteer handbook was reviewed and covers maintaining professional boundaries and general information on PREA including definitions of sexual abuse and harassment reporting information if they receive a report.
- Interviews with volunteers/contractors:
  - Four volunteers/contract staff were interviewed by the audit team and three stated they have received training regarding PREA and their responsibilities, the other was uncertain. They all stated that they have been notified of the agency's zero-tolerance policy on sexual abuse and sexual harassment and how to report such incidents. Messages were left for additional volunteers but no response was received.
- The completed paperwork for each person interviewed, or attempted to be, was received which includes the statement of understanding of the PREA training.

The auditor finds the agency/facility in full compliance with PREA Provision §115.32 based upon analysis of all available evidence including the documentation provided,

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|  | the site review and interviews conducted. |
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| <b>115.33</b> | <b>Inmate education</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|               | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|               | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• DOCR Policy 4A-01, Admission, Reception and Orientation, Transfers, Dated May 12, 2025</li> <li>• DOCR Policy 4A-06, Limited English Proficiency, Dated September 16, 2024</li> <li>• HRCC PREA Pamphlet (English and Spanish) and Receipt form</li> <li>• PREA Posters</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Intake Staff</li> <li>• Random inmates</li> <li>• Disabled/LEP Inmates</li> </ul> <p>Site Review Observations</p> <p>Findings:</p> <p>115.33(a):</p> <ul style="list-style-type: none"> <li>• The HRCC PAQ reported that 126/126 (100%) of inmates admitted in the past 12 months were given PREA education at intake.</li> <li>• DOCR 3C-04 refers you to policy 4A-01.</li> <li>• DOCR 4A-01 states: <ul style="list-style-type: none"> <li>◦ “Facility staff shall provide comprehensive education on PREA to all adults in custody within 30 days of the intake by showing the video ‘PREA: What You Need to Know’ and providing a verbal explanation of the video. PREA education must explain the following: <ul style="list-style-type: none"> <li>■ The DOCR’S zero-tolerance policy regarding sexual abuse and sexual harassment;</li> <li>■ Their right to be free from sexual abuse or sexual harassment;</li> <li>■ How to report incidents or suspicions of sexual abuse or sexual</li> </ul> </li> </ul> </li> </ul> |

- harassment;
- Their right to be free from retaliation; and
- A PREA fact sheet must be provided in their property bag with information on definitions and reporting methods.
- The adult in custody shall read and sign the PREA Acknowledgement – Resident Form.

- Completion of the orientation process must be documented by a statement signed by the adult in custody. (4-4288) Staff shall scan the signed document into Filenet.”
- The PREA pamphlet was reviewed and it contains general information on PREA including the zero-tolerance policy for sexual abuse and sexual harassment and reporting options.
- Interview with intake staff:
  - The auditor sat through new resident orientation during the on-site portion of the audit and spoke with the staff completing the education. They provided information about the zero-tolerance policy and provided the resident with a pamphlet. They also conduct monthly meetings with all residents and show the PREA education video. In addition the residents take a quiz each month.
- Interviews with random inmates:
  - Of the 18 random residents interviewed, all stated they received educational information about the zero-tolerance policy and how to report upon arrival at HRCC and many mentioned the monthly PREA meetings which include watching the PREA video.

115.33(b):

- The HRCC PAQ reported that 122/122(100%) of those inmates admitted during the past 12 months (whose length of stay was for at least 30 days) received comprehensive education.
- During the on-site portion of the audit one resident was admitted to HRCC so the auditor observed that process. The staff member met in a semi-private location with the new resident and went through various paperwork with the resident, including the PREA information. When another resident came into the area they were meeting the staff member stopped any questioning and waited for the other resident to leave to ensure the information was as confidential as possible. The resident was allowed to ask questions and also signed the form confirming that they understood and received the handbook and pamphlet.
- In addition to the information provided in orientation, HRCC does monthly meetings regarding PREA which include showing the PREA orientation video. There is also a quiz and time for each resident to ask questions. It is recommended that the topics vary with different focuses as some residents stated they get tired of the same information month after month. Creating some differences may allow the resident to pay more attention and have better retention of the information.

- Interviews with intake staff:
  - Intake staff interviewed stated that all new residents are met with the day of arrival then within 30 days they attend the mandatory monthly meeting where the PREA education video is shown. They go over the zero-tolerance policy, reporting options and advocacy options.
- Interviews with random inmates:
  - The residents stated they received some of the education on their day of arrival when talking to staff and then saw the PREA video within the first few weeks after arrival.

115.33(c):

- The HRCC PAQ reported that all inmates had been educated within 30 days of intake during the audit period.

115.33(d):

- The HRCC PAQ reported that in addition to the video they use is the one provided by the PREA Resource Center and is available in English, Spanish, ASL and captioned.
- The PREA brochure is available in English and Spanish.
- DOCR 3C-04 states:
  - “If an adult in custody or juvenile is a Limited English Proficiency person and needs language assistance, including assistance for purposes of classification; accessing department programs and information; understanding rules and disciplinary proceedings; gaining eligibility for parole or pardon or alternatives to revocation; for medical care; or participation in education, work, or treatment programs, the department shall provide language assistance through available qualified interpreter services.”
- Interviews with inmates who are disabled or limited English proficient:
  - A total of four residents were interviewed using the disabled and limited English proficient inmates’ protocol. All four offenders stated they did receive information about sexual abuse and sexual harassment in a manner they were able to understand.

115.33(e):

- The HRCC PAQ reported that monthly PREA education sessions are entered into ELITE and an email is sent when these are completed.
- Completed education forms for all residents who were interviewed during the on-site portion of the audit were requested and received verifying they all received the mandatory education within 30 days of arrival.

115.33(f):

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|  | <ul style="list-style-type: none"> <li>• Site review observations: <ul style="list-style-type: none"> <li>◦ During the site review the audit team found PREA posters in both cottages. Most were located near the phones in the common area.</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.33 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| <b>115.34</b> | <b>Specialized training: Investigations</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|               | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|               | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• DOCR Policy 1D-03, Training Requirements and Orientation, Dated October 8, 2025</li> <li>• PREA Investigations training agenda, dated 2023</li> <li>• HRCC PREA Investigators-Staff roster</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Investigative staff</li> </ul> <p>Findings:</p> <p>115.34(a-c):</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 refers you to policy 1D-03.</li> <li>• DOCR 1D-03 states: <ul style="list-style-type: none"> <li>◦ “Investigations: To the extent the department conducts sexual abuse investigations, the department shall ensure its investigators have received training in conducting such investigations in confinement settings. This training must include the following topics: <ul style="list-style-type: none"> <li>■ a.) Techniques for interviewing sexual abuse victims; and proper use of Miranda and Garrity Warnings;</li> <li>■ b.) Sexual abuse evidence collection in confinement settings;</li> <li>■ c.) Criteria and evidence to substantiate a case for administrative action or for prosecutorial referral.”</li> </ul> </li> </ul> </li> </ul> |

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|  | <ul style="list-style-type: none"> <li>• The agency investigation training agenda reviewed and verified that they cover investigations in confinement settings, interview techniques for interviewing sexual abuse victims, proper use of Garrity and Miranda warnings (the agency does not conduct criminal investigations so they would never use Miranda), evidence collection in confinement settings and the definitions of unfounded, substantiated and unsubstantiated.</li> <li>• A training roster was received which shows that six staff at HRCC have completed the PREA Investigator training as of 3/2/2026. The auditor verified that the staff who conducted the investigations reviewed were on the list.</li> <li>• Interview with investigative staff: <ul style="list-style-type: none"> <li>◦ Two investigators were interviewed and stated that they have received the training specific to conducting sexual abuse investigations in confinement settings.</li> </ul> </li> </ul> <p>115.34(d): Auditor is not required to audit this provision.</p> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.34 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| 115.35 | Specialized training: Medical and mental health care                                                                                                                                                                                                                                                                                                                                                                                                                            |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>                                                                                                                                                                                                                                                                                                                                                                                                                     |
|        | <p><b>Auditor Discussion</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• DOCR Policy 1D-03, Training Requirement and Orientation, Dated October 8, 2025</li> <li>• Training Roster</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Medical staff</li> <li>• Mental health staff</li> </ul> <p>Findings:</p> <p>115.35(a):</p> |

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|  | <ul style="list-style-type: none"> <li>• DOCR 3C-04 refers you to policy 1D-03.</li> <li>• DOCR 1D-03 states: <ul style="list-style-type: none"> <li>◦ “Medical and Mental Health Care. The department shall ensure that all full and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: <ul style="list-style-type: none"> <li>■ How to detect and assess signs of sexual abuse and sexual harassment.</li> <li>■ How to preserve physical evidence of sexual abuse.</li> <li>■ How to respond effectively and professionally to victims of sexual abuse and sexual harassment.</li> <li>■ How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.”</li> </ul> </li> </ul> </li> <li>• The HRCC PAQ reported that 7 (3 medical and 4 mental health) staff who work regularly at the facility have received the training.</li> <li>• Interviews with medical and mental health staff: <ul style="list-style-type: none"> <li>◦ Two medical staff and two mental health staff were interviewed and stated they have received training regarding sexual abuse and sexual harassment and that it covered all required topics including how to detect and assess signs of sexual abuse and sexual harassment and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</li> </ul> </li> </ul> <p>115.35(b): This provision is not applicable as forensic medical examinations would be conducted at an outside facility and not by agency staff.</p> <p>115.35(c-d):</p> <ul style="list-style-type: none"> <li>• The auditor received training rosters for PREA: Behavioral Health Care for Sexual Assault Victims in a Confinement Setting and PREA for Medical and Mental Health Staff showing that all 7 medical or mental health staff completed one of them.</li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.35 based upon analysis of all available evidence including the documentation provided and interviews conducted.</p> |
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| <b>115.41</b> | <b>Screening for risk of victimization and abusiveness</b> |
|               | <b>Auditor Overall Determination:</b> Meets Standard       |
|               | <b>Auditor Discussion</b>                                  |
|               | Documentation reviewed:                                    |

- HRCC PAQ
- DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025
- DOCR Policy 4A-01, Admission, Reception and Orientation, Transfers, Dated May 12, 2025
- PREA Rating Assessment Manual, Dated January 26, 2024
- Risk Screening Documentation for residents interviewed

#### Interviews Conducted:

- Staff who perform for risk screening
- Random Inmates
- PREA Coordinator
- PREA Compliance Manager

#### Site Review Observations

#### Findings:

#### 115.41(a-e):

- DOCR 3C-04 states:
  - The Prison Rape Elimination Act (PREA) Intake/Admission Screening (NDSP only) must be completed within 24 hours of admission for risk of being sexually abused by other facility residents or being sexually abusive toward other facility residents. Housing assignments are made accordingly.
  - The Prison Rape Elimination Act (PREA) Intake/Admission screening (NDSP only) considers the following criteria to assess facility residents for risk of sexual victimization and sexual abusiveness:
    - Whether the facility resident has a mental, physical, or developmental disability;
    - The age of the facility resident;
    - The physical build of the facility resident;
    - Whether the facility resident has previously been incarcerated;
    - Whether the facility resident's criminal history is exclusively nonviolent;
    - Whether the facility resident has prior convictions for sex offenses against an adult or child;
    - Whether the facility resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
    - Whether the facility resident has previously experienced sexual victimization;
    - The facility resident's own perception of vulnerability.
  - Upon completion of the Prison Rape Elimination Act (PREA) Intake/

Admission Screening (NDSP only) unit staff must review for housing assignment."

- The HRCC PAQ reports that 126/126 (100%) of inmates entering the facility within the past 12 months whose length of stay was for 72 hours or more were screened for risk or sexual victimization and risk of sexual abusiveness.
- The PREA Assessment Manual was reviewed and it contains screening descriptions and timelines and instructions for completing the assessments.
- The PREA Screening tool was reviewed and verified it contains all required questions from this standard.
- During the site review the auditor sat in on a screening for a new arrival and observed that the staff member completed the assessment on the computer as the questions were asked and verified all required information was gathered.
- Interviews with staff who perform screening for risk of victimization and abusiveness:
  - Two staff members who complete the PREA screening were interviewed. One completed the initial screening and the other does the 30 day screening. They confirmed all residents are screened upon arrival, typically within the first hour. All screening are done one on one in a private setting There are several questions they ask each resident as well as items they review in their files. The screening is completed in the computer system and they use the information required on it.
- Interviews with random inmates:
  - Of the 18 offenders interviewed, all 18 stated they were asked questions about PREA when they arrived at HRCC.
- Per the DOJ memo titled "National PREA Standards Alignment with Executive Order 14168" dated December 2, 2025 this auditor is not auditing the following section: 115.41(d)(7).

115.41(f):

- DOCR 3C-04 states:
  - "Prison Rape Elimination Act (PREA) Assessment/ Reassessment Screening form will be utilized by transitional planning staff or designee within 30 days of the facility resident's intake in the orientation unit and/or before the facility resident transfers from the orientation unit, whichever comes first. This form will also be utilized to conduct reassessments annually by an assigned case manager or designee at the same time the facility resident undergoes custody level reclassification. A reassessment should also be completed when there is a triggering event such as a substantial PREA related incident or the facility resident self-discloses an act of sexual predation or victimization. If a facility resident is identified as a transgender or intersex, a reassessment shall be completed by the assigned counselor or designee every six (6) months. If a reassessment is

warranted because of a referral, request, or receipt of additional information that bears on the facility resident's risk of sexual victimization or abusiveness, any staff member may refer a facility resident for reassessment."

- DOCR 4A-01 defines the PREA Assessment as:
  - "Prison Rape Elimination Act (PREA) Assessment/Re-assessment Form: A comprehensive PREA screening completed within 30 days of arrival to assign PREA rating to determine housing, programming, and work assignments. At a minimum, transgender and intersex adults in custody will be assessed every six months."
- The HRCC PAQ reported that 100% (122/122) of the residents who entered the facility in the last 12 months whose length of stay was 30 days or more were reassessed for their risk of sexual victimization and of being sexually abusive.
- Interviews with staff who perform screening for risk of victimization and abusiveness:
  - The staff interviewed stated inmates are screened again within 30 days and that they normally want them to be there at least two to three weeks.
- Interviews with random inmates:
  - Of the 18 residents interviewed, 12 remembered being asked the PREA screening questions again after their arrival, 5 said they were not asked the questions a second time and one had not yet been at the facility 30 days.
  - Both the initial screening and 30 day reassessment were requested and provided for all 18 residents interviewed showing both the initial assessment and reassessments were completed within the required timeframes.

115.41(g):

- DOCR 3C-04 states:
  - "Prior to returning to assigned housing, the receiving staff shall complete the Prison Rape Elimination Act (PREA) Temporary Leave/ Transfer Screening Assessment in Elite. This assessment is completed upon return from temporary leave and by the receiving facility upon transfer between DOCR facilities and DOCR contract facilities. This assessment is completed with input from the DOCR facility resident. If either question on the assessment is marked as "yes", activate the facility coordinated response and refer to unit management.
  - Facility residents identified as high-risk with a history of sexual victimization or sexually assaultive behavior will be assessed by a qualified staff member. Facility residents with a history of sexual victimization or sexually assaultive behavior are identified, monitored, and counseled. (4-4281-4M) A facility resident's risk level must be reassessed when warranted because of a referral, request, incident of sexual abuse, or receipt of additional information that bears on the

facility resident's risk of sexual victimization or abusiveness. Any staff may refer to a facility resident for reassessment."

- Interviews with staff who perform screening for risk of victimization and abusiveness:
  - She stated that residents would be reassessed as needed if there was an incident reported or additional information was received.

115.41(h):

- DOCR 3C-04 states:
  - "Facility residents may not be disciplined for any refusal or nondisclosure during screening regarding gender identity, sexual orientation, intersex condition, disability status, or prior sexual victimization."
- Interviews with staff who perform screening for risk of victimization and abusiveness:
  - Staff stated that inmates would not be disciplined for refusing to answer any of the questions during the PREA screening.

115.41(i):

- DOCR 3C-04 states:
  - " DOCR maintains information within ELITE and FileNet that limits access to DOCR staff and ensures information is not exploited to the facility resident's detriment by staff or other facility residents. Staff is required to follow the DOCR confidentiality agreement. "
- Interview with the PREA Coordinator:
  - He stated that all assessments are in the ELITE system and that not all staff have access to that system.
- Interview with the PREA Compliance Manager:
  - She stated that the assessments and scores can be accessed by anyone who has the crystal reports system.
- Interviews with staff who perform screening for risk of victimization and abusiveness:
  - They indicated that staff, such as case managers and front line staff, have access to the assessments.

The auditor finds the agency/facility in full compliance with PREA Provision §115.41 based upon analysis of all available evidence including the documentation provided and interviews conducted.

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| <b>115.42</b> | <b>Use of screening information</b> |
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**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation reviewed:

- HRCC PAQ
- DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025
- DOCR Policy 4A-01, Admission, Reception and Orientation, Transfers, Dated May 12, 2025
- PREA Rating Assessment Manual, Dated January 26, 2024
- Room assignment Rosters

Interviews Conducted:

- PREA Compliance Manager

Site Review Observations

Findings:

115.42(a-b):

- The HRCC PAQ reported that the PREA Rating from DWCR is looked up prior to a residents arrival and noted on each room assignment form that are at each staff control area so that they ensure they place residents in rooms that do not place them at risk.
- DOCR 3C-04 refers you to policy 4A-01.DOCR 4A-01 states that residents will be assigned to a housing unit based on PREA screening and current offense.
- Current room assignment rosters were reviewed which verified known or potential victims are not roomed with known or potential aggressors. It is clearly identified on each room assignment sheet that this is not to be done.
- Interview with the PREA Compliance Manager:
  - She stated that each case manager reviews the assessments scores and that they check in with each resident around 30 days after arrival to check on them including their housing/room assignments. If a new report is made they are assessed by the case manager and referred to mental health. Staff in work areas are made aware of incidents so that they can help monitor conduct when needed.
- Interview with staff responsible for risk screening:
  - A staff member who conducts the PREA screening was interviewed and she verified that HRCC uses the information to help determine housing, work and program assignments. She stated with this being a minimum custody facility they rarely get anyone who scores as a potential or known aggressor.

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|  | <p>115.42(c-g):</p> <ul style="list-style-type: none"> <li>Per the DOJ memo titled "National PREA Standards Alignment with Executive Order 14168" dated December 2, 2025 this auditor is not auditing the following sections: 115.42(c) through (g).</li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.42 based upon analysis of all available evidence including the documentation provided and interviews conducted.</p> |
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| 115.43 | Protective Custody                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|        | <p><b>Auditor Discussion</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>HRCC PAQ</li> <li>DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>DOCR Policy 3A-18, Segregation, Dated October 27, 2023</li> <li>PREA Coordinated Response plan, dated July 29, 2025</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>Warden</li> <li>Staff who Supervise Inmates in Segregated Housing</li> </ul> <p>Site Review Observations</p> <p>Findings:</p> <p>115.43(a):</p> <ul style="list-style-type: none"> <li>The HRCC PAQ reported that zero inmates at risk of sexual victimization were held in involuntary segregated housing in the past 12 months. They further stated that HRCC does not have segregated housing and that rarely would they have someone in investigative separation.</li> <li>DOCR 3C-04 refers you to policy 3A-18.</li> <li>DOCR 3A-18 states: <ul style="list-style-type: none"> <li>“Generally, adults in custody who require separation and protective custody should not be placed in restrictive housing.</li> </ul> </li> </ul> |

- Adults in custody are admitted and placed on protective custody status only when there is documentation that protective custody is warranted, and no other reasonable options are available. The chief of security is responsible for ensuring a full investigation is completed on all protective custody requests made by adults in custody or staff. In emergent cases, the shift supervisor may place an adult in custody in the segregation unit until the case is reviewed by the warden.”
- It is recommended that more specific language related to these standards requirements is added to policy.
- In the site review it was noted that HRCC does not have a segregation unit. There are a couple of cells/rooms where someone may stay if they need to be isolated but all staff stated they are mainly used when medical needs require someone to be by themselves and are not used as punishment or segregation.
- The Coordinated PREA Response Plan states:
  - “Adults in custody at high-risk for sexual victimization may not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made there is no available alternative means of separation from likely abusers. If an assessment cannot be completed immediately, the adult in custody may be held in involuntary segregated housing for less than 24 hours while assigned staff completes the assessment. If an involuntary segregated housing assignment is made, the case manager shall clearly document in ELITE the basis for the concern for the person’s safety and the reason why no alternative means of separation can be arranged.”
- Interview with the Warden:
  - She stated that victims would not be placed in segregation and they would look at isolating or moving the perpetrator if needed. They try to change as little as possible for the victim.

115.43(b):

- The Coordinated PREA Response Plan states:
  - “Adults in custody placed in involuntary segregated housing for this purpose shall have access to their normal programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document any opportunities that have been limited, the duration of the limitation, and the reasons for any limitations.”
- Staff who supervise inmates in segregated housing:
  - A staff member who supervises the cottage where the segregation cells are located stated that they have never seen them used for a victim. She stated that the residents in those cells are still allowed access to their normal programs, privileges, education and work activities unless they are there as a perpetrator pending investigation.

- There were no inmates who reported sexual abuse, or were at risk of sexual victimization, that were placed in segregated housing at HRCC so no interview was able to be conducted for this targeted category.

115.43(c):

- The HRCC PAQ reported that in the past 12 months no inmates at risk of sexual victimization were assigned to involuntary segregated housing for longer than 30 days.
- The Coordinated PREA Response Plan states:
  - “Adults in custody may only be assigned to involuntary segregated housing until an alternative means of separation from likely abusers can be arranged. The assignment may not ordinarily exceed a period of 30 days. Efforts must be made to keep the victim in the victim’s normal housing unit to prevent re-traumatization.”
- Interview with the Warden:
  - She stated that victims would never be placed in segregation.
- Staff who supervise inmates in segregated housing:
  - She stated that each resident would be reviewed individually to determine what placement is best for them but has not ever seen a victim placed there.

115.43(d):

- The Coordinated PREA Response Plan states:
  - “Adults in custody placed in involuntary segregated housing for this purpose shall have access to their normal programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document any opportunities that have been limited, the duration of the limitation, and the reasons for any limitations.”
- The HRCC PAQ reports that no inmates were placed in involuntary segregated housing so no file reviews were able to be done.

115.43(e):

- The Coordinated PREA Response Plan states:
  - “Every seven days for the first two months and then 30 days thereafter, the Administrative Segregation review team shall afford each resident a review to determine whether there is a continuing need for separation from the general population.”

The auditor finds the agency/facility in full compliance with PREA Provision §115.43

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|  | based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted. |
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| <b>115.51</b> | <b>Inmate reporting</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|               | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|               | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• HRCC Facility Handbook, dated September 2024</li> <li>• DOCR Coordinator Response plan, dated July 29, 2025</li> <li>• PREA Posters</li> <li>• Agency Website</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Random Staff</li> <li>• Random Inmates</li> <li>• PREA Compliance Manager</li> </ul> <p>Site Review Observations</p> <p>Findings:</p> <p>115.51(a):</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 states: <ul style="list-style-type: none"> <li>◦ “HRCC: Department Public Website; Refer to the DOCR Coordinated Response Plan; the Memorandum of Understanding between the department and the Abused Adult Resource Center; the Memorandum of Understanding between the Department and the North Dakota Highway Patrol.”</li> </ul> </li> <li>• Website: The agency website contains information on how to report to the PREA Coordinator or PREA Compliance Manager at each facility via email or regular mail.</li> <li>• The PREA poster was reviewed and it contains reporting information for residents including multiple options as to how they can make a report.</li> <li>• Site review observations:</li> </ul> |

- During the site review the audit team verified the PREA poster was posted in all living units and it includes multiple reporting options. The posters were not easily viewable by all inmates. They were posted near the phones but the font was very small and difficult to read. Some of the phones were right next to staff desks which make it difficult for residents to try and read the number off of the poster without staff observing what they are doing. Inmates also told us the information was not on their tablets. Corrective action is needed to ensure the information is posted throughout the facility and contains easily read information for all residents, including those who may not be able to read small fonts. It is also recommended that the reporting information be added to the tablets so residents can easily access the numbers since the tablets are used as their phones. The facility also needs to ensure PREA information is posted throughout the entire facility, not just by the phones.
  - Corrective action: HRCC updated the PREA poster so that it is easier to read and understand the reporting options. HRCC sent photographs to the auditor showing areas where it is posted.
- The audit team tested the reporting methods via phone which goes to staff at the facility.
- Interviews with random staff:
  - Eighteen random staff were interviewed and all staff were able to communicate at least one method for inmates to report sexual abuse or sexual harassment and most knew multiple options including calling a hotline, telling staff, writing a kit or telling family.
- Interviews with random inmates:
  - Eighteen residents were interviewed and the majority were able to list at least one way to report with the majority listing multiple options including calling a reporting line, telling staff or calling their family.

115.51(b):

- The PREA Brochure was reviewed and it does contain information on reporting but does not include information on the method to contact the Highway Patrol as the outside report option.
- The offender PREA poster states that they can write to the Highway Patrol and advises them to use the Notice of Prison Rape Elimination Act allegation form which is located in the dayrooms. It also states that residents are not required to place a return address on PREA correspondence addressed to the ND Highway Patrol and that the outgoing correspondence is not screened.
- Interview with the PREA Compliance Manager (PCM):
  - She stated that HRCC provides multiple options for reporting including writing to the Highway Patrol and calling the advocacy center. When writing to the Highway Patrol residents can seal the envelope and they can send it anonymously and not include their name on the envelope.

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|  | <ul style="list-style-type: none"> <li>Interviews with random inmates: <ul style="list-style-type: none"> <li>Of the 18 residents asked if they can report anonymously the majority stated they could although some stated they were unsure what options were available to report anonymously.</li> </ul> </li> </ul> <p>115.51(c):</p> <ul style="list-style-type: none"> <li>The HRCC PAQ reported that all staff are required to accept and document reports of sexual abuse or sexual harassment.</li> <li>DOCR 3C-04 refers you to the PREA Coordinated Response and MOUS. <ul style="list-style-type: none"> <li>It was not found in policy, the coordinated response plan or facility handbook that staff are mandated to accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties or that they are required to document verbal reports. It is recommended that this be added to policy.</li> </ul> </li> <li>Interviews of random staff: <ul style="list-style-type: none"> <li>Eighteen random staff asked about what they would do if they received a verbal report of sexual abuse or sexual harassment and all stated they would notify their supervisor or facility management and write a report as soon as possible.</li> </ul> </li> <li>Interviews with random inmates: <ul style="list-style-type: none"> <li>Of the 18 residents asked if they can make reports of sexual abuse or sexual harassment either in person or in writing and if someone else can make the report for them with the majority stating that family or friends could report for them.</li> </ul> </li> </ul> <p>115.51(d):</p> <ul style="list-style-type: none"> <li>Interviews with random staff: <ul style="list-style-type: none"> <li>Eighteen random staff were asked how staff can privately report and the majority stated they could report to facility management.</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.51 based upon analysis of all available evidence including the documentation provided, the site review, interviews conducted and corrective action completed.</p> |
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| <b>115.52</b> | <b>Exhaustion of administrative remedies</b>         |
|               | <b>Auditor Overall Determination:</b> Meets Standard |
|               | <b>Auditor Discussion</b>                            |
|               | Documentation reviewed:                              |

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|  | <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• DOCR Policy 3C-10, Grievance Procedures, Dated October 3, 2025</li> <li>• HRCC Facility Handbook, dated September 2024</li> <li>• DOJ FAQ dated July 19, 2022</li> </ul> <p>Findings:</p> <p>115.52:</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 refers you to policy 3C-10.</li> <li>• DOCR 3C-10 states: <ul style="list-style-type: none"> <li>◦ “ Although the department allows allegations of sexual abuse to be submitted on a grievance form for investigation, the department does not have grievance procedures to address allegations of adult in custody sexual abuse. If an allegation of sexual abuse is submitted on a grievance form, it must be removed from the grievance process and processed under the Policy 3C-04, Prison Rape Elimination Act of 2003 (PREA) as though it were submitted using another permitted method. If there are other claims included in the grievance (besides the allegation of sexual abuse or harassment), then the portion of the grievance related to those claims must be refiled under a new grievance, and the original grievance will be maintained to be processed under Policy 3C-04, Prison Rape Elimination Act of 2003 (PREA) as though it were submitted using another permitted method.”</li> </ul> </li> <li>• Review of provided documentation verifies that residents are provided notice that grievances related to sexual abuse are immediately converted to investigations and are outside of the agency’s administrative remedies process.</li> <li>• Based on review of policy, resident handbooks, the DOJ FAQ this auditor determined that HRCC is exempt from this standard.</li> </ul> <p>The auditor finds the agency/facility exempt from PREA Provision §115.52 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| <b>115.53</b> | <b>Inmate access to outside confidential support services</b> |
|               | <b>Auditor Overall Determination:</b> Meets Standard          |
|               | <b>Auditor Discussion</b>                                     |

Documentation and other evidence reviewed:

- HRCC PAQ
- DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025
- HRCC Facility Handbook, dated September 2024
- PREA Posters
- Memorandum of Understanding with the Abused Adult Resource Center (AARC), dated August 7, 2024

Interviews Conducted:

- Random Inmates
- Advocacy Center Staff

Site Review Observations

Findings:

115.53(a-c):

- DOCR 3C-04 states:
  - “Facility residents 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 listed below. In the event of sexual abuse, a trained behavioral health staff member will be available to provide support services. The facility shall enable reasonable communication between adults in custody and these organizations and agencies in as confidential manner as possible.
  - Staff shall inform facility residents prior to giving them access to outside victim advocates, 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.
  - The DOCR maintains or attempts to enter into memorandum of understanding or other agreements with community service providers able to provide facility residents with confidential emotional support services related to sexual abuse. The DOCR shall maintain copies of these agreements or documentation showing attempts to enter into such agreements.”
- The PREA poster for inmates was reviewed and it has a phone number for the local advocacy center as well as the address to write to Just Detention International (JDI).
- The PREA brochure which is provided to all residents upon arrival was reviewed and it has the PIN numbers to use to reach the emotional support line.

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|  | <ul style="list-style-type: none"> <li>• The MOU with AARC was reviewed and it shows they will provide safe and confidential emotional support, accompaniment, crisis intervention, information and referral to victims of sexual abuse in confinement as required by the PREA.</li> <li>• Site review observations: <ul style="list-style-type: none"> <li>◦ PREA signage was seen in the cottages that included information on how to call the local rape crisis center. The information was current accurate. The audit team tested the phones and we were able to call the rape crisis/emotional support line.</li> </ul> </li> <li>• Interview with an advocate from the rape crisis center: <ul style="list-style-type: none"> <li>◦ The auditor spoke with an advocate who answered the phone while on-site who verified they would provide emotional support services when called. Messages were left for another staff at the AARC but no return call has been received.</li> </ul> </li> <li>• Interviews with random inmates: <ul style="list-style-type: none"> <li>◦ The majority of random residents (all but 3) interviewed were aware of outside services available for sexual abuse if needed or knew that the information was on the posters or in the PREA pamphlet but may not have read them.</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.53 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| <b>115.54</b> | <b>Third-party reporting</b>                                                                                                                                                                                                                                                                                                                                                               |
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|               | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                       |
|               | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                  |
|               | Documentation reviewed: <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• Reporting information on the HDCR website</li> </ul> Site Review Observations <p>Findings:</p> 115.54(a): <ul style="list-style-type: none"> <li>• The agency website was reviewed and this auditor verified it contains reporting information for community members including the contact</li> </ul> |

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|  | <p>information for the PREA Compliance Manager for each facility and the PREA Coordinator.</p> <ul style="list-style-type: none"> <li>• Site review observations: <ul style="list-style-type: none"> <li>◦ During the site review the audit team observed PREA posters in various areas around the facility including PREA information was posted in the visiting room.</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.54 based upon analysis of all available evidence including the documentation provided and the site review.</p> |
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| <b>115.61</b> | <b>Staff and agency reporting duties</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|               | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|               | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• DOCR Policy 1C-03, Rules of Conduct, Dated July 31, 2025</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Random staff</li> <li>• Medical staff</li> <li>• Mental health staff</li> <li>• Warden</li> <li>• PREA Coordinator</li> </ul> <p>Site Review Observations</p> <p>Findings:</p> <p>115.61(a):</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 refers you to policy 1C-03.</li> <li>• DOCR 1C-03 states: <ul style="list-style-type: none"> <li>◦ “PREA Reporting Employees shall report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, within or outside the</li> </ul> </li> </ul> |

department; retaliation against adults in custody, juveniles, or employees who reported such an incident; and any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation.”

- Interviews with random staff:
  - Eighteen random staff were asked if they are required to report any knowledge, suspicion, or information regarding sexual abuse, sexual harassment, retaliation, or other information about sexual abuse or sexual harassment all answered yes.

115.61(b):

- DOCR 1C-03 states:
  - “Apart from reporting to designated supervisors or officials, employees may not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.”
- Interviews with random staff:
  - Eighteen random staff were asked if they are required to report any knowledge, suspicion, or information regarding sexual abuse, sexual harassment, retaliation, or other information about sexual abuse or sexual harassment all answered yes. They further stated that they knew to preserve the crime scene (if applicable), separate the victim and suspect and notify their supervisor.

115.61(c):

- Interviews with medical and mental health staff:
  - Two medical staff and two mental health clinicians were interviewed. They stated that the limitations of confidentiality are disclosed to the residents when they are admitted. They all also confirmed that they are required to report any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment.

115.61(d):

- As HRCC does not house offenders under the age of 18, this section would only apply to vulnerable adults. Since local law enforcement conducts all criminal investigations, they would be responsible for completing any necessary mandatory reports. North Dakota century code chapter 50-25.2 defines a vulnerable adult as any person 18 or older who has a substantial mental or functional impairment, and empowers the state to investigate abuse and provide protective services.
- Interview with the Warden:
  - The Warden stated they do not house anyone under the age of 18 but

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|  | <p>any allegations involving a vulnerable adult would be referred to outside law enforcement and mental health.</p> <ul style="list-style-type: none"> <li>• Interview with the PREA Coordinator: <ul style="list-style-type: none"> <li>◦ The PREA Coordinator stated that HRCC does not house any under 18 but for the youthful facility they would notify law enforcement.</li> </ul> </li> </ul> <p>115.61(e):</p> <ul style="list-style-type: none"> <li>• Interview with the Warden: <ul style="list-style-type: none"> <li>◦ The Warden confirmed that all incidents are reported to facility investigators by either herself or the PREA Compliance Manager.</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.61 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| 115.62 | Agency protection duties                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|        | <p><b>Auditor Discussion</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• PREA Coordinated Response Plan, Dated July 29, 2025</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Agency Head</li> <li>• Warden</li> <li>• Random staff</li> </ul> <p>Findings:</p> <p>115.62(a):</p> <ul style="list-style-type: none"> <li>• The HRCC PAQ reported that they have had no incidents in the past 12 months when the agency or facility determined that an inmate was subject to substantial risk of imminent sexual abuse.</li> </ul> |

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|  | <ul style="list-style-type: none"> <li>• DOCR 3C-04 refers you to the DOCR Coordinated Response plan.</li> <li>• The Coordinated Response plan outlines the steps staff are to take upon responding to an allegation of sexual abuse. <ul style="list-style-type: none"> <li>◦ It is recommended that the language from this standard be added to the response plan to ensure staff are aware it applies to imminent sexual abuse and not just after reported an act to have happened.</li> </ul> </li> <li>• Interview with the agency head <ul style="list-style-type: none"> <li>◦ The agency head stated that someone would stay with the resident and ensure they are safe. He stated they would not isolate them but would keep them separate from the perpetrator.</li> </ul> </li> <li>• Interview with the Warden: <ul style="list-style-type: none"> <li>◦ The Warden stated that they would review housing to ensure safety and investigate the claim.</li> </ul> </li> <li>• Interviews with random staff: <ul style="list-style-type: none"> <li>◦ Eighteen random staff were interviewed and stated they would notify their supervisor, keep the victim safe and review housing. They also stated this would be done as fast as possible/immediately.</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.62 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| 115.63 | Reporting to other confinement facilities                                                                                                                                                                                                                                                                                |
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|        | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                     |
|        | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                |
|        | Documentation reviewed: <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> </ul> Interviews Conducted: <ul style="list-style-type: none"> <li>• Agency Head</li> <li>• Warden</li> </ul> Findings: <p>115.63(a-b):</p> |

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|  | <ul style="list-style-type: none"> <li>• DOCR 3C-04 states: <ul style="list-style-type: none"> <li>◦ “Upon receiving an allegation that a facility resident was sexually abused while confined at another facility, the warden who received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.<br/>Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.”</li> </ul> </li> <li>• The HRCC PAQ reports that in the past 12 months, they have had no allegations received that an inmate was abused while confined at another facility.</li> </ul> <p>115.63(c-d):</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 states: <ul style="list-style-type: none"> <li>◦ “The DOCR shall document using the Risk Management Incident Report form 50508.</li> <li>◦ The DOCR director or warden who receives such notification shall ensure the allegation is investigated in accordance with this policy.”</li> </ul> </li> <li>• The HRCC PAQ reports that they have received no allegations of sexual abuse from other facilities in the past 12 months.</li> <li>• Interview with the Agency Head: <ul style="list-style-type: none"> <li>◦ He stated that if they receive an allegation from another agency they begin the same process as any other allegation. He recalled an allegation they investigated after receiving notification from a jail.</li> </ul> </li> <li>• Interview with the Warden: <ul style="list-style-type: none"> <li>◦ The Warden stated that HRCC would investigate to the best of their ability and confirmed they have not received any such notifications recently.</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.63 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| <b>115.64</b> | <b>Staff first responder duties</b>                                                  |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                 |
|               | <b>Auditor Discussion</b>                                                            |
|               | Documentation reviewed: <ul style="list-style-type: none"> <li>• HRCC PAQ</li> </ul> |

- DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025
- DOCR Policy 3A-12, Preservation of Physical Evidence, dated February 15, 2023
- DOCR Policy 1A-27, Investigations, Intelligence and Alleged Delinquencies, Dated January 1, 2025
- PREA Coordinated Response Plan, Dated July 29, 2025
- Adult PREA Allegation Investigation Checklist

#### Interviews Conducted:

- Random staff
- Inmates who reported sexual abuse

#### Site Review Observations

#### Findings:

##### 115.64(a):

- DOCR 3C-04 refers you to the DOCR Coordinated Response plan.
- The DOCR Coordinated Response plan states:
  - “The first staff member to respond to an allegation of sexual abuse shall complete the following duties in this order:
    - Separate the victim from the perpetrator.
    - Notify the shift supervisor of the alleged incident.
    - Preserve and protect any crime scene until appropriate steps can be taken to collect evidence.
    - If the alleged abuse occurred within the past 96 hours, request that the victim not take any action that could destroy physical evidence including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, eating, or drinking.
    - If the alleged abuse occurred within the past 96 hours, staff will ensure that the perpetrator does not take any actions that could destroy physical evidence, including, as appropriate washing, brushing teeth, changing clothes, urinating, defecating, smoking, eating or drinking.
    - Document actions taken.”
- DOCR 3A-12 outlines the procedures for obtaining and preserving physical evidence and DOCR 1A-27 covers the policies and procedures for conducting internal investigations.
- The HRCC PAQ reported that in the past 12 months, 2 allegations of sexual abuse were received and that none of those times were within a time period that still allowed for the collection of physical evidence.
- Interviews with inmates who reported sexual abuse:
  - One resident who had reported sexual abuse was interviewed and

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|  | <p>stated they felt staff responded quickly once the report was made.</p> <p>115.64(b):</p> <ul style="list-style-type: none"> <li>• The PREA Coordinated Response Plan provides information for any staff who is the first to respond to an allegation which would include non-security staff members and includes that they must notify the shift supervisor.</li> <li>• The HRCC PAQ reported that in the past 12 months, the number of times a non-security staff member was the first responder was zero.</li> <li>• Interviews with random staff: <ul style="list-style-type: none"> <li>◦ Eighteen random staff from across all shifts were asked what they would do if they were the first person to be alerted that an inmate has been the victim of sexual abuse and they stated they would separate the involved parties, secure the scene and contact a supervisor.</li> <li>◦ Thirteen of the eighteen random staff (72%) stated they would not allow the victim or the perpetrator to do any actions, such as showering or using the bathroom, that may destroy evidence.</li> <li>◦ As this standard requires staff to request that the alleged victim not take any actions that could destroy evidence rather than instruct them not to, corrective action is needed. Policy is accurate but it was noted in 115.31 that the refresher training states that "the individual involved should not" shower, wash etc. To resolve this the training can be updated or this information can be provided to staff via email to clarify. <ul style="list-style-type: none"> <li>■ Corrective action: The facility updated the training for the next training cycle in addition an email was sent to all staff by the PREA Compliance Manager regarding this information.</li> </ul> </li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.64 based upon analysis of all available evidence including the documentation provided, the site review, interviews conducted and corrective action completed.</p> |
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| <b>115.65</b> | <b>Coordinated response</b>                                                                 |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                        |
|               | <b>Auditor Discussion</b>                                                                   |
|               | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> </ul> |

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|  | <ul style="list-style-type: none"> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• PREA Coordinated Response Plan, Dated July 29, 2025</li> </ul> <p>Interviews Conducted:</p> <p>Warden</p> <p>Findings:</p> <p>115.65(a):</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 DOCR 3C-04 refers you to the DOCR Coordinated Response plan.</li> <li>• The DOCR Coordinated Response plan is agency wide <ul style="list-style-type: none"> <li>◦ The PREA Coordinated Response Plan includes: <ul style="list-style-type: none"> <li>■ General information and guidelines</li> <li>■ DOCR Coordinated Response Plan for Adult PREA Allegations</li> <li>■ DOCR Coordinated Response Plan for Juvenile PREA Allegations</li> <li>■ DOCR Investigative Plan for PREA Allegations</li> </ul> </li> </ul> </li> <li>• The DOCR coordinated response plan was reviewed and it includes all the standards requirements for staff first responders. It includes actions for first responders to take for incident of sexual abuse. The steps include notifying the facility Warden and PREA Compliance Manager, separating the inmate from the alleged perpetrator, notifying medical and mental health staff, requesting the victim not take any actions to destroy evidence and notifying investigators.</li> <li>• Although the response plan covers all these standards requirements, it is not facility specific which is required so corrective action is needed to develop a facility specific plan. <ul style="list-style-type: none"> <li>◦ Corrective action: HRCC provided a “PREA Allegation Investigation Checklist” that includes the items needed for this standard including first responder responsibilities.</li> </ul> </li> <li>• Interview with the Warden: <ul style="list-style-type: none"> <li>◦ She stated that yes, HRCC has a coordinated action plan for response to an incident of sexual abuse in policy.</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.65 based upon analysis of all available evidence including the documentation provided, the site review, interviews conducted and corrective action completed.</p> |
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| <b>115.66</b> | <b>Preservation of ability to protect inmates from contact with abusers</b> |
|               | <b>Auditor Overall Determination:</b> Meets Standard                        |

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|  | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|  | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Agency Head</li> </ul> <p>Findings:</p> <p>115.66(a):</p> <ul style="list-style-type: none"> <li>• The HRCC PAQ reports that the agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has entered into or renewed any collective bargaining agreements.</li> <li>• DOCR 3C-04 states: <ul style="list-style-type: none"> <li>◦ "Standard § 115.66 does not apply to North Dakota since there are no collective bargaining agreements. North Dakota is a right to work state."</li> </ul> </li> <li>• Interview with the Agency Head: <ul style="list-style-type: none"> <li>◦ He verified that there is no union or collective bargaining for the North Dakota Department of Corrections and Rehabilitation.</li> </ul> </li> </ul> <p>115.66(b): Auditor is not required to audit this provision.</p> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.66 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |

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| <b>115.67</b> | <b>Agency protection against retaliation</b>                                                                                                                                      |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                              |
|               | <b>Auditor Discussion</b>                                                                                                                                                         |
|               | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March</li> </ul> |

7, 2025

- PREA Coordinated Response Plan, Dated July 29, 2025.
- Completed Retaliation Monitoring Forms

Interviews Conducted:

- Agency Head
- Warden
- Designated staff members charged with monitoring retaliation
- Inmates who reported sexual abuse

Findings:

115.67(a-e):

- The HRCC PAQ reported that no incidents of retaliation have occurred in the past 12 months and that the monitor is the PREA Compliance Manager.
- DOCR 3C-04 states:
  - “The department PREA compliance manager at each department facility protects all facility residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other facility residents, or staff. Refer to the DOCR Coordinated Response Plan.”
- The PREA Coordinated Response plan states:
  - “Starting the date an allegation is made, the facility PREA compliance manager is responsible for ensuring all resident and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations are protected from retaliation by other residents or staff.
  - For reports of sexual abuse, the DOCR PREA compliance manager will ensure monitoring continues and appropriate protection measures are available for at least 90 days following a report of sexual abuse. This monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need. The DOCR’s obligation to monitor expires if the investigation determines that the allegation is unfounded.
  - Monitoring must include the following:
    - For adults in custody: review of disciplinary reports, housing changes, program changes, changes in privileges, and monthly in-person status checks documented in case notes in ELITE.
    - For employees: review of disciplinary action, performance reviews, and reassignments.
  - If the PREA compliance manager finds indications of retaliation, they shall act promptly to remedy any such retaliation. If any other individual who cooperates with an investigation expresses a fear of retaliation, the warden and PREA compliance manager shall take appropriate measures to protect that individual against retaliation.

Protection measures may include

- Housing changes or transfers for victims or perpetrators;
  - Voluntary protective custody;
  - Short-term use of involuntary protective custody (in accordance with process outlined in the Protective Custody section of this plan);
  - Removal of perpetrator from contact with victim; and
  - Emotional support services for adults in custody who experience fear retaliation.”
- The ND DOCR PREA Retaliation Monitoring Data Sheet includes information on what to monitor for including disciplinary reports, housing changes, program changes, performance evaluation, staff reassignments and face-to-face contact.
  - Completed monitoring forms were reviewed for the selected abuse cases and they show the date of initial contact as well as 30 days, 60 days and 90 days reviews. One resident was transferred before 90 days.
  - Interview with the Agency Head:
    - When asked how he protects inmates and staff from retaliation he stated that monitoring is conducted and they can look at moving the staff or resident when needed. They ensure communication and take the time to understand each situation including staying trauma informed for both staff and residents. He stated he has not seen anyone express fear of retaliation but if someone does they would ensure services are provided and that they are physically and psychologically safe.
  - Interview with the Warden:
    - The Warden stated that the PREA Compliance Manager conducts the retaliation monitoring including meeting with the victims regularly for at least 90 days.
  - Interview with the designated staff member charged with retaliation monitoring:
    - The retaliation monitor stated that she monitors all residents who report sexual abuse for at least 90 days. She meets with the victim face-to-face once a month and also reviews reports, shift briefings and any housing changes. Her office is in one of the cottages so she sees all residents regularly. To protect residents they may restrict the aggressor to only allow access to specific dayrooms or showers and sets clear expectations with them. She confirmed there is no maximum time she would monitor someone if there was a concern of potential retaliation.

115.67(f): Auditor is not required to audit this provision.

The auditor finds the agency/facility in full compliance with PREA Provision §115.67 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.

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| <b>115.68</b> | <b>Post-allegation protective custody</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|               | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|               | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• DOCR Policy 3A-18, Segregation, Dated October 27, 2023</li> <li>• DOCR Policy 5A-17, Adult in Custody Separation, Dated March 8, 2023</li> <li>• PREA Coordinated Response Plan, Dated July 29, 2025</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Warden</li> <li>• Staff who supervise inmates in segregated housing</li> </ul> <p>Site Review Observations</p> <p>Findings:</p> <p>115.68(a):</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 refers you to policy 5A-17, 3A-18 and the DOCR Coordinated Response plan.</li> <li>• DOCR 3A-18 states: <ul style="list-style-type: none"> <li>◦ "Generally, adults in custody who require separation and protective custody should not be placed in restrictive housing.</li> <li>◦ Adults in custody are admitted and placed on protective custody status only when there is documentation that protective custody is warranted, and no other reasonable options are available. The chief of security is responsible for ensuring a full investigation is completed on all protective custody requests made by adults in custody or staff. In emergent cases, the shift supervisor may place an adult in custody in the segregation unit until the case is reviewed by the warden."</li> </ul> </li> <li>• It is recommended that more specific language related to these standards requirements is added to policy.</li> <li>• In the site review it was noted that HRCC does not have a segregation unit. There are a couple of cells/rooms where someone may stay if they need to be isolated but all staff stated they are mainly used when medical needs require</li> </ul> |

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|  | <p>someone to be by themselves and are not used as punishment or segregation.</p> <ul style="list-style-type: none"><li>• The Coordinated PREA Response Plan states:<ul style="list-style-type: none"><li>◦ “Adults in custody at high-risk for sexual victimization may not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made there is no available alternative means of separation from likely abusers. If an assessment cannot be completed immediately, the adult in custody may be held in involuntary segregated housing for less than 24 hours while assigned staff completes the assessment. If an involuntary segregated housing assignment is made, the case manager shall clearly document in ELITE the basis for the concern for the person’s safety and the reason why no alternative means of separation can be arranged.”</li></ul></li><li>• DOCR 5A-17 outlines the system to identify and determine the need for separation of adults in custody for select facilities, including HRCC.</li><li>• The HRCC PAQ reported that there have been no incidents in the past 12 months where an inmate who alleged to have suffered sexual abuse was held in involuntary segregated housing.</li><li>• Interview with the Warden:<ul style="list-style-type: none"><li>◦ She stated that victims would not be placed in segregation and they would look at isolating or moving the perpetrator if needed. They try to change as little as possible for the victim. She stated that victims would never be placed in segregation.</li></ul></li><li>• Staff who supervise inmates in segregated housing:<ul style="list-style-type: none"><li>◦ A staff member who supervises the cottage where the segregation cells are located stated that they have never seen them used for a victim. She stated that the residents in those cells are still allowed access to their normal programs, privileges, education and work activities unless they are there as a perpetrator pending investigation. She stated that each resident would be reviewed individually to determine what placement is best for them but has not ever seen a victim placed there.</li></ul></li><li>• There were no inmates in segregated housing for risk of sexual victimization or who have alleged to have suffered sexual abuse so no targeted interviews were able to be completed for this category.</li></ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.68 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation reviewed:

- HRCC PAQ
- DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025
- DOCR Policy 1A-09, Internal Investigations, Dated November 25, 2024
- DOCR Policy 1A-27, Investigations, Intelligence and Alleged Delinquencies, Dated January 1, 2025
- PREA Coordinated Response Plan, Dated July 29, 2025
- Investigation files

Interviews Conducted:

- Investigative staff
- Warden
- PREA Coordinator
- PREA Compliance Manager
- Inmates who reported sexual abuse

Site Review Observations

Findings:

115.71(a):

- DOCR 3C-04 refers you to the DOCR Coordinated Response Plan; Policy 1A-27, Investigations, Intelligence, and Alleged Delinquencies; Policy 1A-09, Internal Investigations; Policy 3A-12, Preservation of Physical Evidence; N.D.C.C. § 12-59-20, Probation and parole officers as peace officers; N.D.C.C. § 39-03-09, Powers of Highway Patrol.
- DOCR 1A-09 provides procedures for the receipt, investigation, and response of determination for complaints received by the agency from any person or employee.
- DOCR 1A-27 states:
  - The department will have policy and procedures for conducting internal investigations, including administrative and criminal investigations. It is the purpose of this policy to provide department investigators and employees with guidelines and principles for the investigation of violations of DOCR policies and procedures and for the collection, analysis, and dissemination of criminal intelligence and investigative information, the enforcement and investigation of violations of criminal laws, the preservation of evidence, and the prevention of criminal activity on department property.

- The PREA Coordinated Response Plan includes the section title “DOCR Investigative plan for PREA Allegations” which covers all steps for administrative investigations as well as information on criminal investigations.
  - It states “The DOCR is responsible for conducting administrative investigations into allegations of sexual abuse. The DOCR shall identify a PREA Investigator, who shall initiate a thorough and objective investigation for all allegations within 24 hours or as circumstances dictate.”
- Interviews with investigative staff:
  - Two administrative investigators were interviewed. Both stated that they initiate the investigation immediately and that reports from a third party or anonymous reports would be handled the same way and taken seriously.

115.71(b):

- The PREA Coordinated Response Plan states:
  - “PREA Investigators shall gather and preserve direct and circumstantial evidence, including available physical and DNA evidence and available electronic monitoring data; shall interview victims, perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.”
- Interviews with investigative staff:
  - The administrative investigators stated that they did receive training including how to work with victims and evidence collection in confinement settings among many topics.

115.71(c-g,i):

- The PREA Coordinated Response Plan states:
  - “PREA Investigators shall assess the credibility of victims, perpetrators, and witnesses on an individual basis and not by the person’s status as adult in custody/juvenile or staff. The DOCR may not require a person who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.
  - Administrative investigations must include an effort to determine whether staff actions or failures to act contributed to the abuse. The administrative written report must include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. The DOCR may not terminate the investigation based on the discharge or termination of employment of the perpetrator or victim.”
  - It further states “The DOCR shall retain all administrative and criminal written reports referenced for as long as the perpetrator is incarcerated or employed by the agency, plus five years or, for

sexually dangerous individuals for twenty-five years, in accordance with NDCC Section 25-03.3-04.”

- Interviews with investigative staff:
  - The investigators walked the auditors through their investigation process which included gathering physical evidence or preserving the crime scene, separating the victim and perpetrator, notifying medical and mental health and reviewing housing. They both stated they would interview all involved parties including the victim and perpetrator and review camera footage when applicable. They stated they would not require a victim to submit to a polygraph or other truth-telling device as a condition of proceeding with the investigation. They both stated all the information they find is included in their reports.
- Interviews with inmates who reported sexual abuse:
  - One resident who reported sexual abuse was interviewed. She stated they were not asked to take a polygraph.
- Site review observations:
  - No paper investigation files were observed during the site review; all documents were stored electronically or in a secured area.

115.71(h):

- The PREA Coordinated Response Plan states:
  - “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. Substantiated allegations of conduct that appears to be criminal must be referred for prosecution.”
- The HRCC PAQ reported that one case was referred to the Highway Patrol since the last audit.
- Interviews with investigative staff:
  - The investigators stated that any referral for prosecution would be done by outside law enforcement.

115.71(j):

- Interview with the investigator:
  - Both administrative investigators stated that they would do their best to continue the investigation if a staff member terminates employment prior to the investigation being completed or if a victim leaves the facility during the investigation.

115.71(k):

Auditor is not required to audit this provision.

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|  | <p>115.71(l):</p> <ul style="list-style-type: none"> <li>• Interview with the Warden: <ul style="list-style-type: none"> <li>◦ The Warden stated that Highway Patrol would be contacted for any case involving staff as suspects or criminal behavior by residents. The PREA Compliance Manager remains in contact with the trooper on any PREA cases.</li> </ul> </li> <li>• Interview with the PREA Coordinator: <ul style="list-style-type: none"> <li>◦ He stated that they would work closely with the Highway Patrol troopers and mainly the PREA Compliance Manager keeps in contact with them.</li> </ul> </li> <li>• Interview with the PREA Compliance Manager: <ul style="list-style-type: none"> <li>◦ She stated that they keep in touch with the Highway Patrol Trooper as needed.</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.71 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| <b>115.72</b> | <b>Evidentiary standard for administrative investigations</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|               | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|               | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• PREA Coordinated Response Plan, Dated July 29, 2025</li> <li>• Investigations files</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Investigative staff</li> </ul> <p>Findings:</p> <p>115.72(a):</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 refers you to the DOCR Coordinated Response Plan.</li> <li>• The PREA Coordinated Response Plan states:</li> </ul> |

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|  | <ul style="list-style-type: none"> <li>◦ “For each allegation investigated under PREA, the PREA investigator shall make a final determination on whether the allegation is substantiated, unsubstantiated, or unfounded. The allegation will be considered substantiated if a preponderance (more than 50 percent) of the credible evidence supports this finding. If the investigation produced insufficient evidence to make a final determination as to whether the incident occurred, it will be considered unsubstantiated. If the investigation determines that the incident did not occur, the allegation will be considered unfounded. If the investigation reveals a resident made a false allegation in bad faith, disciplinary action may be imposed.”</li> <li>• Interview with investigative staff: <ul style="list-style-type: none"> <li>◦ The investigators stated that for this determination they use preponderance of the evidence (50%) as the standard.</li> </ul> </li> <li>• The four cases reviewed all were unsubstantiated. Those determined unsubstantiated were primarily due to no collaborating evidence, most incidents happened in rooms/cells or restrooms, had no physical evidence with no witnesses or video evidence available which supports the finding of unsubstantiated.</li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.72 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| 115.73 | Reporting to inmates                                                                                                                                                                                                                                                                                                                                                                                  |
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|        | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                  |
|        | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                             |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• PREA Coordinated Response Plan, Dated July 29, 2025</li> <li>• Investigations files-victim notifications</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Warden</li> </ul> |

- Investigative staff
- Inmates who reported sexual abuse

Findings:

115.73(a-b):

- The HRCC PAQ reported that 4 administrative and/or criminal investigations of alleged sexual abuse and sexual harassment were initiated and that all alleged victims were given notification of the results of the investigation. They further reported that no investigations were completed by an outside agency in the past 12 months.
- DOCR 3C-04 refers you to the DOCR Coordinated Response plan.
- The PREA Coordinated Response Plan states:
  - “Following an investigation, the PREA investigator or a staff member designated by the PREA investigator will inform the victim verbally whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The investigator or designated representative will deliver in person the Notice of Prison Rape Elimination Act (PREA) Investigation Status which will require a signature of the victim. If the victim refuses to sign the findings form, the investigator or designated representative will document the refusal and have a staff member witness and sign the refusal.
  - If the resident is released from custody, the DOCR’s obligation to complete the notifications is terminated. If the investigation is conducted by the North Dakota Highway Patrol or another external investigative entity, the DOCR investigator shall request the relevant information in order to complete the Notice of Prison Rape Elimination Act (PREA) Investigation Status form. After the initial notification, if the DOCR learns of additional information such as the perpetrator being criminally charged or convicted, another notification utilizing the Notice of Prison Rape Elimination Act (PREA) Investigation Status shall be completed.”
- The Notice of Prison Rape Elimination Act (PREA) Investigation Status form is used to notify victims of the results of an investigation, the status of a criminal case or the employment status/location of the alleged staff abuser. It includes the signatures of the staff member providing the notification as well as the victim's signature.
- Interview with the Warden:
  - The Warden stated that the victims receive notification following an investigation and that she reviews all completed investigations and notification forms.
- Interview with investigative staff:
  - The investigators said that notification is given to each victim with the outcome and that each resident signs for the notification.
- Interviews with inmates who reported sexual abuse:

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|  | <ul style="list-style-type: none"> <li>◦ The one resident who reported sexual abuse who was still at HRCC verified she was informed of the outcome of the investigation.</li> </ul> <p>115.73(c-e):</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 states: <ul style="list-style-type: none"> <li>◦ “If there has been a substantiated or unsubstantiated complaint of sexual abuse committed by a staff member against a facility resident the agency must subsequently inform the facility resident whenever: <ul style="list-style-type: none"> <li>■ The staff member is no longer posted within the facility resident’s unit;</li> <li>■ The staff member is no longer employed at the facility;</li> <li>■ The DOCR learns that the staff member has been charged or convicted on an offense related to sexual abuse within the facility.</li> </ul> </li> <li>◦ All notifications or attempted notifications of the final determination of the allegation is documented and stored in the PREA drive.”</li> </ul> </li> <li>• The HRCC PAQ reported that there have been four notifications provided in the past 12 months and that they all have been documented. All four notifications were provided and reviewed and it is noted that HRCC notifies on both sexual abuse and sexual harassment cases.</li> </ul> <p>115.73(f): Auditor is not required to audit this provision.</p> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.73 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| <b>115.76</b> | <b>Disciplinary sanctions for staff</b>                                                                                                                                                                                                                                                                                                                                                                                      |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                         |
|               | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                    |
|               | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQDOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• DOCR Policy 1C-08, Sexual Harassment, Hostile Work Environment, Workplace Threats and Violence, Dated May 21, 2025</li> <li>• DOCR Policy 1A-09, Internal Investigations, Dated November 25, 2024</li> <li>• NDCR Employee Handbook</li> </ul> |

Findings:

115.76(a):

- Policies DOCR 1C-08, 3C-04, 1A-09 and the employee handbook outline the investigative process and disciplinary sanctions for violations of DOCR policies relating to sexual abuse or sexual harassment.

115.76(b):

- The HRCC PAQ reported that they have had no incidents in the past 12 months where staff have violated agency sexual abuse or sexual harassment policies.
- DOCR 1C-08 states:
  - “The department prohibits all forms of harassment, including sexual harassment. Harassment may include any activity that creates fear, intimidates, ostracizes, psychologically or physically threatens, embarrasses, ridicules, or in some other way unreasonably over burdens or precludes an employee from reasonably performing the employee’s work. Employees of the department, agents of the department, contractors and vendors working for the department who violate this policy will be subject to disciplinary action up to and including dismissal and termination of services.”
- As there were no staff who were reported to have violated agency sexual abuse or sexual harassment policies in the last 12 months there were no records to review. The list of investigations were reviewed and verified no cases involved staff suspects.

115.76(c):

- DOCR 3C-04 states:
  - “Disciplinary sanctions for violations of DOCR policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) must be commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.”

115.76(d):

- DOCR 3C-04 states:
  - “All terminations for violations of DOCR sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.”

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|  | The auditor finds the agency/facility in full compliance with PREA Provision §115.76 based upon analysis of all available evidence including the documentation provided. |
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| 115.77 | Corrective action for contractors and volunteers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|        | <p><b>Auditor Discussion</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Warden</li> </ul> <p>Findings:</p> <p>115.77(a-b):</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 states: <ul style="list-style-type: none"> <li>◦ “Any contractor or volunteer who engages in sexual abuse is prohibited from contact with the facility residents from the time of initial allegation through the investigation. Disciplinary measures for any contractor or volunteer who has been found to have engaged in sexual abuse or sexual harassment will be commensurate with disciplinary measures used with facility staff for similar offenses.”</li> </ul> </li> <li>• The HRCC PAQ reported that there have been no incidents in which a contractor or volunteer were reported to law enforcement agencies or relevant licensing bodies.</li> <li>• There were no investigations or complaints regarding any contractors or volunteers in the past 12 months so there were no investigations to review.</li> <li>• Interview with the Warden: <ul style="list-style-type: none"> <li>◦ The Warden verified there have been no PREA related incidents involving volunteers or contractors in the past 12 months at HRCC and if one were to occur it would be fully investigated and that they would not be allowed on property until the investigation is complete.</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.77 based upon analysis of all available evidence including the documentation provided</p> |

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|  | and interviews conducted. |
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| <b>115.78</b> | <b>Disciplinary sanctions for inmates</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|               | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|               | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• HRCC Facility Handbook, Dated September 2024</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Warden</li> <li>• Mental health staff</li> </ul> <p>Findings:</p> <p>115.78(a):</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 states: <ul style="list-style-type: none"> <li>◦ “In the event a disciplinary sanction for facility resident-on-facility resident sexual abuse results in the isolation of a facility resident, the facility policy requires that facility residents in isolation have daily access to large muscle exercise, legally required educational programming, and special education services. In the event a disciplinary sanction for facility resident-on-facility residents sexual abuse results in the isolation of a facility resident, facility residents in isolation receive daily visits from a medical or mental health care clinician. In the event a disciplinary sanction for facility resident-on-facility resident sexual abuse results in the isolation of a facility resident, facility residents in isolation have access to other programs and work opportunities to the extent possible.</li> <li>◦ For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred may not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</li> <li>◦ If the agency prohibits all sexual activity between facility residents and</li> </ul> </li> </ul> |

disciplines facility residents for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.”

- The facility handbook for residents goes into detail into all of the disciplinary actions which include sexual harassment, sexual contact and indecent exposure.
- The HRCC PAQ reported that in the past 12 months, there have been no administrative findings of inmate-on-inmate sexual abuse and no criminal findings of guilt for inmate-on-inmate sexual abuse

115.78(b-c):

- Interview with the Warden:
  - She stated that the perpetrator could be placed in segregation, disciplined, moved and face possible criminal charges.

115.78(d):

- DOCR 4F-10 states:
  - “The Department shall provide services to adults and juveniles at all of its facilities that target the disruption of “criminal thinking” and ultimately the reduction of criminal recidivism. Such services are supported by Evidence Based Practices. (4-ACRS-5A-02) Behavioral Health Services team members shall provide quality services in an environment that fosters respect, growth, and opportunity for change while assisting with community integration and reducing recidivism.”
- The Individual Services Guidelines outline the difference between individual therapy and check ins.
- Interviews with mental health staff:
  - Mental health staff was interviewed and stated that HRCC would consider offering services, including coping skills, to the perpetrator.

115.78(e):

- The facility handbook states:
  - “Assault and battery on staff” includes an attack upon a volunteer, employee, officer, or official of the ND DOCR, and includes sexual assault, causing mental or bodily injury, or causing offensive contact”

115.78(f):

- DOCR 3C-04 states:
  - “For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred may not constitute falsely reporting an incident or lying, even

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|  | <p>if an investigation does not establish evidence sufficient to substantiate the allegation.”</p> <p>115.78(g):</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 states: <ul style="list-style-type: none"> <li>◦ “If the agency prohibits all sexual activity between facility residents and disciplines facility residents for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.”</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.78 based upon analysis of all available evidence including the documentation provided and interviews conducted.</p> |
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| 115.81 | Medical and mental health screenings; history of sexual abuse                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
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|        | <p><b>Auditor Overall Determination:</b> Meets Standard</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|        | <p><b>Auditor Discussion</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• DOCR Policy 4F-10, Sex Offender Assessment and Treatment Programming (SOTP), Dated January 27, 2023</li> <li>• NDCR Informed Consent-Confidentialty Notice form</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Inmates who Disclose Sexual Victimization at Risk Screening</li> <li>• Staff Responsible for Risk Screening</li> <li>• Medical Staff and mental health staff</li> </ul> <p>Site Review Observations</p> <p>Findings:</p> <p>115.81(a-c):</p> <ul style="list-style-type: none"> <li>• The HRCC PAQ reported that all residents that transfer from DWCR meet with</li> </ul> |

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
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|  | <p>mental health and medical within three business days of their arrival and that PREA transfer screening is done on every resident within one hour of arrival.</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 refers you to Policy 4F-10, Sex Offender Assessment and Treatment Programming (SOTP); Policy 1E-01, Open Records Requests, Confidentiality, and Release of Information.</li> <li>• Site review observations: <ul style="list-style-type: none"> <li>◦ During the site review the audit team observed that most records are kept electronically or in locked cabinets.</li> </ul> </li> <li>• Interviews with inmates who disclosed victimization during risk screening: <ul style="list-style-type: none"> <li>◦ Five residents were interviewed who disclosed victimization during risk screening and four stated they were offered a referral to medical or mental health.</li> </ul> </li> <li>• Interviews of staff responsible for risk screening: <ul style="list-style-type: none"> <li>◦ Two staff members who completed the screening were interviewed, one who does the initial 72 hour screening and one who does the 30 day follow up. One stated they would offer a referral to medical or mental health the same day as the screening.</li> </ul> </li> </ul> <p>115.81(d):</p> <ul style="list-style-type: none"> <li>• During the site review security staff were asked if they had access to medical or mental health records and all stated they did not.</li> </ul> <p>115.81(e):</p> <ul style="list-style-type: none"> <li>• The informed consent form for the division of adult services was reviewed and it includes that “records and information collected about me will be held or released in accordance with state and federal laws regarding confidentiality of such records and information.”</li> <li>• Interviews with medical and mental health staff: <ul style="list-style-type: none"> <li>◦ Medical staff and mental health staff were interviewed and they confirmed that HRCC does not hold inmates under the age of 18 and that they would get informed consent before reporting about prior victimization that did not occur in an institutional setting.</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.81 based upon analysis of all available evidence including the documentation provided and interviews conducted.</p> |
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| <b>115.82</b> | <b>Access to emergency medical and mental health services</b> |
|               | <b>Auditor Overall Determination:</b> Meets Standard          |

## Auditor Discussion

### Documentation reviewed:

- HRCC PAQ
- DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025
- PREA Coordinated Response Plan, Dated July 29, 2025

### Interviews Conducted:

- Medical and mental health staff
- Inmates who reported sexual abuse

### Site Review Observations

### Findings:

#### 115.82(a-b):

- DOCR 3C-04 states:
  - “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.”
- The PREA Coordinated Response Plan outlines steps for notifying medical staff when appropriate and the steps medical staff are to follow when notified. Steps for behavioral health practitioners are provided as well.
- Interviews with medical and mental health staff:
  - Two medical staff and two mental health staff were interviewed and stated that inmates receive timely and unimpeded access to emergency medical treatment and crisis intervention services. They stated that during business hours they would be seen right away and after hours there is on-call staff who could be contacted to evaluate the situation. They confirmed that the nature and scope of services provided are determined by their professional judgement and training.
- Interviews with Inmates who reported sexual abuse:
  - One resident who reported sexual abuse at HRCC were interviewed and she stated they either saw someone in medical or mental health.

#### 115.82(c):

- The PREA Coordinated Response plan states:
  - “Ensure sexual transmitted disease (STD) testing has occurred and prophylactic treatment is completed.
  - Ensure pre- and post- human immunodeficiency virus (HIV) counseling

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|  | <p>has been conducted.</p> <ul style="list-style-type: none"> <li>◦ Ensure all victims of sexually abusive penetration are offered pregnancy testing, if applicable.</li> <li>◦ If pregnancy results from the conduct above, provide the victim with timely and comprehensive information and timely access to all lawful pregnancy related medical services.</li> <li>◦ Ensure follow-up infectious disease testing is completed and that infectious disease testing is completed on the abuser if the allegation is substantiated or unsubstantiated.”</li> </ul> <ul style="list-style-type: none"> <li>• Interviews with medical staff: <ul style="list-style-type: none"> <li>◦ The medical staff interviewed stated that victims of sexual abuse would be offered timely information about access to sexually transmitted infection, including HIV prophylaxis either at the hospital if transported or at the facility after consultation with the provider.</li> </ul> </li> <li>• Interviews with Inmates who reported sexual abuse: <ul style="list-style-type: none"> <li>◦ Based on the nature of the incident the resident interviewed stated STI prophylaxis was not needed.</li> </ul> </li> </ul> <p>115.82(d):</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 states: <ul style="list-style-type: none"> <li>◦ “Access to Emergency Medical and Behavioral Health Services. Refer to the DOCR Coordinated Response Plan. 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.”</li> </ul> </li> <li>• PREA Coordinated Response plan states: <ul style="list-style-type: none"> <li>◦ “Forensic medical examinations are offered without financial cost to the victim.”</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.82 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| <b>115.83</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b> |
|               | <b>Auditor Overall Determination:</b> Meets Standard                               |
|               | <b>Auditor Discussion</b>                                                          |
|               | Documentation reviewed:                                                            |

- HRCC PAQ
- DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025
- DOCR Policy 4F-10, Sex Offender Assessment and Treatment Programming (SOTP), Dated January 27, 2023
- PREA Coordinated Response Plan, Dated July 29, 2025

Interviews Conducted:

- Medical and mental health staff

Site Review Observations

Findings:

115.83(a-b):

- DOCR 3C-04 DOCR 3C-04 refers you to the DOCR Coordinated Response plan.
- The PREA Coordinated Response plan outlines the response for both medical staff and behavioral health practitioners in response to sexual abuse and sexual harassment.
- Interviews with medical staff:
  - Medical staff and mental health staff detailed what the evaluation and treatment of offenders who have been victimized would entail including providing any necessary medications, treating any urgent needs, preserving evidence, requesting the victim not destroy evidence, offering counseling and inviting them to appropriate classes and groups.

115.83(c, g):

- Interviews with medical and mental health staff:
  - All staff interviewed stated they feel that the medical and mental health services offered are consistent with community level of care.

115.83(d):

- The PREA Coordinated Response plan states:
  - “Ensure all victims of sexually abusive penetration are offered pregnancy testing, if applicable.”

115.83(e):

- The PREA Coordinated Response plan states:
  - “If pregnancy results from the conduct above, provide the victim with

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|  | <p>timely and comprehensive information and timely access to all lawful pregnancy related medical services.”</p> <ul style="list-style-type: none"> <li>Interviews with medical staff: <ul style="list-style-type: none"> <li>Medical staff confirmed that if sexual abuse results in pregnancy victims would be given information and access to all lawful pregnancy-related services after discussion with the provider.</li> </ul> </li> </ul> <p>115.83(f):</p> <ul style="list-style-type: none"> <li>The PREA Coordinated Response plan states: <ul style="list-style-type: none"> <li>“Ensure follow-up infectious disease testing is completed and that infectious disease testing is completed on the abuser if the allegation is substantiated or unsubstantiated.”</li> </ul> </li> </ul> <p>115.83(h):</p> <ul style="list-style-type: none"> <li>DOCR 4F-10 states: <ul style="list-style-type: none"> <li>“The Department shall provide services to adults and juveniles at all of its facilities that target the disruption of “criminal thinking” and ultimately the reduction of criminal recidivism. Such services are supported by Evidence Based Practices. (4-ACRS-5A-02) Behavioral Health Services team members shall provide quality services in an environment that fosters respect, growth, and opportunity for change while assisting with community integration and reducing recidivism.”</li> </ul> </li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.83 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |
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| 115.86 | Sexual abuse incident reviews                                                                                                                                                                                                                               |
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|        | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                        |
|        | <b>Auditor Discussion</b>                                                                                                                                                                                                                                   |
|        | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>HRCC PAQ</li> <li>DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>Sexual Abuse Review Team Report-Blank and completed examples</li> </ul> |

Interviews Conducted:

- Warden
- PREA Compliance Manager
- Incident Review team

Site Review Observations

Findings:

115.86(a-c):

- The HRCC PAQ reported that there were two criminal and/or administrative investigations of alleged sexual abuse completed at the facility during the review period.
- DOCR 3C-04 states:
  - “The facility shall conduct a sexual abuse incident review pursuant to PREA Standard 115.87 at the conclusion of every sexual abuse investigation, including when the allegation has not been substantiated, unless the allegation has been determined to be unfounded.
  - The review shall ordinarily occur within 30 days of the conclusion of the investigation. The review team may include PREA Coordinator, facility PREA Compliance Manager, behavioral health staff, investigator, and assigned facility staff. The results of the review will be provided to the warden.
  - Refer to the PREA Investigation Checklist and investigation files.
- Two Incident review reports were received that were conducted in the past 12 months. They were conducted within the required 30 days after the investigation was closed and included management staff, supervisory staff, investigators and medical/mental health staff.
- Interview with the Warden:
  - The Warden said that HRCC does have an incident review team and that it includes medical and mental health staff, the deputy Warden/ PREA Compliance Manager, investigators and herself.

115.86(d-e):

- The SAIR report template was reviewed and verified it covers all elements of this standard.
- Interview with the Warden:
  - The Warden said that the review team looks at all the items on the review form and the entire investigation packet. The information is then sent to the agency PREA Coordinator.
- Interview with the PREA Compliance Manager:
  - The PCM verified they conduct incident reviews and that she is part of

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|  | <p>them, including she authors the reports. The team reviews staffing levels and if staff are moving around/dynamic security.</p> <ul style="list-style-type: none"> <li>• Interview with a member of the incident review team: <ul style="list-style-type: none"> <li>◦ The incident review team member was interviewed and reported that they review all required factors including what may have motivated the incident, review the area where it happened and assess if any changes are needed, They also review staffing at the time of the incident.</li> </ul> </li> <li>• Per the DOJ memo titled "National PREA Standards Alignment with Executive Order 14168" dated December 2, 2025 this auditor is not auditing the following section: 115.86(d)(2).</li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.86 based upon analysis of all available evidence including the documentation provided and interviews conducted.</p> |
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| 115.87 Data collection |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
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|                        | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                        | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|                        | <p>Documentation reviewed:</p> <p>HRCC PAQ<br/> DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025<br/> Agency Annual PREA Report, 2025</p> <p>Findings:</p> <p>115.87(a-f):</p> <ul style="list-style-type: none"> <li>• DOCR 3C-04 states: <ul style="list-style-type: none"> <li>◦ “The department shall conduct accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. (115.87(a))/(c)-1) The department utilizes the Department of Justice, Bureau of Justice Statistics form SSV-2, Survey of Sexual Violence for State Prison Systems, as well as collecting the information within the state’s Risk Management Incident Reporting Data System. This information is forwarded to the Department of Justice upon request.</li> <li>◦ The Department PREA Coordinator shall aggregate incident-based</li> </ul> </li> </ul> |

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|  | <p>sexual abuse data at least annually.</p> <ul style="list-style-type: none"> <li>◦ The department contract managers obtain incident-based and aggregated data from every contract facility with which it contracts for the confinement of its facility residents.”</li> <li>• The auditor reviewed the agency's website and it includes the PREA annual reports from 2015-2025. In addition the website has links to the contracted facilities. <ul style="list-style-type: none"> <li>◦ Per the PREA Coordinator the SSV is submitted electronically and a copy was not provided or available. It is recommended that the SSV reports submitted are requested and maintained by the agency and ensure the definitions listed on the NDCR website include the data necessary to answer all questions from the most recent version of the survey of sexual victimization.</li> </ul> </li> <li>• The contracts with private facilities were reviewed and it states that each facility will compile incident data and aggregate data and provide that data to DOCR on an annual basis.</li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.87 based upon analysis of all available evidence including the documentation provided and interviews conducted.</p> |
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| <b>115.88</b> | <b>Data review for corrective action</b>                                                                                                                                                                                                                                                                                                                                                                              |
|               | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                  |
|               | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                             |
|               | <p>Documentation reviewed:</p> <ul style="list-style-type: none"> <li>• HRCC PAQ</li> <li>• DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025</li> <li>• PREA Annual Report, 2025</li> <li>• Agency Website</li> </ul> <p>Interviews Conducted:</p> <ul style="list-style-type: none"> <li>• Agency Head</li> <li>• PREA Coordinator</li> </ul> <p>Findings:</p> <p>115.88(a-d):</p> |

- DOCR 3C-04 states:
  - “The PREA Coordinator in conjunction with the facility wardens shall review data collected and aggregated pursuant to PREA Standard 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training to include: identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility and the agency. This report will be approved by the department director and posted to the department website. The department may redact specific material from the reports when publication presents a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted.”
- The agency annual PREA reports were reviewed and this auditor verified they contain all information required in this standard, including a report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole.
- This auditor verified the annual report is available on the agency’s website at <https://www.docr.nd.gov/prison-rape-elimination-act-overview/docr-prea-audit-reports-and-annual-reports>.
- Interview with the Agency Head:
  - He stated that he reviews overall data and also reviews each incident to find any areas of concern or what can be improved upon. They also recognize what was done well and any positives from the case. He verified he reviews the annual report and would reach out to the PREA Coordinator or Warden with any questions.
- Interview with the PREA Coordinator:
  - The PREA Coordinator stated that the agency does review data collected and aggregated pursuant to 115.87 and that it is securely retained. He also confirmed that corrective action would be taken if/when necessary based on the data. They ensure that the data collected are securely retained by limiting access to the PREA drive to himself, the PREA Compliance Managers and investigation manager. He prepares the annual report for the agency and ensures no identifying information is included that would jeopardize safety or security.

The auditor finds the agency/facility in full compliance with PREA Provision §115.88 based upon analysis of all available evidence including the documentation provided and interviews conducted.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documentation reviewed:

- HRCC PAQ
- DOCR Policy 3C-04, (PREA) Prison Rape Elimination Act of 2003, Dated March 7, 2025
- Record Retention Chapter 25-03.3

Interviews Conducted:

PREA Coordinator

Site Review Observations

Findings:

115.89(a-d):

- DOCR 3C-04 states:
  - “The department shall make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through the public website. Before making aggregated sexual abuse data publicly available, the department shall remove all personal identifiers.
  - All case records associated with claims of sexual abuse, including incident reports, investigation reports, facility resident information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and counseling will be retained in accordance with North Dakota statute. (4-4281-8M) Refer to N.D.C.C. § 25-03.3-04.”
  - North Dakota Century Code (NDCC) § 25-03.3-04 is a mandatory records retention law. It dictates that all juvenile and adult criminal records, case files, and agency reports concerning alleged sex offenses or sexual performances by children must be officially retained for
- Interview with the PREA Coordinator:
  - They ensure that the data collected are securely retained by limiting access to the PREA drive to himself, the PREA Compliance Managers and investigation manager.
- Site review observations:
  - During the site review no paper files regarding the PREA standards were observed.

The auditor finds the agency/facility in full compliance with PREA Provision §115.89 based upon analysis of all available evidence including the documentation provided,

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|  | the site review and interviews conducted. |
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| 115.401 | Frequency and scope of audits                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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|         | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|         | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|         | <p>115.401(a-b):</p> <ul style="list-style-type: none"> <li>The auditor reviewed the agency's website at <a href="https://www.docr.nd.gov/p-prison-rape-elimination-act-overview/">https://www.docr.nd.gov/p-prison-rape-elimination-act-overview/</a> and verified the agency has posted the final PREA audit reports for all facilities.</li> </ul> <p>115.401(h):</p> <ul style="list-style-type: none"> <li>During the on-site portion of the audit the audit team was able to access and view all areas of the facility.</li> </ul> <p>115.401(i):</p> <ul style="list-style-type: none"> <li>HRCC provided all requested documents in a timely manner and was able to view the electronic system onsite where documents are stored.</li> </ul> <p>115.401(m):</p> <ul style="list-style-type: none"> <li>HRCC provided areas for the auditors to use which provided enough space to conduct private interviews of inmates and staff where others were unable to hear the conversations.</li> </ul> <p>115.401(n):</p> <ul style="list-style-type: none"> <li>The auditor received no letters from HRCC inmates. The audit notice was observed to be posted throughout the facility. Photos of the audit notice postings were received via email six weeks before the onsite portion of the audit.</li> </ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.401 based upon analysis of all available evidence including the documentation provided, the site review and interviews conducted.</p> |

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| <b>115.403</b> | <b>Audit contents and findings</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                | <b>Auditor Overall Determination:</b> Meets Standard                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|                | <b>Auditor Discussion</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                | <p>115.403(f):</p> <ul style="list-style-type: none"><li>• The auditor reviewed the agency's website at <a href="https://www.docr.nd.gov/prison-rape-elimination-act-overview">https://www.docr.nd.gov/prison-rape-elimination-act-overview</a> and verified the final audit reports for all facilities are posted.</li></ul> <p>The auditor finds the agency/facility in full compliance with PREA Provision §115.403 based upon analysis of all available evidence including the documentation reviewed.</p> |

| <b>Appendix: Provision Findings</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                       |     |
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| <b>115.11 (a)</b>                   | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>                                                                                                                                                                                                                                                                                                                                                         |     |
|                                     | Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?                                                                                                                                                                                                                                                                                                                | no  |
|                                     | Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?                                                                                                                                                                                                                                                                                                 | yes |
| <b>115.11 (b)</b>                   | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>                                                                                                                                                                                                                                                                                                                                                         |     |
|                                     | Has the agency employed or designated an agency-wide PREA Coordinator?                                                                                                                                                                                                                                                                                                                                                                | yes |
|                                     | Is the PREA Coordinator position in the upper-level of the agency hierarchy?                                                                                                                                                                                                                                                                                                                                                          | yes |
|                                     | Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?                                                                                                                                                                                                                                                            | yes |
| <b>115.11 (c)</b>                   | <b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>                                                                                                                                                                                                                                                                                                                                                         |     |
|                                     | If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)                                                                                                                                                                                                                                                                                   | yes |
|                                     | Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)                                                                                                                                                                                                                                               | yes |
| <b>115.12 (a)</b>                   | <b>Contracting with other entities for the confinement of inmates</b>                                                                                                                                                                                                                                                                                                                                                                 |     |
|                                     | If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | yes |
| <b>115.12 (b)</b>                   | <b>Contracting with other entities for the confinement of inmates</b>                                                                                                                                                                                                                                                                                                                                                                 |     |
|                                     | Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure                                                                                                                                                                                                                                                                                                         | yes |

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

|                   |                                                                                                                                                                                                                                                                 |     |
|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                   | consideration: Any applicable State or local laws, regulations, or standards?                                                                                                                                                                                   |     |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?                                           | yes |
|                   | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?                                                                                              | yes |
| <b>115.13 (b)</b> | <b>Supervision and monitoring</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.)                                                                                  | na  |
| <b>115.13 (c)</b> | <b>Supervision and monitoring</b>                                                                                                                                                                                                                               |     |
|                   | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?                     | yes |
|                   | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?     | yes |
|                   | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? | yes |
| <b>115.13 (d)</b> | <b>Supervision and monitoring</b>                                                                                                                                                                                                                               |     |
|                   | Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?                                      | yes |
|                   | Is this policy and practice implemented for night shifts as well as day shifts?                                                                                                                                                                                 | yes |
|                   | Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?                            | yes |

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

|                   |                                                                                                                                                                                                                                                                                                             |     |
|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                   | facility does not have female inmates.)                                                                                                                                                                                                                                                                     |     |
| <b>115.15 (c)</b> | <b>Limits to cross-gender viewing and searches</b>                                                                                                                                                                                                                                                          |     |
|                   | Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?                                                                                                                                                                                                    | yes |
|                   | Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?                                                                                                                                                                         | yes |
| <b>115.15 (d)</b> | <b>Limits to cross-gender viewing and searches</b>                                                                                                                                                                                                                                                          |     |
|                   | Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?     | yes |
|                   | Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?   | yes |
|                   | Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?                                                                                                                                                                                     | yes |
| <b>115.15 (e)</b> | <b>Limits to cross-gender viewing and searches</b>                                                                                                                                                                                                                                                          |     |
|                   | This provision is no longer applicable to your compliance finding, please select N/A.                                                                                                                                                                                                                       | na  |
| <b>115.15 (f)</b> | <b>Limits to cross-gender viewing and searches</b>                                                                                                                                                                                                                                                          |     |
|                   | This provision is no longer applicable to your compliance finding, please select N/A.                                                                                                                                                                                                                       | na  |
| <b>115.16 (a)</b> | <b>Inmates with disabilities and inmates who are limited English proficient</b>                                                                                                                                                                                                                             |     |
|                   | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?  | yes |
|                   | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? | yes |

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

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

|                                                  |                                                                                                                                                                                                                                                                                                                                                    |     |
|--------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                                                  | consent or refuse?                                                                                                                                                                                                                                                                                                                                 |     |
|                                                  | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?                                                                                                       | yes |
| <b>115.17 (b) Hiring and promotion decisions</b> |                                                                                                                                                                                                                                                                                                                                                    |     |
|                                                  | Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?                                                                                                                                                                                                    | yes |
|                                                  | Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?                                                                                                                                                                                     | yes |
| <b>115.17 (c) Hiring and promotion decisions</b> |                                                                                                                                                                                                                                                                                                                                                    |     |
|                                                  | Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?                                                                                                                                                                                                                        | yes |
|                                                  | Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? | yes |
| <b>115.17 (d) Hiring and promotion decisions</b> |                                                                                                                                                                                                                                                                                                                                                    |     |
|                                                  | Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?                                                                                                                                                                                                     | yes |
| <b>115.17 (e) Hiring and promotion decisions</b> |                                                                                                                                                                                                                                                                                                                                                    |     |
|                                                  | Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?                                                                                       | yes |
| <b>115.17 (f) Hiring and promotion decisions</b> |                                                                                                                                                                                                                                                                                                                                                    |     |
|                                                  | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?                                                                                                                   | yes |
|                                                  | Does the agency ask all applicants and employees who may have                                                                                                                                                                                                                                                                                      | yes |

|                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |     |
|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                   | 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?                                                                                                                                                                                                                                                                                 |     |
|                   | Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?                                                                                                                                                                                                                                                                                                                                                                                | yes |
| <b>115.17 (g)</b> | <b>Hiring and promotion decisions</b>                                                                                                                                                                                                                                                                                                                                                                                                                                               |     |
|                   | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?                                                                                                                                                                                                                                                                                                                                   | yes |
| <b>115.17 (h)</b> | <b>Hiring and promotion decisions</b>                                                                                                                                                                                                                                                                                                                                                                                                                                               |     |
|                   | Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)                                                                                            | yes |
| <b>115.18 (a)</b> | <b>Upgrades to facilities and technologies</b>                                                                                                                                                                                                                                                                                                                                                                                                                                      |     |
|                   | If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.) | na  |
| <b>115.18 (b)</b> | <b>Upgrades to facilities and technologies</b>                                                                                                                                                                                                                                                                                                                                                                                                                                      |     |
|                   | If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)           | yes |
| <b>115.21 (a)</b> | <b>Evidence protocol and forensic medical examinations</b>                                                                                                                                                                                                                                                                                                                                                                                                                          |     |
|                   | 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                                                                                                                                                                                                            | yes |

|                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |     |
|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                   | agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)                                                                                                                                                                                                                                                                                                                                                                     |     |
| <b>115.21 (b)</b> | <b>Evidence protocol and forensic medical examinations</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.)                                                                                                                                                                                                                                                                                | 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.) | na  |
| <b>115.21 (c)</b> | <b>Evidence protocol and forensic medical examinations</b>                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |
|                   | Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?                                                                                                                                                                                                                                                                                | yes |
|                   | Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?                                                                                                                                                                                                                                                                                                                                                     | yes |
|                   | If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?                                                                                                                                                                                                                                                                                     | yes |
|                   | Has the agency documented its efforts to provide SAFEs or SANEs?                                                                                                                                                                                                                                                                                                                                                                                                                           | no  |
| <b>115.21 (d)</b> | <b>Evidence protocol and forensic medical examinations</b>                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |
|                   | Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?                                                                                                                                                                                                                                                                                                                                                                                       | yes |
|                   | If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)                                                                                                                                                | yes |

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

|                   |                                                                                                                                                                                                                                                                    |     |
|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                   | Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?                                                                                                                                    | yes |
|                   | Does the agency document all such referrals?                                                                                                                                                                                                                       | yes |
| <b>115.22 (c)</b> | <b>Policies to ensure referrals of allegations for investigations</b>                                                                                                                                                                                              |     |
|                   | If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).) | yes |
| <b>115.31 (a)</b> | <b>Employee training</b>                                                                                                                                                                                                                                           |     |
|                   | Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?                                                                                                                         | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?                             | yes |
|                   | Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?                                                                                                                        | yes |
|                   | Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?                                                                          | yes |
|                   | Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?                                                                                                                        | yes |
|                   | Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?                                                                                                                       | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?                                                                                                                 | yes |
|                   | Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?                                                                                                                                    | yes |
|                   | The subsection of this provision is no longer applicable to your compliance finding, please select N/A.                                                                                                                                                            | na  |
|                   | Does the agency train all employees who may have contact with                                                                                                                                                                                                      | yes |

|                   |                                                                                                                                                                                                                                                                                                                                                                               |     |
|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                   | inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?                                                                                                                                                                                                                                                            |     |
| <b>115.31 (b)</b> | <b>Employee training</b>                                                                                                                                                                                                                                                                                                                                                      |     |
|                   | Is such training tailored to the gender of the inmates at the employee's facility?                                                                                                                                                                                                                                                                                            | yes |
|                   | Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?                                                                                                                                                                                                         | yes |
| <b>115.31 (c)</b> | <b>Employee training</b>                                                                                                                                                                                                                                                                                                                                                      |     |
|                   | Have all current employees who may have contact with inmates received such training?                                                                                                                                                                                                                                                                                          | yes |
|                   | Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?                                                                                                                                                                              | yes |
|                   | In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?                                                                                                                                                                                                      | yes |
| <b>115.31 (d)</b> | <b>Employee training</b>                                                                                                                                                                                                                                                                                                                                                      |     |
|                   | Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?                                                                                                                                                                                                                                   | yes |
| <b>115.32 (a)</b> | <b>Volunteer and contractor training</b>                                                                                                                                                                                                                                                                                                                                      |     |
|                   | Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?                                                                                                                       | yes |
| <b>115.32 (b)</b> | <b>Volunteer and contractor training</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 |
| <b>115.32 (c)</b> | <b>Volunteer and contractor training</b>                                                                                                                                                                                                                                                                                                                                      |     |

|                   |                                                                                                                                                                                                          |     |
|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                   | Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?                                                                            | yes |
| <b>115.33 (a)</b> | <b>Inmate education</b>                                                                                                                                                                                  |     |
|                   | During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?                                                                | yes |
|                   | During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?                                                                     | yes |
| <b>115.33 (b)</b> | <b>Inmate education</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?       | yes |
|                   | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? | yes |
|                   | Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?       | yes |
| <b>115.33 (c)</b> | <b>Inmate education</b>                                                                                                                                                                                  |     |
|                   | Have all inmates received the comprehensive education referenced in 115.33(b)?                                                                                                                           | yes |
|                   | Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?               | yes |
| <b>115.33 (d)</b> | <b>Inmate education</b>                                                                                                                                                                                  |     |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?                                                                        | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?                                                                                              | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?                                                                                 | yes |
|                   | Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?                                                                                | yes |

|                   |                                                                                                                                                                                                                                                                                                                                                                                                             |     |
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|                   | Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?                                                                                                                                                                                                                                                                              | yes |
| <b>115.33 (e)</b> | <b>Inmate education</b>                                                                                                                                                                                                                                                                                                                                                                                     |     |
|                   | Does the agency maintain documentation of inmate participation in these education sessions?                                                                                                                                                                                                                                                                                                                 | yes |
| <b>115.33 (f)</b> | <b>Inmate education</b>                                                                                                                                                                                                                                                                                                                                                                                     |     |
|                   | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?                                                                                                                                                                                               | yes |
| <b>115.34 (a)</b> | <b>Specialized training: Investigations</b>                                                                                                                                                                                                                                                                                                                                                                 |     |
|                   | 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 |
| <b>115.34 (b)</b> | <b>Specialized training: Investigations</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 |
|                   | Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)                                                                                                                                                                                                  | yes |
|                   | Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)                                                                                                                                                                                    | yes |
|                   | Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)                                                                                                                                 | yes |
| <b>115.34 (c)</b> | <b>Specialized training: Investigations</b>                                                                                                                                                                                                                                                                                                                                                                 |     |

|                   |                                                                                                                                                                                                                                                                                                                                                                                                       |     |
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|                   | 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 |
| <b>115.35 (a)</b> | <b>Specialized training: Medical and mental health care</b>                                                                                                                                                                                                                                                                                                                                           |     |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)                           | yes |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)                                              | yes |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
|                   | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)      | yes |
| <b>115.35 (b)</b> | <b>Specialized training: Medical and mental health care</b>                                                                                                                                                                                                                                                                                                                                           |     |
|                   | If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)                                                                                                                      | na  |
| <b>115.35 (c)</b> | <b>Specialized training: Medical and mental health care</b>                                                                                                                                                                                                                                                                                                                                           |     |
|                   | Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental                                                                                                                                             | yes |

|                   |                                                                                                                                                                                                                                                                                                                           |     |
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|                   | health care practitioners who work regularly in its facilities.)                                                                                                                                                                                                                                                          |     |
| <b>115.35 (d)</b> | <b>Specialized training: Medical and mental health care</b>                                                                                                                                                                                                                                                               |     |
|                   | Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)                                                              | yes |
|                   | Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.) | na  |
| <b>115.41 (a)</b> | <b>Screening for risk of victimization and abusiveness</b>                                                                                                                                                                                                                                                                |     |
|                   | Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?                                                                                                                                                                    | yes |
|                   | Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?                                                                                                                                                             | yes |
| <b>115.41 (b)</b> | <b>Screening for risk of victimization and abusiveness</b>                                                                                                                                                                                                                                                                |     |
|                   | Do intake screenings ordinarily take place within 72 hours of arrival at the facility?                                                                                                                                                                                                                                    | yes |
| <b>115.41 (c)</b> | <b>Screening for risk of victimization and abusiveness</b>                                                                                                                                                                                                                                                                |     |
|                   | Are all PREA screening assessments conducted using an objective screening instrument?                                                                                                                                                                                                                                     | yes |
| <b>115.41 (d)</b> | <b>Screening for risk of victimization and abusiveness</b>                                                                                                                                                                                                                                                                |     |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?                                                                                                                  | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?                                                                                                                                                                   | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?                                                                                                                                                        | yes |
|                   | Does the intake screening consider, at a minimum, the following                                                                                                                                                                                                                                                           | yes |

|                   |                                                                                                                                                                                                                                                                             |     |
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|                   | criteria to assess inmates for risk of sexual victimization: (4)<br>Whether the inmate has previously been incarcerated?                                                                                                                                                    |     |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5)<br>Whether the inmate's criminal history is exclusively nonviolent?                                                                        | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6)<br>Whether the inmate has prior convictions for sex offenses against an adult or child?                                                    | yes |
|                   | The subsection of this provision is no longer applicable to your compliance finding, please select N/A.                                                                                                                                                                     | na  |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8)<br>Whether the inmate has previously experienced sexual victimization?                                                                     | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?                                                                                              | yes |
|                   | Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)<br>Whether the inmate is detained solely for civil immigration purposes?                                                                  | yes |
| <b>115.41 (e)</b> | <b>Screening for risk of victimization and abusiveness</b>                                                                                                                                                                                                                  |     |
|                   | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?                                                                                                                 | yes |
|                   | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?                                                                                                     | yes |
|                   | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?                                                                                    | yes |
| <b>115.41 (f)</b> | <b>Screening for risk of victimization and abusiveness</b>                                                                                                                                                                                                                  |     |
|                   | Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? | yes |

|                   |                                                                                                                                                                                                                                                                        |     |
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| <b>115.41 (g)</b> | <b>Screening for risk of victimization and abusiveness</b>                                                                                                                                                                                                             |     |
|                   | Does the facility reassess an inmate's risk level when warranted due to a referral?                                                                                                                                                                                    | yes |
|                   | Does the facility reassess an inmate's risk level when warranted due to a request?                                                                                                                                                                                     | yes |
|                   | Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?                                                                                                                                                                   | yes |
|                   | Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?                                                                                      | yes |
| <b>115.41 (h)</b> | <b>Screening for risk of victimization and abusiveness</b>                                                                                                                                                                                                             |     |
|                   | Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?                                      | yes |
| <b>115.41 (i)</b> | <b>Screening for risk of victimization and abusiveness</b>                                                                                                                                                                                                             |     |
|                   | Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? | yes |
| <b>115.42 (a)</b> | <b>Use of screening information</b>                                                                                                                                                                                                                                    |     |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?             | yes |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?                 | yes |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?                | yes |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of                                                                     | yes |

|                   |                                                                                                                                                                                                                                                                                                                   |     |
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|                   | being sexually abusive, to inform: Education Assignments?                                                                                                                                                                                                                                                         |     |
|                   | Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?                                                        | yes |
| <b>115.42 (b)</b> | <b>Use of screening information</b>                                                                                                                                                                                                                                                                               |     |
|                   | Does the agency make individualized determinations about how to ensure the safety of each inmate?                                                                                                                                                                                                                 | yes |
| <b>115.42 (c)</b> | <b>Use of screening information</b>                                                                                                                                                                                                                                                                               |     |
|                   | This provision is no longer applicable to your compliance finding, please select N/A.                                                                                                                                                                                                                             | na  |
| <b>115.42 (d)</b> | <b>Use of screening information</b>                                                                                                                                                                                                                                                                               |     |
|                   | This provision is no longer applicable to your compliance finding, please select N/A.                                                                                                                                                                                                                             | na  |
| <b>115.42 (e)</b> | <b>Use of screening information</b>                                                                                                                                                                                                                                                                               |     |
|                   | This provision is no longer applicable to your compliance finding, please select N/A.                                                                                                                                                                                                                             | na  |
| <b>115.42 (f)</b> | <b>Use of screening information</b>                                                                                                                                                                                                                                                                               |     |
|                   | This provision is no longer applicable to your compliance finding, please select N/A.                                                                                                                                                                                                                             | na  |
| <b>115.42 (g)</b> | <b>Use of screening information</b>                                                                                                                                                                                                                                                                               |     |
|                   | This provision is no longer applicable to your compliance finding, please select N/A.                                                                                                                                                                                                                             | na  |
| <b>115.43 (a)</b> | <b>Protective Custody</b>                                                                                                                                                                                                                                                                                         |     |
|                   | Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? | yes |
|                   | If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?                                                                                                                          | yes |
| <b>115.43 (b)</b> | <b>Protective Custody</b>                                                                                                                                                                                                                                                                                         |     |
|                   | Do inmates who are placed in segregated housing because they                                                                                                                                                                                                                                                      | yes |

|                   |                                                                                                                                                                                                                                                                              |     |
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|                   | are at high risk of sexual victimization have access to: Programs to the extent possible?                                                                                                                                                                                    |     |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?                                                                                                                     | yes |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?                                                                                                                      | yes |
|                   | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?                                                                                                             | yes |
|                   | If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | na  |
|                   | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)               | na  |
|                   | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)             | na  |
| <b>115.43 (c)</b> | <b>Protective Custody</b>                                                                                                                                                                                                                                                    |     |
|                   | Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?                                                                                   | yes |
|                   | Does such an assignment not ordinarily exceed a period of 30 days?                                                                                                                                                                                                           | yes |
| <b>115.43 (d)</b> | <b>Protective Custody</b>                                                                                                                                                                                                                                                    |     |
|                   | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?                                                                         | yes |
|                   | If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation                                                                                     | yes |

|                   |                                                                                                                                                                                                                                                                                         |     |
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|                   | can be arranged?                                                                                                                                                                                                                                                                        |     |
| <b>115.43 (e)</b> | <b>Protective Custody</b>                                                                                                                                                                                                                                                               |     |
|                   | In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?                 | yes |
| <b>115.51 (a)</b> | <b>Inmate reporting</b>                                                                                                                                                                                                                                                                 |     |
|                   | Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?                                                                                                                                                                     | yes |
|                   | Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?                                                                                                                 | yes |
|                   | Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?                                                                                                             | yes |
| <b>115.51 (b)</b> | <b>Inmate reporting</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?                                                                                                           | yes |
|                   | Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?                                                                                                                                      | yes |
|                   | Does that private entity or office allow the inmate to remain anonymous upon request?                                                                                                                                                                                                   | yes |
|                   | Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.) | na  |
| <b>115.51 (c)</b> | <b>Inmate reporting</b>                                                                                                                                                                                                                                                                 |     |
|                   | Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?                                                                                                                                                         | yes |
|                   | Does staff promptly document any verbal reports of sexual abuse and sexual harassment?                                                                                                                                                                                                  | yes |
| <b>115.51 (d)</b> | <b>Inmate reporting</b>                                                                                                                                                                                                                                                                 |     |

|                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |     |
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|                   | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?                                                                                                                                                                                                                                                                                                                                                                     | yes |
| <b>115.52 (a)</b> | <b>Exhaustion of administrative remedies</b>                                                                                                                                                                                                                                                                                                                                                                                                                                      |     |
|                   | Is the agency exempt from this standard?<br>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 |
| <b>115.52 (b)</b> | <b>Exhaustion of administrative remedies</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.)                                                                                                                                                               | na  |
|                   | Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)                                                                                                                                                                                                                                                  | na  |
| <b>115.52 (c)</b> | <b>Exhaustion of administrative remedies</b>                                                                                                                                                                                                                                                                                                                                                                                                                                      |     |
|                   | 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.)                                                                                                                                                                                                                                                                 | 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.)                                                                                                                                                                                                                                                                                                                  | na  |
| <b>115.52 (d)</b> | <b>Exhaustion of administrative remedies</b>                                                                                                                                                                                                                                                                                                                                                                                                                                      |     |
|                   | Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)                                                                                                                                    | na  |
|                   | If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision,                                                                                                                                                                                                                                                                               | na  |

|                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |    |
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|                   | 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.)                                                                                                                                                                                                                                                                                                    |    |
|                   | At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)                                                                                                                                              | na |
| <b>115.52 (e)</b> | <b>Exhaustion of administrative remedies</b>                                                                                                                                                                                                                                                                                                                                                                                                                             |    |
|                   | Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)                                                                                                                                                                                          | na |
|                   | Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) | na |
|                   | If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)                                                                                                                                                                                                                                                                                                 | na |
| <b>115.52 (f)</b> | <b>Exhaustion of administrative remedies</b>                                                                                                                                                                                                                                                                                                                                                                                                                             |    |
|                   | Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)                                                                                                                                                                                                                                                          | na |
|                   | After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).                                                                                        | na |
|                   | After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)                                                                                                                                                                                                                                                                                                       | na |
|                   | After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days?                                                                                                                                                                                                                                                                                                                                            | na |

|                   |                                                                                                                                                                                                                                                                                                                                 |     |
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|                   | (N/A if agency is exempt from this standard.)                                                                                                                                                                                                                                                                                   |     |
|                   | Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)                                                                                                                       | na  |
|                   | Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)                                                                                                                                                                           | na  |
|                   | Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)                                                                                                                                                                    | na  |
| <b>115.52 (g)</b> | <b>Exhaustion of administrative remedies</b>                                                                                                                                                                                                                                                                                    |     |
|                   | If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)                                                                                    | na  |
| <b>115.53 (a)</b> | <b>Inmate access to outside confidential support services</b>                                                                                                                                                                                                                                                                   |     |
|                   | Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?     | yes |
|                   | Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.) | na  |
|                   | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?                                                                                                                                                                                | yes |
| <b>115.53 (b)</b> | <b>Inmate access to outside confidential support services</b>                                                                                                                                                                                                                                                                   |     |
|                   | Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?                                                                              | yes |
| <b>115.53 (c)</b> | <b>Inmate access to outside confidential support services</b>                                                                                                                                                                                                                                                                   |     |
|                   | Does the agency maintain or attempt to enter into memoranda of                                                                                                                                                                                                                                                                  | yes |

|                   |                                                                                                                                                                                                                                                                                                                    |     |
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|                   | understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?                                                                                                                                          |     |
|                   | Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?                                                                                                                                                                                                     | yes |
| <b>115.54 (a)</b> | <b>Third-party reporting</b>                                                                                                                                                                                                                                                                                       |     |
|                   | Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?                                                                                                                                                                                                          | yes |
|                   | Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?                                                                                                                                                                                        | yes |
| <b>115.61 (a)</b> | <b>Staff and agency reporting duties</b>                                                                                                                                                                                                                                                                           |     |
|                   | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?                                                   | yes |
|                   | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?                                                                      | yes |
|                   | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?                         | yes |
| <b>115.61 (b)</b> | <b>Staff and agency reporting duties</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 |
| <b>115.61 (c)</b> | <b>Staff and agency reporting duties</b>                                                                                                                                                                                                                                                                           |     |
|                   | Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?                                                                                                                                 | yes |
|                   | Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of                                                                                                                                                                                | yes |

|                   |                                                                                                                                                                                                                                                                      |     |
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|                   | confidentiality, at the initiation of services?                                                                                                                                                                                                                      |     |
| <b>115.61 (d)</b> | <b>Staff and agency reporting duties</b>                                                                                                                                                                                                                             |     |
|                   | If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?   | yes |
| <b>115.61 (e)</b> | <b>Staff and agency reporting duties</b>                                                                                                                                                                                                                             |     |
|                   | Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?                                                                                             | yes |
| <b>115.62 (a)</b> | <b>Agency protection duties</b>                                                                                                                                                                                                                                      |     |
|                   | When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?                                                                                                                | yes |
| <b>115.63 (a)</b> | <b>Reporting to other confinement facilities</b>                                                                                                                                                                                                                     |     |
|                   | Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? | yes |
| <b>115.63 (b)</b> | <b>Reporting to other confinement facilities</b>                                                                                                                                                                                                                     |     |
|                   | Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?                                                                                                                                                        | yes |
| <b>115.63 (c)</b> | <b>Reporting to other confinement facilities</b>                                                                                                                                                                                                                     |     |
|                   | Does the agency document that it has provided such notification?                                                                                                                                                                                                     | yes |
| <b>115.63 (d)</b> | <b>Reporting to other confinement facilities</b>                                                                                                                                                                                                                     |     |
|                   | Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?                                                                                                               | yes |
| <b>115.64 (a)</b> | <b>Staff first responder duties</b>                                                                                                                                                                                                                                  |     |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?                                                                                  | yes |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report                                                                                                                                       | yes |

|                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |     |
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|                   | required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?                                                                                                                                                                                                                                                                                                                                                             |     |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?     | yes |
|                   | Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? | yes |
| <b>115.64 (b)</b> | <b>Staff first responder duties</b>                                                                                                                                                                                                                                                                                                                                                                                                                                         |     |
|                   | If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?                                                                                                                                                                                                                                                        | yes |
| <b>115.65 (a)</b> | <b>Coordinated response</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |
|                   | 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 |
| <b>115.66 (a)</b> | <b>Preservation of ability to protect inmates from contact with abusers</b>                                                                                                                                                                                                                                                                                                                                                                                                 |     |
|                   | Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?                             | yes |
| <b>115.67 (a)</b> | <b>Agency protection against retaliation</b>                                                                                                                                                                                                                                                                                                                                                                                                                                |     |
|                   | Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate                                                                                                                                                                                                                                                                                                                                              | yes |

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|                   | 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 |
| <b>115.67 (b)</b> | <b>Agency protection against retaliation</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 |
| <b>115.67 (c)</b> | <b>Agency protection against retaliation</b>                                                                                                                                                                                                                                                                                                                    |     |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?                | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?       | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?                                                                                                                                              | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?                                                                                                                                                  | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?                                                                                                                                                           | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?                                                                                                                                                           | yes |

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|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?                                                                                           | yes |
|                   | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?                                                                                                          | yes |
|                   | Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?                                                                                                                                                                                                 | yes |
| <b>115.67 (d)</b> | <b>Agency protection against retaliation</b>                                                                                                                                                                                                                                                                   |     |
|                   | In the case of inmates, does such monitoring also include periodic status checks?                                                                                                                                                                                                                              | yes |
| <b>115.67 (e)</b> | <b>Agency protection against retaliation</b>                                                                                                                                                                                                                                                                   |     |
|                   | 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 |
| <b>115.68 (a)</b> | <b>Post-allegation protective custody</b>                                                                                                                                                                                                                                                                      |     |
|                   | Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?                                                                                                                                                            | yes |
| <b>115.71 (a)</b> | <b>Criminal and administrative agency investigations</b>                                                                                                                                                                                                                                                       |     |
|                   | When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) | yes |
|                   | Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)                                                | yes |
| <b>115.71 (b)</b> | <b>Criminal and administrative agency investigations</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?                                                                                                                                                  | yes |
| <b>115.71 (c)</b> | <b>Criminal and administrative agency investigations</b>                                                                                                                                                                                                                                                       |     |
|                   | Do investigators gather and preserve direct and circumstantial                                                                                                                                                                                                                                                 | yes |

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|                   | evidence, including any available physical and DNA evidence and any available electronic monitoring data?                                                                                                                                            |     |
|                   | Do investigators interview alleged victims, suspected perpetrators, and witnesses?                                                                                                                                                                   | yes |
|                   | Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?                                                                                                                                            | yes |
| <b>115.71 (d)</b> | <b>Criminal and administrative agency investigations</b>                                                                                                                                                                                             |     |
|                   | When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? | yes |
| <b>115.71 (e)</b> | <b>Criminal and administrative agency investigations</b>                                                                                                                                                                                             |     |
|                   | Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?                                                                 | yes |
|                   | Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?                                       | yes |
| <b>115.71 (f)</b> | <b>Criminal and administrative agency investigations</b>                                                                                                                                                                                             |     |
|                   | Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?                                                                                                                   | yes |
|                   | Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?                    | yes |
| <b>115.71 (g)</b> | <b>Criminal and administrative agency investigations</b>                                                                                                                                                                                             |     |
|                   | Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?                               | yes |
| <b>115.71 (h)</b> | <b>Criminal and administrative agency investigations</b>                                                                                                                                                                                             |     |
|                   | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?                                                                                                                                                   | yes |
| <b>115.71 (i)</b> | <b>Criminal and administrative agency investigations</b>                                                                                                                                                                                             |     |

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|                   | Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?                                                                                                                                                                                | yes |
| <b>115.71 (j)</b> | <b>Criminal and administrative agency investigations</b>                                                                                                                                                                                                                                                                                                |     |
|                   | Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?                                                                                                                                                                        | yes |
| <b>115.71 (l)</b> | <b>Criminal and administrative agency investigations</b>                                                                                                                                                                                                                                                                                                |     |
|                   | 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 |
| <b>115.72 (a)</b> | <b>Evidentiary standard for administrative investigations</b>                                                                                                                                                                                                                                                                                           |     |
|                   | Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?                                                                                                                                                            | yes |
| <b>115.73 (a)</b> | <b>Reporting to inmates</b>                                                                                                                                                                                                                                                                                                                             |     |
|                   | Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?                                                                                               | yes |
| <b>115.73 (b)</b> | <b>Reporting to inmates</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.)                 | yes |
| <b>115.73 (c)</b> | <b>Reporting to inmates</b>                                                                                                                                                                                                                                                                                                                             |     |
|                   | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit? | yes |
|                   | Following an inmate's allegation that a staff member has                                                                                                                                                                                                                                                                                                | yes |

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|                   | committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?                                                                                                                      |     |
|                   | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?      | yes |
|                   | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? | yes |
| <b>115.73 (d)</b> | <b>Reporting to inmates</b>                                                                                                                                                                                                                                                                                                                                                                                    |     |
|                   | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?                                                                                                                              | yes |
|                   | Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?                                                                                                                             | yes |
| <b>115.73 (e)</b> | <b>Reporting to inmates</b>                                                                                                                                                                                                                                                                                                                                                                                    |     |
|                   | Does the agency document all such notifications or attempted notifications?                                                                                                                                                                                                                                                                                                                                    | yes |
| <b>115.76 (a)</b> | <b>Disciplinary sanctions for staff</b>                                                                                                                                                                                                                                                                                                                                                                        |     |
|                   | Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?                                                                                                                                                                                                                                                                   | yes |
| <b>115.76 (b)</b> | <b>Disciplinary sanctions for staff</b>                                                                                                                                                                                                                                                                                                                                                                        |     |
|                   | Is termination the presumptive disciplinary sanction for staff who                                                                                                                                                                                                                                                                                                                                             | yes |

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|                   | have engaged in sexual abuse?                                                                                                                                                                                                                                                                                                                                     |     |
| <b>115.76 (c)</b> | <b>Disciplinary sanctions for staff</b>                                                                                                                                                                                                                                                                                                                           |     |
|                   | 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 |
| <b>115.76 (d)</b> | <b>Disciplinary sanctions for staff</b>                                                                                                                                                                                                                                                                                                                           |     |
|                   | Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?                                                                                              | yes |
|                   | Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?                                                                                                                                           | yes |
| <b>115.77 (a)</b> | <b>Corrective action for contractors and volunteers</b>                                                                                                                                                                                                                                                                                                           |     |
|                   | Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?                                                                                                                                                                                                                                                                  | yes |
|                   | Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?                                                                                                                                                                                                                  | yes |
|                   | Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?                                                                                                                                                                                                                                                                | yes |
| <b>115.77 (b)</b> | <b>Corrective action for contractors and volunteers</b>                                                                                                                                                                                                                                                                                                           |     |
|                   | In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?                                                                                                                        | yes |
| <b>115.78 (a)</b> | <b>Disciplinary sanctions for inmates</b>                                                                                                                                                                                                                                                                                                                         |     |
|                   | 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 |
| <b>115.78 (b)</b> | <b>Disciplinary sanctions for inmates</b>                                                                                                                                                                                                                                                                                                                         |     |

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|                   | 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 |
| <b>115.78 (c)</b> | <b>Disciplinary sanctions for inmates</b>                                                                                                                                                                                                                                                                                                                                        |     |
|                   | 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 |
| <b>115.78 (d)</b> | <b>Disciplinary sanctions for inmates</b>                                                                                                                                                                                                                                                                                                                                        |     |
|                   | 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 |
| <b>115.78 (e)</b> | <b>Disciplinary sanctions for inmates</b>                                                                                                                                                                                                                                                                                                                                        |     |
|                   | Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?                                                                                                                                                                                                                                    | yes |
| <b>115.78 (f)</b> | <b>Disciplinary sanctions for inmates</b>                                                                                                                                                                                                                                                                                                                                        |     |
|                   | For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?                                                                  | yes |
| <b>115.78 (g)</b> | <b>Disciplinary sanctions for inmates</b>                                                                                                                                                                                                                                                                                                                                        |     |
|                   | If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)                                                                                                                         | yes |
| <b>115.81 (a)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>                                                                                                                                                                                                                                                                                                             |     |
|                   | If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison). | yes |
| <b>115.81 (b)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>                                                                                                                                                                                                                                                                                                             |     |

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|                   | If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)                            | yes |
| <b>115.81 (c)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>                                                                                                                                                                                                                                                                                                                          |     |
|                   | If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).                  | na  |
| <b>115.81 (d)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>                                                                                                                                                                                                                                                                                                                          |     |
|                   | 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 |
| <b>115.81 (e)</b> | <b>Medical and mental health screenings; history of sexual abuse</b>                                                                                                                                                                                                                                                                                                                          |     |
|                   | Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?                                                                                                                                                       | yes |
| <b>115.82 (a)</b> | <b>Access to emergency medical and mental health services</b>                                                                                                                                                                                                                                                                                                                                 |     |
|                   | Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?                                                                                                                         | yes |
| <b>115.82 (b)</b> | <b>Access to emergency medical and mental health services</b>                                                                                                                                                                                                                                                                                                                                 |     |
|                   | If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?                                                                                                                                                                 | yes |
|                   | Do security staff first responders immediately notify the appropriate medical and mental health practitioners?                                                                                                                                                                                                                                                                                | yes |

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| <b>115.82 (c)</b> | <b>Access to emergency medical and mental health services</b>                                                                                                                                                                                                                                                                                                                                             |     |
|                   | 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 |
| <b>115.82 (d)</b> | <b>Access to emergency medical and mental health services</b>                                                                                                                                                                                                                                                                                                                                             |     |
|                   | 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 |
| <b>115.83 (a)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>                                                                                                                                                                                                                                                                                                                        |     |
|                   | Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?                                                                                                                                                                                                    | yes |
| <b>115.83 (b)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>                                                                                                                                                                                                                                                                                                                        |     |
|                   | Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?                                                                                                                                          | yes |
| <b>115.83 (c)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>                                                                                                                                                                                                                                                                                                                        |     |
|                   | Does the facility provide such victims with medical and mental health services consistent with the community level of care?                                                                                                                                                                                                                                                                               | yes |
| <b>115.83 (d)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>                                                                                                                                                                                                                                                                                                                        |     |
|                   | Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | yes |
| <b>115.83 (e)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>                                                                                                                                                                                                                                                                                                                        |     |
|                   | If pregnancy results from the conduct described in paragraph §                                                                                                                                                                                                                                                                                                                                            | yes |

|                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                      |     |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                   | 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) |     |
| <b>115.83 (f)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>                                                                                                                                                                                                                                                                                                                                                                   |     |
|                   | Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?                                                                                                                                                                                                                                                                                                                    | yes |
| <b>115.83 (g)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>                                                                                                                                                                                                                                                                                                                                                                   |     |
|                   | 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 |
| <b>115.83 (h)</b> | <b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>                                                                                                                                                                                                                                                                                                                                                                   |     |
|                   | If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)                                                                                                                                                                | yes |
| <b>115.86 (a)</b> | <b>Sexual abuse incident reviews</b>                                                                                                                                                                                                                                                                                                                                                                                                                 |     |
|                   | Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?                                                                                                                                                                                                                | yes |
| <b>115.86 (b)</b> | <b>Sexual abuse incident reviews</b>                                                                                                                                                                                                                                                                                                                                                                                                                 |     |
|                   | Does such review ordinarily occur within 30 days of the conclusion of the investigation?                                                                                                                                                                                                                                                                                                                                                             | yes |
| <b>115.86 (c)</b> | <b>Sexual abuse incident reviews</b>                                                                                                                                                                                                                                                                                                                                                                                                                 |     |
|                   | Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?                                                                                                                                                                                                                                                                                          | yes |
| <b>115.86 (d)</b> | <b>Sexual abuse incident reviews</b>                                                                                                                                                                                                                                                                                                                                                                                                                 |     |

|                   |                                                                                                                                                                                                                                                                           |     |
|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                   | Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?                                                                                               | yes |
|                   | The subsection of this provision is no longer applicable to your compliance finding, please select N/A.                                                                                                                                                                   | na  |
|                   | Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?                                                                                                            | yes |
|                   | Does the review team: Assess the adequacy of staffing levels in that area during different shifts?                                                                                                                                                                        | yes |
|                   | Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?                                                                                                                                            | yes |
|                   | Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? | yes |
| <b>115.86 (e)</b> | <b>Sexual abuse incident reviews</b>                                                                                                                                                                                                                                      |     |
|                   | Does the facility implement the recommendations for improvement, or document its reasons for not doing so?                                                                                                                                                                | yes |
| <b>115.87 (a)</b> | <b>Data collection</b>                                                                                                                                                                                                                                                    |     |
|                   | Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?                                                                                        | yes |
| <b>115.87 (b)</b> | <b>Data collection</b>                                                                                                                                                                                                                                                    |     |
|                   | Does the agency aggregate the incident-based sexual abuse data at least annually?                                                                                                                                                                                         | yes |
| <b>115.87 (c)</b> | <b>Data collection</b>                                                                                                                                                                                                                                                    |     |
|                   | Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?                                                                      | yes |
| <b>115.87 (d)</b> | <b>Data collection</b>                                                                                                                                                                                                                                                    |     |
|                   | Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports,                                                                                                                                              | yes |

|                   |                                                                                                                                                                                                                                                                                                                                                            |     |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                   | investigation files, and sexual abuse incident reviews?                                                                                                                                                                                                                                                                                                    |     |
| <b>115.87 (e)</b> | <b>Data collection</b>                                                                                                                                                                                                                                                                                                                                     |     |
|                   | Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)                                                                                                                               | yes |
| <b>115.87 (f)</b> | <b>Data collection</b>                                                                                                                                                                                                                                                                                                                                     |     |
|                   | Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)                                                                                                                                                                       | yes |
| <b>115.88 (a)</b> | <b>Data review for corrective action</b>                                                                                                                                                                                                                                                                                                                   |     |
|                   | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?                                                                                             | yes |
|                   | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?                                                                          | yes |
|                   | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? | yes |
| <b>115.88 (b)</b> | <b>Data review for corrective action</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?                                                                                                                                          | yes |
| <b>115.88 (c)</b> | <b>Data review for corrective action</b>                                                                                                                                                                                                                                                                                                                   |     |
|                   | 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 |
| <b>115.88 (d)</b> | <b>Data review for corrective action</b>                                                                                                                                                                                                                                                                                                                   |     |
|                   | Does the agency indicate the nature of the material redacted                                                                                                                                                                                                                                                                                               | yes |

|                    |                                                                                                                                                                                                                                                                                                                                         |     |
|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                    | 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?                                                                                                                                                                                |     |
| <b>115.89 (a)</b>  | <b>Data storage, publication, and destruction</b>                                                                                                                                                                                                                                                                                       |     |
|                    | Does the agency ensure that data collected pursuant to § 115.87 are securely retained?                                                                                                                                                                                                                                                  | yes |
| <b>115.89 (b)</b>  | <b>Data storage, publication, and destruction</b>                                                                                                                                                                                                                                                                                       |     |
|                    | Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?                                                                 | yes |
| <b>115.89 (c)</b>  | <b>Data storage, publication, and destruction</b>                                                                                                                                                                                                                                                                                       |     |
|                    | Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?                                                                                                                                                                                                                          | yes |
| <b>115.89 (d)</b>  | <b>Data storage, publication, and destruction</b>                                                                                                                                                                                                                                                                                       |     |
|                    | Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?                                                                                                                                       | yes |
| <b>115.401 (a)</b> | <b>Frequency and scope of audits</b>                                                                                                                                                                                                                                                                                                    |     |
|                    | During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)                   | yes |
| <b>115.401 (b)</b> | <b>Frequency and scope of audits</b>                                                                                                                                                                                                                                                                                                    |     |
|                    | Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)                                                                                                                                                                                                       | yes |
|                    | If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.) | na  |
|                    | If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by                                                                                                                                                                                                  | na  |

|                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |     |
|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
|                    | the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)                                                                                                                                                                                                                                                                                                                                   |     |
| <b>115.401 (h)</b> | <b>Frequency and scope of audits</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |     |
|                    | Did the auditor have access to, and the ability to observe, all areas of the audited facility?                                                                                                                                                                                                                                                                                                                                                                                                                                          | yes |
| <b>115.401 (i)</b> | <b>Frequency and scope of audits</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |     |
|                    | Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?                                                                                                                                                                                                                                                                                                                                                                                                        | yes |
| <b>115.401 (m)</b> | <b>Frequency and scope of audits</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |     |
|                    | Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?                                                                                                                                                                                                                                                                                                                                                                                                                                         | yes |
| <b>115.401 (n)</b> | <b>Frequency and scope of audits</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |     |
|                    | Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?                                                                                                                                                                                                                                                                                                                                                                           | yes |
| <b>115.403 (f)</b> | <b>Audit contents and findings</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |     |
|                    | The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.) | yes |