PREA Facility Audit Report: Final

Name of Facility: Lumberton Correctional Institution
Facility Type: Prison / Jail
Date Interim Report Submitted: NA
Date Final Report Submitted: 07/01/2026

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: Aaron C. Uldricks	**Date of Signature:** 07/01/2026

AUDITOR INFORMATION	
Auditor name:	Uldricks, Aaron
Email:	confinementsolutions@gmail.com
Start Date of On-Site Audit:	04/20/2026
End Date of On-Site Audit:	04/21/2026

FACILITY INFORMATION	
Facility name:	Lumberton Correctional Institution
Facility physical address:	75 Legend Road, Lumberton, North Carolina - 28358
Facility mailing address:	

Primary Contact

Name:	Brian Oxendine
Email Address:	brian.oxendine@dac.nc.gov
Telephone Number:	910-785-8200

Warden/Jail Administrator/Sheriff/Director	
Name:	Shawn Britt
Email Address:	shawn.britt@dac.nc.gov
Telephone Number:	1-252-617-1337

Facility PREA Compliance Manager	
Name:	Brian Oxendine
Email Address:	brian.oxendine@dac.nc.gov
Telephone Number:	9107859669

Facility Health Service Administrator On-site	
Name:	Joel Floyd
Email Address:	joel.floyd@dac.nc.gov
Telephone Number:	910-785-8228

Facility Characteristics	
Designed facility capacity:	834
Current population of facility:	817
Average daily population for the past 12 months:	723
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Men/boys

Age range of population:	18-99
Facility security levels/inmate custody levels:	Medium
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	206
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	18
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	80

AGENCY INFORMATION	
Name of agency:	North Carolina Department of Adult Correction
Governing authority or parent agency (if applicable):	
Physical Address:	214 West Jones Street , Raleigh , North Carolina - 27603
Mailing Address:	
Telephone number:	9198252739

Agency Chief Executive Officer Information:	
Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Charlotte Jordan-Williams	**Email Address:**	charlotte.williams@dac.nc.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:	
1	• 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
Number of standards met:	
44	
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:	2026-04-20
2. End date of the onsite portion of the audit:	2026-04-21

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?	(●) Yes ( ) No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Rape Crisis Center of Robeson County

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	834
15. Average daily population for the past 12 months:	723
16. Number of inmate/resident/detainee housing units:	24
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	( ) Yes (●) No ( ) 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	
23. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit:	826
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:	24
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:	9
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:	15
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:	24
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:	18
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:	23

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:	10
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:	1
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:	0
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:	0
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):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
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:	185
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:	80

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:	20
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:	No text provided.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	15
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☑ Age ☑ Race ☑ Ethnicity (e.g., Hispanic, Non-Hispanic) ☑ Length of time in the facility ☑ Housing assignment ☐ Gender ☐ Other ☐ None
42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Auditor selected offenders from different housing units.
43. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	◉ Yes ○ No

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):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	16
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".	
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:	1
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:	4
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:	4

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:	1
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:	2
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:	2
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:	2
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:	1
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:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	PCM provided auditor with documentation and confirmed these offenders were no longer at Lumberton Correctional Institution.
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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ 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. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	PCM and associate warden confirmed offenders are not placed in segregated housing for risk of sexual victimization.

57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	12
59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☑ Length of tenure in the facility ☑ Shift assignment ☑ Work assignment ☐ Rank (or equivalent) ☑ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
If "Other," describe:	gender, race, and ethnicity
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	◉ Yes ○ No
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):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	

62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	13
63. Were you able to interview the Agency Head?	○ Yes ◉ No
a. Explain why it was not possible to interview the Agency Head:	Interviewed agency head designee.
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	◉ Yes ○ No
65. Were you able to interview the PREA Coordinator?	◉ Yes ○ No
66. Were you able to interview the PREA Compliance Manager?	◉ Yes ○ No ○ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

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).	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.

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?	(●) Yes ( ) No
78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	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
Inmate-on-inmate sexual abuse	4	1	4	1
Staff-on-inmate sexual abuse	1	0	1	0
Total	5	1	5	1

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
Inmate-on-inmate sexual harassment	9	0	9	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	9	0	9	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	0	1	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	1	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	1	2	1
Staff-on-inmate sexual abuse	0	1	0	0
Total	0	2	2	1

Sexual Harassment Investigation Outcomes

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	1	6	2
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	1	6	2

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:	5

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:	4
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:	1
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	( ) Yes (●) No ( ) NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	9
94. Did your selection of SEXUAL HARASSMENT 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 harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	9
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	( ) Yes (●) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The auditor also reviewed nine investigations that occurred outside of the previous 12 months, and 18 allegations that did not meet the PREA Standards definitions for sexual abuse or sexual harassment.

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

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
a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:	1
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
• Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
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.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • Lumberton Correctional Institution (LCI) Pre-Audit Questionnaire (PAQ) ◦ Facility response ◦ North Carolina Department of Adult Correction (NCDAC) Policy and Procedure DAC-PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025* ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Organizational Chart, *dated 12.16.2025* ◦ *Lumberton Correctional Institution Organizational Chart, dated 12.27.2024* • Interview with PREA coordinator • Interview with PREA compliance manager (PCM) **Reasoning and analysis**: **115.11(a)**

- Facility response:
  - The agency has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment in facilities it operates directly or under contract.
  - The facility has a policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment.
  - The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment.
  - The policy includes sanctions for those found to have participated in prohibited behaviors.
  - The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of offenders.
- NCDAC Policy and Procedure DAC-PREA-100 *PREA Prevention Planning and Screening*:
  - DAC is committed to a standard of zero-tolerance of sexual abuse and sexual harassment toward offenders either by employees, volunteers, contractors, and custodial agents, or by other offenders.
  - Included definitions of prohibited behaviors regarding sexual abuse and sexual harassment.
  - Contained prevention and detection measures including offender education, risk screening, and staff training.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Included disciplinary sanctions for offenders and staff who are found to have committed sexual abuse or sexual harassment against an offender.

115.11(b)

- Facility response:
  - The agency employs an upper-level, agency-wide PREA coordinator.
  - The PREA coordinator has sufficient time and authority to develop, implement, and oversee all facility efforts to comply with the PREA standards.
  - The PREA coordinator has the title of PREA director.
- NCDAC Organizational Chart:
  - The PREA coordinator has the title of PREA director and reports to the NCDAC Institution Administration Programs and Standards Deputy Secretary.
- Interview with PREA coordinator:
  - Indicated sufficient time to manage all PREA-related responsibilities.
  - Oversees 56 PREA compliance managers (PCM). Interacts with PCM through continuous information sharing, trainings, and mock audits.
  - Develops and oversees a 30-day corrective action plan for any facility where a compliance issue is identified.
  - Supervises four PREA analysists and a PREA training coordinator who advise and assist facility staff by region with PREA compliance.

115.11(c)

- Facility response:
  - The facility has a designated PREA compliance manager (PCM).
  - The PCM has sufficient time and authority to coordinate the facility's PREA compliance effort.
  - The PREA compliance manager has the title of correctional sergeant in the agency’s organizational structure.

- *Lumberton Correctional Institution Organizational Chart*:
  - The PREA compliance manger had the rank of sergeant and reported to the warden.
- Interview with PREA compliance manager
  - Indicated sufficient time to manage all PREA related responsibilities.

Determination:

The facility exceeds the standard.

PREA coordinator's framework for continual process improvement includes facility mock audits and corrective action plans.

115.12	Contracting with other entities for the confinement of inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
  - *State of North Carolina Memorandum of Agreement between North Carolina Department of Public Safety and Center for Community Transitions – contract DPS-11836258-JEC, dated 03.03.2022*
  - *Amendment Number One (1) State of North Carolina Department of Adult Correction and Center for Community Transitions, dated 07.05.2023*
- Supplemental documentation
  - NCDAC Memorandum Re: *The Center for Community Transitions, dated 02.23.2026*
  - The Center for Women *PREA Facility Audit Report: Final, dated 07.21.2025*
- Interview with agency's contract administrator

Reasoning and analysis:

115.12(a)

- Facility response:
  - One contract has been entered into or renewed by the agency for the confinement of its offenders with private agencies or other entities since the last PREA audit.
  - The above contract requires contractors to adopt and comply with PREA standards.
- *State of North Carolina Memorandum of Agreement between North Carolina Department of Public Safety and Center for Community Transitions – contract DPS-11836258-JEC*:
  - Contractual facility agreed to comply with the national PREA Standards.
- *Amendment Number One (1) State of North Carolina Department of Adult Correction and Center for Community Transitions*:
  - Extended agreement until 12.31.2023 or subsequent execution of a

new contractual agreement for the 2023-2025 fiscal biennium.
- NCDAC Memorandum Re: *The Center for Community Transitions*:
  - Explained extension of agreement between NCDAC and The Center for Community Transitions until the subsequent execution of a new contractual agreement.

115.12(b)

- Facility response:
  - The contract or contract renewal requires the agency to monitor contractor's compliance.
- *State of North Carolina Memorandum of Agreement between North Carolina Department of Public Safety and Center for Community Transitions – contract DPS-11836258-JEC*:
  - Contractual facility agreed to NCDAC monitoring to ensure compliance with the PREA Standards.
- The Center for Women *PREA Facility Audit Report: Final*:
  - The facility's auditor determined the facility was compliant with 40 PREA Standards and exceeded one PREA Standard during the previous three-year cycle audit.
  - The facility is scheduled for a PREA audit during the current three-year audit cycle.
- Interview with agency's contract administrator:
  - Indicated the agency has one contract with a non-profit entity for confinement of offenders.
  - Indicated monitoring of facility compliance through ongoing communication and annual review of compliance.
  - Indicated obligation to comply with the PREA Standards stated in contract and renewals.

Determination:

The facility meets the standard.

115.13	**Supervision and monitoring**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025* ◦ *Lumberton CI 115.13 PREA Staffing Analysis, dated 08.22.2025* ◦ *Lumberton Correctional Institution Dormitory Shift Narrative, various dates* • Supplemental documentation ◦ *Department of Adult Corrections – Prisons Post Chart, Lumberton CI, dated 07.29.2025* ◦ *Restrictive Housing Daily Log Sheet, Lumberton Correctional Institution, various dates*

- Site review
- Documentation review
- Interview with associate warden (warden's designee)
- Interview with PREA coordinator
- Interview with PREA compliance manager (PCM)
- Interview with intermediate- or higher-level facility staff

Reasoning and analysis:

115.13(a)

- Facility response:
    - The agency requires each facility it operates to develop, document, and make its best efforts to comply on regular basis with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect offenders against abuse.
    - Since the last PREA audit, the average daily number of offenders is 709.
    - Since the last PREA audit, the staffing plan was predicated on the average offender population of 810.
- *Department of Adult Corrections – Prisons Post Chart, Lumberton CI*:
    - Listed facility post assignments for correctional officers and supervisors.
    - Accounted for offender housing, operations, support services, transportation, and supervisory roles.
- Site review:
    - Auditor observed:
        - Staff were assigned to housing units, kitchen, vocational, and other areas of the facility where offenders were present.
        - Supervisors interacted regularly with staff and offenders.
        - A combination of camera and mirror placements were deployed to eliminate previously identified blind spots.
- Interview with associate warden:
    - Indicated that adequate staffing levels to protect offenders against sexual abuse and video monitoring are part of the staffing plan.
    - Indicated staffing assessments include appropriate number of staff in each area of the facility, classes and programing occurring on each shift, areas that are isolated and/or where previous sexual abuse allegations took place, and the composition of the offender population including the number of offenders who are at high risk of victimization or abusiveness.
    - Indicated compliance is checked by comparing staffing numbers to the approved post chart review. Staffing is documented on the post assignment roster for each shift.
- Interview with PREA compliance manager:
    - Indicated the staffing plan considers the number and placement of staff on each shift, including custody staff or case managers monitoring programs and classes; the composition of the offender population including placement of offenders who are at high risk of sexual victimization; and evaluating areas of the facility where allegations of sexual abuse took place.

115.13(b)

- Facility response:
    - N/A for: “Each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan.”
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and*

Screening:
    - Each DAC work location shall document and justify all deviations from their plan in circumstances where the staffing plan is not complied with.
- Interview with associate warden:
    - Indicated deviations from the staffing plan would be documented on the post assignment roster for each shift.

115.13(c)

- Facility response:
    - Annual agency/facility staffing plan reviews in collaboration with the PREA coordinator to determine if adjustments are needed to:
        - Staffing plan;
        - Deployment of monitoring technology; and/or
        - Allocation of resources to ensure compliance with staffing plan.
- *Lumberton Correctional Institution 115.13 PREA Staffing Analysis*:
    - Documented facility's annual efforts to consider the 11 factors listed in the standard.
- Interview with PREA coordinator:
    - Indicated collaboration with warden and PCM for annual staffing plan assessments and adjustments.
- Documentation review:
    - The auditor observed annual staffing plan review documentation that assessed staffing, monitoring technology, and resources committed to the staffing plan.

115.13(d)

- Facility response:
    - Intermediate- or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment.
    - Unannounced rounds are documented.
    - Unannounced rounds cover all shifts.
    - The facility prohibits staff from alerting other staff when unannounced rounds are being conducted.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
    - Each DAC confinement or treatment facility shall implement a policy and practice for wardens and/or the facility associate wardens to conduct and document unannounced rounds to identify and deter sexual abuse and sexual harassment. Such rounds shall occur on all shifts weekly. The policy shall prohibit employees from alerting other employees that these rounds are occurring unless such announcement is related to the legitimate operational functions of the facility.
- *Lumberton Correctional Institution Dormitory Shift Narrative*:
    - Documented unannounced rounds for all dorms, covering all shifts, by several supervisors.
- *Restrictive Housing Daily Log Sheet, Lumberton Correctional Institution*:
    - Documented unannounced rounds for special management unit by several supervisors.
- Site review:
    - Auditor observed unannounced round logs for all housing units.
- Interview with intermediate- or higher-level facility staff:
    - Indicated unannounced rounds are conducted on all shifts.
    - Indicated unannounced rounds are documented in the log book for each housing unit.
    - Indicated unannounced rounds are conducted at different times and

	varies in the order of housing units visited. **Determination**: The facility meets the standard.

115.14	**Youthful inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ LCI Memorandum Re: *115.14(a)-1, dated 01.08.2026* • Site review **Reasoning and analysis**: **115.14(a)** • Facility response: ◦ N/A (*LCI does not house any youthful offenders*). • LCI Memorandum Re: *115.14(a)-1*: ◦ Stated: “This standard does not apply to Lumberton Correctional Institution.” • Site Review: ◦ The auditor observed zero youthful offenders at LCI. **115.14(b)** • Facility response: ◦ N/A (*LCI does not house any youthful offenders*). **115.14(c)** • Facility response: ◦ N/A (*LCI does not house any youthful offenders*). **Determination**: The standard is not applicable to the facility.

115.15	**Limits to cross-gender viewing and searches**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
  - NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025*
  - LCI Memorandum Re: *115.15(b)-1, dated 01.08.2026*
  - NCDAC Form OPA-T30 *Cross-Gender Viewing, Announcement, and Acknowledgement, dated 01.12.2023*
  - *Reminder!* Poster, *undated*
- Site Review
- Interviews with a random sample of staff
- Interviews with offenders

Reasoning and analysis:

115.15(a)

- Facility response:
  - The facility does not conduct cross-gender strip or cross-gender visual body cavity searches of offenders.
  - Zero cross-gender strip or cross-gender visual body cavity searches of offenders have been conducted in the past 12 months.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening:*
  - The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners.
- Site Review:
  - Auditor observed shower curtains, privacy screens, and partial screening for windows in housing units, receiving, and medical, where offenders may be in a state of undress, to obstruct possible cross-gender viewing by non-medical staff.

115.15(b)

- Facility response:
  - N/A for “The facility does not permit cross-gender pat-down searches of female inmates, absent exigent circumstances”.
- LCI Memorandum Re: *115.15(b)-1*:
  - Stated: "This standard does not apply to Lumberton Correctional Institution as we do not house female offenders."

115.15(c)

- Facility response:
  - Facility policy requires that all cross-gender strip searches and cross-gender visual body cavity searches be documented.
  - N/A for: “Facility policy requires that all cross-gender pat-down searches of female offenders be documented”.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - DAC confinement or treatment facilities shall document all cross-gender strip searches and cross-gender visual body cavity searches.

115.15(d)

	• Facility response: ◦ Facility policy and procedures enable offenders to shower, perform bodily functions, and change clothing without opposite-gender, non-medical staff viewing their breasts, buttocks, or genitalia, absent exigent circumstances or incidental to routine cell checks. ◦ Facility policy and procedures require opposite-gender staff to announce their presence when entering a housing unit. • NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*: ◦ Facility opposite-gender staff are required to announce their presence when entering a housing unit. ◦ Facility enables offenders to shower, perform bodily functions, and change clothing without opposite-gender, non-medical staff viewing their breasts, buttocks, or genitalia, absent exigent circumstances or incidental to routine cell checks. • NCDAC Form OPA-T30 *Cross-Gender Viewing, Announcement, and Acknowledgement*: ◦ Staff acknowledgement of requirement for opposite-gender staff to announce their presence when entering a housing unit. • *Reminder!* poster: ◦ Stated in English and Spanish that opposite-gender staff could be in the area at any time. • Site review: ◦ Auditor observed shower curtains across all openings to showers and panels on toilet stalls to obstruct possible cross-gender viewing by non-medical staff. ◦ The lower half of windows in receiving were frosted to prevent cross-gender viewing. ◦ Camera views of receiving and housing unit bathrooms included pixilation to obscure offenders who were in a state of undress. ◦ Female staff made loud opposite-gender announcements when entering housing units. • Interviews with a random sample of staff: ◦ Indicated that female staff announce their presence when entering a housing unit. ◦ Indicated that offenders are able to dress, shower, and toilet without being viewed by female staff. • Interviews with offenders: ◦ Indicated that female staff announce their presence when entering the offender's housing unit. ◦ Indicated that offenders are never naked in full view of female staff. **115.15(e)** This provision is no longer applicable to the compliance finding. **115.15(f)** This provision is no longer applicable to the compliance finding. **Determination**: The facility meets the standard.

115.16	**Inmates with disabilities and inmates who are limited English proficient**

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
  - NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025*
  - Acolad *Interpretation & Translation Services "Access Contact Sheet", dated 01.2026*
  - NCDAC Policy and Procedure E.3900 *Developmental Disabilities, dated 08.06.2024*
  - NCDAC Policy and Procedure E.2600 *Reasonable Accommodations for Offenders with Disabilities, dated 03.31.2021*
  - NCDOC Health Services Policy TX VII-2 *Care and Treatment of Patient – Disabilities, dated 08.2009*
  - NCDAC Poster OPA-T102 *PREA Reporting Help Prevent Sexual Violence, revised 03.24.2023*
  - *Ley de Eliminacion de Violaciones en Prision (PREA) - Denunciar Ayuda A Prevenir La Violencia Sexual En Prision, revised 03.24.2023*
  - *Training Progress Summary – DOI Reasonable Accommodations for Inmates with Disabilities in Accordance with the ADA for Prison Employees (Online), undated*
  - LCI Memorandum Re: *115.16(c)-2, dated 01.08.2026*
- Supplemental documentation
  - *Rompa el Silencio: Tolerancia cero con el abuso sexual y el acoso sexual: Ley para la Eliminación de las Violaciones en la Cárcel (PREA), 03.24.2023*
  - *NCDAC Poster END THE SILENCE Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act, dated 03.24.2023*
  - NCDAC Policy and Procedure P.0400 *Non-English-Speaking Offender Program, dated 10.10.2023*
  - NC Department of Administration (NCDOA) Statewide Term Contract 961C *Translation & Interpretation Services, exp. 12.31.2026*
  - Form OPA-T100 *Person in Confinement of Under Supervision, Education Acknowledgement Form, dated 01.19.2023*
  - NCDAC Form OPA-I30S *Ley Para La Eliminación De La Violación En Las Prisiones (PREA) Servicios De Apoyo, dated 01.01.2023*
  - NCDAC Form OPA-I31S *SERVICIOS DE APOYO DE LA LEY DE ELIMINACIÓN DE VIOLACIONES EN PRISIÓN (PREA): NOTIFICACIÓN DE ESTADO DE PERSONAS EN RECLUSIÓN, dated 01.01.2023*
- Site review
- Interview with agency head designee
- Interviews with offenders with disabilities
- Interviews with offenders who are limited English proficient
- Interviews with a random sample of staff

Reasoning and analysis:

115.16(a)

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

- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
    - Effective communication with deaf or hard of hearing offenders by providing access to interpreters.
    - Written materials are in formats or through methods that ensure effective communication with offenders with disabilities.
- NCDAC Policy and Procedure E.2600 *Reasonable Accommodations for offenders with Disabilities*:
    - Eligible otherwise qualified offenders with a disability shall have the same opportunity for access to jobs, programs, activities, or services as eligible otherwise qualified non-disabled offenders. Offenders in North Carolina institutions shall be provided the same equal effective access, including additional time where necessary, to properly operate the assistive devices/auxiliary aids as those offenders who are non-disabled in completing the same or similar activity.
- NCDOC Health Services Policy TX VII-2 *Care and Treatment of Patient – Disabilities*:
    - Described use of specialized housing, equipment, and/or services for offenders with disabilities to participate in and benefit from facility programs, services, and activities.
- NCDAC Policy and Procedure E.3900 *Developmental Disabilities*:
    - Described specialized case management services for developmentally disabled offenders.
- Acolad *Interpretation & Translation Services* "*Access Contact Sheet*":
    - Provided instructions for on-site and remote video American Sign Language (ASL) interpretation service.
- Statewide Term Contract 961C *Translation & Interpretation Services:*
    - Included American Sign Language (ASL) interpretation service.
- *Training Progress Summary – DOI Reasonable Accommodations for Inmates with Disabilities in Accordance with the ADA for Prison Employees (Online)*:
    - Listed 149 staff who completed the training.
- Site review:
    - Intake staff or case manager were available to assist those with low vision, limited reading skills, or an intellectual disability.
- Interview with agency head designee:
    - Indicated that DAC works with the state's Americans with Disabilities Act (ADA) Office. Receives ADA Office approval for offender education materials.
- Interviews with offenders with disabilities:
    - Indicated facility sexual abuse and sexual harassment information was understood.
    - Indicated a case manager was available to offer assistance if needed.

115.16(b)

- Facility response:
    - The agency has established procedures that provide limited English proficient offenders 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.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
    - Ensure effective communication with limited English proficient offenders by providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.
- NCDAC Policy and Procedure P.0400 *Non-English-Speaking Offender*:
    - Facility signs that provide information and directions to the offender population will be posted in English and Spanish.

- The case manager of a non-English-speaking offender will take the action necessary to help the offender understand the information being communicated in official memoranda that are posted on offender bulletin boards.
- Case management services for non-English-speaking offenders should include assignment to a case manager who has the ability to communicate in other languages or who has access to staff or translation services which will enable effective communications.
- Programs and services comparable to services provided to English speaking offenders should be provided to non-English-speaking offenders. At a minimum, all non-English-speaking offenders will receive primary services.

- Acolad *Interpretation & Translation Services* "*Access Contact Sheet*":
  - Provided instructions for telephonic and remote video interpretation service with limited English proficient offenders.
- Form OPA-T100 *Person in Confinement of Under Supervision, Education Acknowledgement Form*:
  - Section II in Spanish:
    - Listed agency standard of zero-tolerance for sexual abuse or sexual harassment of offenders.
    - Requested signature to affirm understanding of information provided.
- Form OPA-T102S *LAS DENUNCIAS RELACIONADAS CON LA PREA AYUDAN A PREVENIR LA VIOLENCIA SEXUAL:*
  - Spanish language form described ways for offenders to report sexual abuse, sexual harassment, and retaliation.
  - Included telephone number, mailing address, and email address.
  - Stated that the agency accepts anonymous and third-party reports.
- *Rompa el Silencio: Tolerancia cero con el abuso sexual y el acoso sexual: Ley para la Eliminación de las Violaciones en la Cárcel (PREA)*:
  - Spanish language form including zero-tolerance policy, definitions of sexual abuse and sexual harassment, tips for avoiding sexual victimization, offender's right to report, options for reporting, support services available, and steps to take after sexual abuse.
- NCDAC Form OPA-I30S *Ley Para La Eliminación De La Violación En Las Prisiones (PREA) Servicios De Apoyo*:
  - Spanish language form described the PREA Support Person's (PSP) role, investigation process, services available, and how to report retaliation.
- NCDAC Form OPA-I31S *SERVICIOS DE APOYO DE LA LEY DE ELIMINACIÓN DE VIOLACIONES EN PRISIÓN (PREA): NOTIFICACIÓN DE ESTADO DE PERSONAS EN RECLUSIÓN*:
  - Spanish language form for alleged abuser status changes reported to the alleged victim.
- Site review:
  - Auditor observed information about sexual abuse and sexual harassment available in Spanish during intake for newly transferred offenders.
  - Auditor observed Spanish language PREA-related posters posted in housing units and other high traffic areas of the facility for offenders.
  - Auditor accessed an interpreter by phone, on-demand, using the prompts from the Acolad Interpretation & Translation Services "*Access Contact Sheet*".
    - Phone prompts asked for an OPUS number but auditor was able to input a random number.
- Interviews with offenders who are limited English proficient:
  - Indicated facility sexual abuse and sexual harassment information was understandable.
  - Indicated a program staff person provided interpretive services to

communicate effectively with the offender.

115.16(c)

- Facility response:
  - Agency policy prohibits use of offender interpreters, offender readers, or other types of offender assistants except in limited circumstances when offender safety, first-responder staff duties, or investigations could be compromised.
  - In the past 12 months, zero instances where offender interpreters, readers, or other types of offender assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the offender's safety, the performance of first-response duties under §115.64, or the investigation of the offender's allegations.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - Staff will not rely on offender interpreters, readers, or other types of assistants except in limited circumstances where delays could compromise offender safety, staff response, or the investigation process.
- LCI Memorandum Re: *115.16(c)-2*:
  - Stated: "At no point and time has an offender ever been used as an interpreter."
- Interviews with a random sample of staff:
  - Indicated facility staff do not use offender interpreters to assist limited English proficient offenders when making an allegation of sexual abuse or sexual harassment.
  - Indicated interpretive services through the language line would be used if needed.

Determination:

The facility meets the standard.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
  - NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025*
  - Form DAC-HR 004 *Criminal History Record Check, dated 07.2023*
  - Form DAC-HR 005 *Applicant Verification, dated 07.2023*
  - Form DAC-HR 013 *DAC Employee Acknowledgement, dated 07.2023*
- Supplemental documentation
  - Form DAC-HR 008 *Professional Reference Check, dated 07.2023*
- Documentation review
- Interview with administrative (human resources) staff

Reasoning and analysis:

115.17(a)

- Facility response:
  - Agency policy prohibits hiring or promoting any staff or contractor who may have contact with offenders who:
    - Has engaged in sexual abuse in an institutional setting (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 any activity listed in (2).
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - Restated the language of the provision.
- Form DAC-HR 005 *Applicant Verification*:
  - Listed six PREA hiring and promotion prohibition questions.
- Form DAC-HR 013 *DAC Employee Acknowledgement*:
  - Listed same prohibition questions as DAC-HR 005.
- Documentation review:
  - 22 of 22 files, reviewed by the auditor, of staff recent hired or promoted contained completed *DAC PREA Hiring and Prohibitions* forms.

115.17(b)

- Facility response:
  - Agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with offenders.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - Restated the language of the provision.
- Form DAC-HR 005 *Applicant Verification*:
  - Asked: "Have you ever been accused of sexual harassment?"
- Form DAC-HR 013 *DAC Employee Acknowledgement*:
  - Asked same question as DAC-HR 005.
- Interview with administrative (human resources) staff:
  - Indicated the agency considers prior incidents of sexual harassment when determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with offenders.
  - Indicated the prohibition questions are asked during the interview process and again during orientation for new hires.

115.17(c)

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

- In the past 12 months, 70 persons hired who may have contact with offenders who have had criminal background record checks.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening:*
  - Perform a criminal and administrative background records check, to include any applicable North Carolina registry, criminal justice standards commission, or other licensing authorities or bodies.
  - Contained the language of clause (2) from this provision.
- Form DAC-HR 004 *Criminal History Record Check*:
  - Requested applicant information used for criminal history verification.
- Form DAC-HR 008 *Professional Reference Check*:
  - Requested information from applicant's former institutional employers about prohibited behaviors.
- Documentation review:
  - 15 of 15 new employee files, reviewed by the auditor, contained background checks.
  - Four of four employee files, reviewed by the auditor, contained a reference check request to a prior institutional employer.
- Interview with administrative (human resources) staff:
  - Indicated criminal record background checks are conducted for all newly hired employees, who may have contact with offenders.

115.17(d)

- Facility response:
  - Agency policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with offenders.
  - In the past 12 months, three contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with offenders.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - Paraphrased the language of this provision.
- Documentation review:
  - Two of two contractor files, reviewed by the auditor, contained background checks.
- Interview with administrative (human resources) staff:
  - Indicated criminal record background checks are conducted for contractors who may have contact with offenders.

115.17(e)

- Facility response:
  - Agency policy requires that either criminal background record checks be conducted at least every five years for current employees and contractors who have contact with offenders, or that a system is in place for otherwise capturing such information for current employees.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - For current employees and contractors who may have contact with offenders, DAC shall conduct criminal background records checks at least once every five years.
- Documentation review:
  - 10 of 10 applicable staff files, reviewed by the auditor, contained completed five-year background checks.
- Interview with administrative (human resources) staff:
  - Indicated Division of Criminal Investigation (DCI) background checks

	are conducted every five years. **115.17(f)** • NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*: ◦ For all applicants and employees who may have contact with offenders, DAC shall ask about previous misconduct described in this section in written applications, in interviews for hiring or promotions, and in any interviews or written self-evaluations conducted as part of reviews of current employees. ◦ All employees shall have a continuing affirmative duty to disclose sexual misconduct. • Interview with administrative (human resources) staff: ◦ Indicated previous misconduct questions described in section (a) are asked preemployment, during new hire orientation, and for any promotional process ◦ Indicated employees have a continuing affirmative duty to disclose any such misconduct. **115.17(g)** • Facility response: ◦ Agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. • NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*: ◦ Restated the language of the provision. **115.17(h)** • NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*: ◦ Unless prohibited by law, upon receiving a request from an institutional employer for whom an employee or former employee has applied to work, DAC shall provide information on substantiated allegations of sexual abuse or sexual harassment involving the employee or former employee. • Interview with administrative (human resources) staff: ◦ Indicated never had a request but would provide information on substantiated allegations of sexual abuse or sexual harassment involving the former employee, if requested by another agency or facility. **Determination:** The facility meets the standard.

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

Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
- Interview with agency head designee
- Interview with associate warden

Reasoning and analysis:

115.18(a)

- Facility response:
  - The agency/facility has not acquired a new facility or made a substantial expansion or modification to existing facilities since the last PREA audit.
- Interview with agency head designee:
  - Indicated maintenance and engineering staff receive training to think about safety and prevention when designing or altering spaces. PREA director has walked through spaces with maintenance and engineering staff to point out blind spots and identify areas of past incidents.
- Interview with associate warden:
  - Indicated the only major modification to the facility in the last three years was air conditioning installed in all the dorms. Any future modification would include offender safety considerations.

115.18(b)

- Facility response:
  - The agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.
- Interview with agency head designee:
  - Indicated video monitoring equipment cannot always replace staff, but it augments their ability to protect offenders. Monitoring equipment is also used post-incident for investigations and corroboration.
- Interview with associate warden:
  - Indicated the facility would consider offender safety when planning any video monitoring updates.

Determination:

The facility meets the standard.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response

- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
- NCDAC Policy and Procedure PREA-300 *PREA official Response and Investigations, dated 09.04.2025*
- *Letter of Understanding of Assistance Between Lumberton Police Department – Lumberton, N.C. and Lumberton Correctional Institution, dated 11.24.2025*
- NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse, dated 04.26.2024*
- *NCDAC Memorandum Re: Compliance with PREA Investigations Standards, dated 03.05.2026*
- *NCDPS Coordinated Response Overview, 02.06.2018*
- *Lumberton Correctional Institution Organizational Chart, dated 12.27.2024*
- LCI Memorandum Re: *115.21(b)-1, dated 01.13.2026*
- LCI Memorandum Re: *115.21(c)-1, dated 01.13.2026*
- *Letter of Understanding of Assistance Between Southeastern Regional Medical Center – Lumberton, N.C. and Lumberton Correctional Institution, dated 01.02.2025*
- *Sexual Abuse and Harassment Victim Support Memorandum of Agreement, dated 11.25.2025*
- NCDAC Form OPA-I30 *Support Services for Persons in Confinement, dated 01.01.2023*

- Supplemental documentation:
  - LCI Memorandum Re: *Compliance with PREA Standards, dated 03.09.2026*
  - LCI Memorandum Re: *UNC Southeastern Sexual Assault Examinations*, *dated 04.21.2026*
  - *Online Training Status Report, undated*
  - NCDAC *Internal Investigation PREA Investigator Guidelines - Facility, dated 01.01.2023*
  - NCDAC Form OPA-I30S *Ley Para La Eliminación De La Violación En Las Prisiones (PREA) Servicios De Apoyo, dated 01.01.2023*
  - NCDAC Course *PREA Support Person (PSP) Training, undated*
- Interviews with a random sample of staff
- Interview with PREA compliance manager

Reasoning and analysis:

115.21(a)

- Facility response:
  - The agency/facility is responsible for conducting administrative sexual abuse investigations (including offender-on-offender sexual abuse or staff sexual misconduct).
  - The Lumberton Police Department is responsible for conducting criminal sexual abuse investigations (including offender-on-offender sexual abuse or staff sexual misconduct).
  - NCDAC investigators follow a uniform evidence protocol when conducting a sexual abuse investigation.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - A determination shall be made, based upon the amount of time that has passed since the alleged incident and other factors, whether there is a possibility of evidence still existing at the crime scene. If it is determined that evidence may still exist, when possible, the crime scene shall be secured, and any potential evidence shall remain in place for law enforcement examination and investigation. If the crime scene cannot be secured, the crime scene shall be photographed and/

or videotaped, and the evidence, if any, collected, and placed in an evidence bag with an evidence form attached.

- NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations*:
  - A sexual abuse and sexual harassment (SAH) investigator is a DAC employee who has been assigned or designated to administratively investigate a report of alleged offender sexual abuse and/or sexual harassment; and has received specialized training in conducting such investigations in confinement settings.
  - Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence.
  - Alleged offender victims of sexual abuse will be examined by DAC medical staff and transported to the local emergency department when appropriate for forensic evidence collection, sexually transmitted disease testing, counseling, and treatment.
  - In preparation for transporting the offender to the hospital's emergency room, medical protocol shall be followed in order to preserve any possible evidence with an appropriate chain of evidence form attached.
- *NCDPS Coordinated Response Overview*:
  - Described roles and responsibilities for first responder, OIC, facility head, SAH investigator, PSP, and PCM.
- NCDAC *Internal Investigation PREA Investigator Guidelines - Facility*:
  - Gather relevant documentation and evidence, such as:
    - OPUS screens;
    - written statements by staff and/or offenders if already provided;
    - photos;
    - videos telephone transcripts;
    - letters or other materials collected from offender's personal belongings; and
    - history of prior complaints and reports of sexual abuse involving the suspected perpetrator.
- Interviews with a random sample of staff:
  - Indicated all evidence at scene and on alleged victim and alleged abuser is to be preserved.
  - Indicated a sergeant, a lieutenant, and two captains were the designated investigators.

115.21(b)

- Facility response:
  - N/A. Do not house youthful offenders.
  - The protocol was not adapted from the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Examinations, Adults/Adolescents." (*The PREA coordinator confirmed this was an erroneous answer. The uniform evidence protocol was developed from the Department of Justice's national protocol.*)
- LCI Memorandum Re: *115.21(b)-1, dated 01.13.2026*:
  - Stated: "Lumberton Correctional Institution does not house youthful offenders."

115.21(c)

- Facility response:
  - The facility offers all offenders who experience sexual abuse access to forensic medical examinations.

- The facility does not offer offenders who experience sexual abuse access to forensic medical examinations onsite.
- The facility offers all offenders who experience sexual abuse access to forensic medical examinations by an outside facility. Exams are conducted at UNC Southeastern Hospital.
- Forensic medical examinations are offered without financial cost to the victim.
- Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs)
- When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations.
- The facility documents efforts to provide SANEs or SAFEs.
- One forensic medical exam was conducted by a SANE/SAFE for an LCI offender during the past 12 months.

- NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*:
  - All care for sexual abuse will be provided at no cost.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Medical Services will follow medical protocol, which includes provisions for examination, documentation, and transport to the local emergency department when appropriate, where the following will occur, collection of forensic evidence, testing for sexually transmitted diseases, counseling, and prophylactic treatment.
- LCI Memorandum Re: *UNC Southeastern Sexual Assault Examinations*:
  - Documented facility's efforts to provide SANE or SAFE at UNC Southeastern Hospital.

115.21(d)

- Facility response:
  - The facility attempts to make a victim advocate from a rape crisis center available to the victim, either in person or by other means.
  - These efforts are documented.
  - If and when a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff member from a community-based organization or a qualified agency staff member.
- *Sexual Abuse and Harassment Victim Support Memorandum of Agreement*:
  - The Rape Crisis Center of Robeson County agreed to provide victim support and counseling to survivors of sexual abuse and harassment in LCI custody.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - The PREA Support Person (PSP) shall be made available to provide victim advocate services.
- *Lumberton Correctional Institution Organizational Chart*:
  - Two program staff designated as PSP.
- Interview with PREA compliance manager:
  - Indicated a PREA support person (PSP) would accompany the offender to the hospital for the forensic exam, if requested. PSP would also be available during investigation interviews.
  - Indicated a victim advocate from the rape crisis center is available by phone to provide emotional support.

115.21(e)

- Facility response:
  - If requested by the victim, a victim advocate, qualified agency staff

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

- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - As requested by the victim, the PREA support person, of the same gender, shall accompany and support the victim through the forensic medical examination process.
  - As requested by the victim, the PREA support person shall accompany and support the victim through the investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.
- NCDAC Form OPA-I30 *Support Services for Persons in Confinement*:
  - Described the role of the PSP and allowed the offender to accept or decline support services.
  - OPA-I30S - Spanish language form.
- Interview with PREA compliance manager:
  - Indicated the Rape Crisis Center of Robeson County is the local entity with the mission of providing advocacy services to the community. A Memorandum of Agreement between LCI and the Rape Crisis Center of Robeson County was developed and outlined the responsibilities of both parties.

115.21(f)

- Facility response:
  - The agency has requested that the local law enforcement agency responsible for criminal investigations, follow the requirements of paragraphs §115.21 (a) through (e) of the PREA Standards.
- *Letter of Understanding of Assistance Between Lumberton Police Department – Lumberton, N.C. and Lumberton Correctional Institution*:
  - Lumberton Police Department (LPD) will provide assistance to LCI in the event of an emergency.
- LCI Memorandum Re: *Compliance with PREA Standards*:
  - LCI shared *NCDAC Memorandum Re: Compliance with PREA Investigations Standards* with the Lumberton Police Department which requests LPD follow the requirements of §115.21(a)-(e) when conducting a criminal investigation.
- *NCDAC Memorandum Re: Compliance with PREA Investigations Standards:*
  - NCDAC requested local law enforcement follow the requirements of §115.21 (a)-(e).

115.21(g)

Auditor is not required to audit this provision.

115.21(h)

- *Online Training Status Report*:
  - Documentation of specialized victim advocacy training for qualified facility staff including designated PREA support persons.
- NCDAC Course *PREA Support Person (PSP) Training*:
  - Video based training modules covering:
    - Victim centered response to sexual abuse in confinement;
    - Understanding PREA Standards and victim services;
    - Understanding sexual abuse and trauma;
    - Reporting sexual abuse and sexual harassment;

	■ First responder duties; ■ Sexual assault response teams (SART); and ■ Understanding your role as a PREA support person. ◦ 20 question quiz at the end of each module. • Documentation review: ◦ PREA support persons are program staff with appropriate experience and training for the role. **Determination**: The facility meets the standard.

115.22	**Policies to ensure referrals of allegations for investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations*, *dated 09.04.2025* ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Policy and Procedure DAC-OIA-100 *OIA Authority to Conduct Investigations*, dated 01.01.2023 • Supplemental documentation ◦ *https://public.powerdms.com/NCDAC, accessed 04.20.2026* • Documentation review • Interview with agency head designee • Interview with investigative staff **Reasoning and analysis**: **115.22(a)** • Facility response: ◦ The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including offender-on-offender sexual abuse and staff sexual misconduct). ◦ 18 allegations of sexual abuse and sexual harassment received in the past 12 months. ◦ 18 allegations resulted in an administrative investigation in the past 12 months. ◦ One allegation was referred for criminal investigation. ◦ All investigations were completed in the last 12 months. • Documentation review: ◦ The auditor reviewed 14 investigations that occurred in the previous 12 months. The auditor also reviewed nine investigations that occurred outside of the previous 12 months, and 18 allegations that did not meet the

PREA Standards definitions for sexual abuse or sexual harassment.
- Interview with agency head designee:
  - Indicated an investigation is initiated for every allegation received.
  - Indicated facility notifies local law enforcement for criminal cases and documents law enforcement's response.
  - Indicated preliminary reviews determine who the allegation involves, what the allegation entails, and does the allegation meet the definition for offender-on-offender or staff-on-offender, contractor- or volunteer-on-offender sexual abuse and or sexual harassment.

115.22(b)

- Facility response:
  - The agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior.
  - The agency's policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the agency website or made publicly available via other means.
  - The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation.
- *https://public.powerdms.com/NCDAC:*
  - Publicly accessible link that included NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations*.
- NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations:*
  - DAC confinement or treatment facilities shall cooperate with non-DAC law enforcement agencies investigating sexual abuse, providing information upon request, unless prohibited by law. Facilities shall endeavor to remain informed about the progress of the investigation.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy:*
  - Local law enforcement shall be notified if there is evidence or suspicion that criminal conduct may have occurred.
  - PROSECUTIONS: Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. The facility investigator shall work with law enforcement and the district attorney’s office to ensure appropriate criminal prosecution of cases of sexual abuse.
- NCDAC Policy and Procedure DAC-OIA-100 *OIA Authority to Conduct Investigations*:
  - DAC PREA Office will review each incident of sexual abuse or sexual harassment by an employee, volunteer, contractor, or custodial agent to determine:
    - If the reported incident is an allegation of sexual abuse or sexual harassment, as defined by DAC-PREA-300 *PREA Investigations* policy: and
    - If law enforcement must be called.
- Interview with investigative staff:
  - Indicated agency policy requires allegations involving potentially criminal behavior be referred to the Lumberton Police Department.

115.22(c)

- *https://public.powerdms.com/NCDAC*:
  - Included NCDAC Policy and Procedure *PREA-300* which describes the responsibilities of both the agency and the investigating entity.

	115.22(d) Auditor is not required to audit this provision. **115.22(e)** Auditor is not required to audit this provision. **Determination**: The facility meets the standard.

115.31	**Employee training**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.01.2022* ◦ NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025* ◦ NCDAC Course DAC-556, *PREA: Sexual Abuse and Sexual Harassment 101, dated 07.01.2025* ◦ NCDAC Course DAC-448, *PREA: Sexual Abuse and Sexual Harassment 201, dated 07.01.2025* ◦ *Red Flags – Are We Paying Attention to Staff? poster, undated* ◦ NCDAC Form OPA-T10 *PREA Staff Training Acknowledgement of Understanding, dated 11.07.2023* ◦ Online Training Status Report – PREA 101 *Sexual Abuse and Sexual Harassment (In-Service), undated* • Documentation review • Interviews of random sample of staff **Reasoning and analysis**: **115.31(a)** • Facility response: ◦ The agency trains all employees who may have contact with offenders on: ■ the agency's zero-tolerance policy for sexual abuse and sexual harassment; ■ how to fulfill their responsibilities under agency sexual abuse

and sexual harassment prevention, detection, reporting, and response policies and procedures;
        - the right of offenders to be free from sexual abuse and sexual harassment;
        - the right of offenders and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
        - the dynamics of sexual abuse and sexual harassment in confinement;
        - the common reactions of sexual abuse and sexual harassment victims;
        - how to detect and respond to signs of threatened and actual sexual abuse;
        - how to avoid inappropriate relationships with offenders;
        - how to communicate effectively and professionally with offenders, including lesbian, gay, bisexual, transgender, intersex, or gender-nonconforming offenders; and
        - how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
    - All employees and contractors are required to receive the following training: Sexual Abuse and Harassment (SAH) 101/201 training.
    - All employees shall receive annual refresher training as required by policy.
- NCDAC Course DAC-556, *PREA: Sexual Abuse and Sexual Harassment 101*:
    - Training objectives include:
        - Identify the “Prison Rape Elimination Act (PREA) of 2003” and the agency’s zero-tolerance policy of sexual abuse and sexual harassment for offenders/persons under supervision.
        - Define sexual abuse and sexual harassment.
        - Define people in confinement and under supervision right to be free from sexual abuse and sexual harassment, and from retaliation for reporting.
        - Identify relevant laws.
        - Define employee responsibilities when responding to sexual abuse and sexual harassment.
        - Define the unique attributes of working with females in confinement/under supervision.
        - Define the unique attributes of working with males in confinement/under supervision.
        - Define the vulnerabilities of people in confinement/under supervision.
        - Identify the dynamics of sexual abuse and sexual harassment of people in confinement and under supervision.
        - Identify how to detect signs of threatened and actual sexual abuse of people in confinement and under supervision.

        - Identify the common reactions to sexual abuse and sexual harassment.
        - Identify methods of avoiding inappropriate relationships with people in confinement and under supervision.
        - Identify techniques for communicating effectively and professionally with people in confinement and under supervision including lesbian, gay, bisexual, transgender, intersex (LGBTI) and gender nonconforming populations.
- Interviews of random sample of staff:
    - Indicated received training on the 10 elements of the provision during initial basic training and annual in-service trainings.

115.31(b)

- Facility response:
    - Training is not tailored to the gender of the offenders at the facility. PREA 101 and PREA 201 address how staff are to conduct themselves with the same and opposite gender.
    - Employees who are reassigned from facilities housing the opposite gender are given additional training. (*Staff have previously received training tailored to the unique attributes of each gender as part of PREA: Sexual Abuse and Sexual Harassment 101)*.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - New employees shall receive the Sexual Abuse and Harassment 101 training that addresses the following: Unique attributes of working with males and females in confinement/supervision.
- NCDAC Course DAC-556, *PREA: Sexual Abuse and Sexual Harassment 101*:
    - Listed the unique attributes of working with females in confinement/ under supervision.
    - Listed the unique attributes of working with males in confinement/ under supervision.

115.31(c)

- Facility response:
    - Between trainings the agency provides employees who may have contact with offenders with refresher information about current policies regarding sexual abuse and sexual harassment. Postings of items throughout the facility.
    - Employees who may have contact with offenders receive refresher training on the PREA requirements. Periodic readings of PREA related documentation are conducted during shift briefings.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Annual Refresher Training and Information:

        - All staff shall receive SAH 101 refresher training every two years;
        - All staff shall receive SAH 201 refresher information during the alternate years;
        - Emphasizing zero-tolerance, duty to report, and current sexual abuse and sexual harassment policies and procedures.
    - NCDAC Course DAC-448, *PREA: Sexual Abuse and Sexual Harassment 201*:
        - Training objectives include:
            - Identify the Prison Rape Elimination Act (PREA) and prevention strategies.
            - Define sexual abuse and sexual harassment of people in confinement and under supervision.
            - Define relevant North Carolina General Statutes.
            - Identify the NCDAC policies on sexual abuse and sexual harassment.
            - Identify ways to report sexual abuse and sexual harassment.
            - Define first responder duties.
            - Identify disciplinary sanctions.
    - NCDAC Form OPA-T10 *PREA Staff Training Acknowledgement of Understanding*:
        - Zero-tolerance;
        - Professional boundaries;
        - PREA definitions of sexual abuse and sexual harassment;
        - North Carolina General Statute 14-27.31 - custodial victimization; and
        - Staff reporting methods
    - *Red Flags – Are We Paying Attention to Staff?* poster:
        - Identified indicators of undue familiarity between staff and offenders.

115.31(c)

- Facility response:
    - The agency documents that employees who may have contact with offenders understand the training they have received through employee signature or electronic verification.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Certification of employee understanding of material shall be documented by signing the Form OPA-T10 PREA Acknowledgement; or electronic signature when completing the E-Learning course authorized by the agency.
- Documentation review:
    - Online Training Status Report – PREA 101 *Sexual Abuse and Sexual Harassment* (In-Service):
        - Auditor observed documentation for 65 facility staff who completed required PREA training in 2026.

	Determination: The facility meets the standard.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Course DAC-556, *PREA: Sexual Abuse and Sexual Harassment 101, dated 07.01.2025* ◦ NCDAC Form OPA-T10 *PREA Staff Training Acknowledgement of Understanding, revised 11.07.2023* • Documentation review • Interview with contractor or volunteer who has contact with offenders **Reasoning and analysis**: **115.32(a)**: • Facility response: ◦ All volunteers and contractors who have contact with offenders have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. ◦ 100 volunteers and contractors have received this training. • Interview with contractor or volunteer who has contact with offenders: ◦ Indicated PREA training was conducted before contact with offenders. **115.32(b)** • Facility response: ◦ The level and type of training provided to volunteers and contractors is not based on the services they provide and level of contact they have with offenders. All volunteers and contractors complete PREA 101 and 201 trainings. ◦ All volunteers and contractors who have contact with offenders have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy:* ◦ Volunteers, custodial agents, and contractors shall receive the Sexual Abuse and Harassment 101 training. ◦ Will verify understanding of training by signing the PREA Acknowledgement Form.

- NCDAC Course DAC-556, *PREA: Sexual Abuse and Sexual Harassment 101*:
    - Training objectives include:
        - Identify the “Prison Rape Elimination Act (PREA) of 2003” and the agency’s zero-tolerance policy of sexual abuse and sexual harassment for offenders/persons under supervision.
        - Define sexual abuse and sexual harassment.
        - Define people in confinement and under supervision right to be free from sexual abuse and sexual harassment, and from retaliation for reporting.
        - Identify relevant laws.
        - Define employee responsibilities when responding to sexual abuse and sexual harassment.
        - Define the unique attributes of working with females in confinement/under supervision.
        - Define the unique attributes of working with males in confinement/under supervision.
        - Define the vulnerabilities of people in confinement/under supervision.
        - Identify the dynamics of sexual abuse and sexual harassment of people in confinement and under supervision.
        - Identify how to detect signs of threatened and actual sexual abuse of people in confinement and under supervision.
        - Identify the common reactions to sexual abuse and sexual harassment.
        - Identify methods of avoiding inappropriate relationships with people in confinement and under supervision.
        - Identify techniques for communicating effectively and professionally with people in confinement and under supervision including lesbian, gay, bisexual, transgender, intersex (LGBTI) and gender nonconforming populations.
- Interview with contractor or volunteer who has contact with offenders:
    - Indicated training consisted of understanding zero-tolerance, how and to whom to report sexual abuse or sexual harassment, and definitions of sexual abuse and sexual harassment.

115.32(c)

- Facility response:
    - The agency maintains documentation confirming that volunteers and contractors understand the training they have received.
- NCDAC Form OPA-T10 *PREA Staff Training Acknowledgement of Understanding*:
    - Zero-tolerance;
    - Professional boundaries;
    - PREA definitions of sexual abuse and sexual harassment;
    - North Carolina General Statute 14-27.31 - custodial victimization; and
    - Staff reporting methods.
- Document review:
    - Six of six contractor or volunteer records, reviewed by the auditor, contained completion of NCDAC Course DAC-556, *PREA: Sexual Abuse and Sexual Harassment* 101 and/or OPA-T10 PREA *Staff Training Acknowledgement of Understanding*.

Determination:

The facility meets the standard.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure DAC-PREA-100 *PREA Prevention Planning & Screening, dated 09.04.2025* ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Form OPA-T100 *Person in Confinement or Under Supervision Education Acknowledgement, revised 10.18.2024* ◦ NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence, dated 03.24.2023* ◦ NCDAC Poster OPA-T102S *Ley y para la Eliinacion de la Violacion en las Prisiones (PREA) Reportelo Ayude A Prevenir La Violencia Sexual En Las Prisones, revised 01.01.2023* ◦ NCDAC Factsheet OPA-T101 Facilitator Talking Points: *Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement, dated 04.09.2025* ◦ NCDOC Health Services Policy TX VII-2 Care and Treatment of Patient – Disabilities, dated 08.2009 ◦ NCDAC Policy and Procedure E.2600 *Reasonable Accommodations for Offenders with Disabilities, dated 03.31.2021* ◦ NCDAC Policy and Procedure E.3900 *Developmental Disabilities, dated 08.06.2024* • Supplemental documentation: ◦ *Case Management Screening, various dates* ◦ Acolad *Interpretation & Translation Services* "*Access Contact Sheet*", *dated 02.2026* ◦ NCDAC OPUS Information - *Case Management Notes, various dates* ◦ NCDAC Pamphlet *End the Silence: Zero Tolerance for Sexual Abuse and Sexual Harassment, dated 01.2026* ◦ *Rompa el Silencio: Tolerancia cero con el abuso sexual y el acoso sexual: Ley para la Eliminación de las Violaciones en la Cárcel (PREA), undated* • Site review • Documentation review • Interview with intake staff • Interviews with offenders **Reasoning and analysis:** **115.33(a)** • Facility response: ◦ Offenders receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. ◦ 1202 of 1202 offenders admitted during the past 12 months were given this information at intake. • NCDAC Policy and Procedure DAC-PREA-100 *PREA Prevention Planning & Screening*: ◦ All offenders shall receive, during reception, information explaining the

agency's zero tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse and sexual harassment, prevention/intervention, self-protection, treatment, and counseling.

- NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement*:
  - Right to be free from sexual abuse and sexual harassment;
  - Ways to report an allegation;
  - Agency and facility response to an allegation; and
  - Access to outside confidential support services.
- Site review:
  - Auditor observed:
    - LCI staff reviewed with transferred offender the agency's zero-tolerance policy regarding sexual abuse and sexual harassment, internal and external methods for report incidents or suspicions of sexual abuse or sexual harassment, and the facility's response to an allegation.
    - Included reading NCDAC Factsheet OPA-T101 *Facilitator Talking Points* and other documents aloud to make accommodations for offenders with low vision or limited reading skills.
    - Had access to interpretation services including American Sign Language (ASL) through *Acolad Interpretation & Translation Services* "*Access Contact Sheet*".
    - Had offender sign OPA-T100 form after reviewing material.
- Interview with intake staff:
  - Indicated zero-tolerance policy and how to report incidents of sexual abuse or sexual harassment are reviewed with each offender.
  - Indicated all offenders, upon transfer to the facility, are presented with required sexual safety information.
- Interviews with offenders:
  - Indicated that information about sexual abuse and sexual harassment was reviewed upon arrival to the facility.

115.33(b)

- Facility response:
  - 949 of 949 offenders admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.
- NCDAC OPUS Information - *Case Management Notes*:
  - Listed all case management screenings for an offender.
  - Case management screenings included:
    - Required offender PREA initial and comprehensive education sessions at a diagnostic facility; and
    - Required offender PREA information sessions at all other facilities.
- Interview with intake staff:
  - Indicated staff review the required sexual abuse and sexual harassment information verbally to ensure offenders understand the information presented.
  - Indicated initial and comprehensive PREA education for offenders was completed at a diagnostic facility before being transferred to LCI.
  - Indicated offenders received sexual safety information upon transfer to LCI from a diagnostic facility or from another facility.
- Interview with offenders:

- Indicated received information about how to report and the right to be free from sexual abuse, sexual harassment, and retaliation for reporting within a day of transferring to the facility.

115.33(c)

- Facility response:
  - All offenders were educated within 30 days of arrival.
  - Agency policy requires that offenders who are transferred from one facility to another be educated regarding their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents, to the extent that the policies and procedures of the new facility differ from those of the previous facility.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - All offenders shall receive education about sexual abuse and sexual harassment upon transfer to a different facility.
- Interview with intake staff:
  - Indicated all offenders, upon transfer to the facility, are presented with required sexual safety information.

115.33(d)

- Facility response:
  - Offender PREA education is available in formats accessible to all offenders, including:
    - Those who are limited English proficient;
    - Those who are deaf;
    - Those who are visually impaired;
    - Those who are otherwise disabled; and
    - Those who are limited in their reading skills.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Appropriate provisions shall be made as necessary for offenders not fluent in English, persons with disabilities, and those with low literacy levels.
- NCDOC Health Services Policy TX VII-2 *Care and Treatment of Patient – Disabilities*:
  - Described use of specialized equipment, and/or services for offenders with disabilities to participate in and benefit from facility programs, services, and activities.
- NCDAC Policy and Procedure E.3900 *Developmental Disabilities*:
  - Described specialized case management services for developmentally disabled offenders.
- NCDAC Policy and Procedure E.2600 *Reasonable Accommodations for Offenders with Disabilities*:
  - Described accommodation process for qualified offenders with a disability to access jobs, programs, activities, or services offered by DAC.
- Site review:
  - Auditor observed Spanish language copies of offender education materials available:
    - Section II of NCDAC Form OPA-T100 *Prison Rape Elimination Act (PREA) Person in Confinement or Under Supervision Education Acknowledgement;*
    - NCDAC Poster OPA-T102S *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence; and*

            - Rompa el Silencio: Tolerancia cero con el abuso sexual y el acoso sexual: Ley para la Eliminación de las Violaciones en la Cárcel (PREA):
                - Spanish language version of NCDAC pamphlet *End the Silence*.
    - Staff had access to the *Acolad Interpretation & Translation Services* "*Access Contact Sheet*" which included American Sign Language (ASL).
    - Staff used NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement* to read required PREA information to offenders.
    - Intake staff read forms to transferred offenders including those who had low vision, limited reading skills and/or a cognitive disability.

115.33(e)

- Facility response:
    - The agency maintains documentation of offender participation in PREA education sessions.
- *Case Management Screening*:
    - Offenders sign NCDAC Form OPA-T100 *Person in Confinement or Under Supervision Education Acknowledgement* after completing PREA-related education and rescreen process.
        - Zero-tolerance for sexual abuse and sexual harassment of offenders;
        - Right to be free from sexual abuse, sexual harassment, and retaliation for reporting; and
        - Encouraged to report threats or allegations to staff.
- Documentation review:
    - 26 of 26 offender files, reviewed by the auditor, contained an initial *Case Management Screening* including acknowledgment of sexual safety education information received after transfer to LCI.

115.33(f)

- Facility response:
    - The agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats.
- NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence* in English and Spanish:
    - Described ways for offenders to report sexual abuse, sexual harassment, and retaliation.
    - Included telephone number, mailing address, and email address.
    - Stated that the agency accepts anonymous and third-party reports.
    - OPA-T102(S) – Spanish language version.
- NCDAC Pamphlet *End the Silence: Zero Tolerance for Sexual Abuse and Sexual Harassment* in English and Spanish:
    - Zero tolerance policy;
    - Right to report;
    - Internal, external, and third-party reporting methods;
    - Rape crisis center phone number;
    - Steps to take after sexual abuse;
    - Definitions of sexual abuse, sexual harassment, and staff voyeurism; and
    - Tips for avoiding sexual abuse and harassment.
    - Rompa El Silencio – Spanish language version of *End the Silence* pamphlet.

	• Site review: ◦ Auditor observed key information posted in receiving, dining hall, visitation, housing units, and other high traffic areas for offenders. **Determination**: The facility meets standard.

115.34	**Specialized training: Investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ Training Progress Summary *PREA – Sexual Abuse and Sexual Harassment Investigator's Workshop 2018 "The Basics – Fundamentals Building Blocks of a SAH Investigation", dated 01.13.2026* ◦ NCDAC Course Certificate of Completion *PREA – Credibility Assessments in Investigations, various dates* • Supplemental documentation: ◦ Training Progress Summary *PREA – Investigating Sexual Abuse in a Confinement Setting, undated* ◦ *PREA: Investigating Sexual Abuse in a Confinement Setting* course, *dated 05.31.2023* ◦ NCDPS Course DPS-571 *PREA: Sexual Abuse and Sexual Harassment Investigations, for the Office of Special Investigations, dated 07.01.2017* • Interview with investigative staff **Reasoning and analysis**: **115.34(a)** • Facility response: ◦ Agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings. Sexual abuse investigation training is completed in the learning management system. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ Shall receive training on conducting sexual abuse and harassment investigations in a confinement setting. Such training shall include: ■ Techniques for interviewing sexual abuse victims; ■ Proper use of Miranda and Garrity Warnings; ■ Sexual abuse evidence collection in a confinement setting; and ■ Criteria and evidence required to substantiate a case for administrative action or prosecution referral.

- Interview with investigative staff:
    - Indicated investigator training included all the steps for writing a comprehensive incident report in OPUS, techniques for interviewing alleged victims, alleged abusers, and witnesses, identifying and collecting physical, electronic, and testimonial evidence, and then evaluating all evidence to making an outcome determination based on the *preponderance of the evidence*.

115.34(b)

- *PREA: Investigating Sexual Abuse in a Confinement Setting* training topics included:
    - Sexual abuse in confinement;
    - Investigative process;
    - Working with victims;
    - Interview techniques;
    - Institutional culture;
    - N.C. specific sexual assault and harassment investigator training; and
    - A quiz at the end of each chapter.
- NCDPS Course DPS-571 *PREA: Sexual Abuse and Sexual Harassment Investigations, for the Office of Special Investigations*:
    - Specialized training for the Office of Special Investigations - Sexual Abuse and Sexual Harassment Investigators.
- Interview with investigative staff:
    - Indicated that Miranda and Garrity warnings were reviewed during training.
    - Indicated the *preponderance of the evidence* is the evidentiary standard used to determine the outcome of an administrative investigation.

115.34(c)

- Facility response:
    - The agency maintains documentation showing that investigators have completed the required training.
    - Four investigators currently employed at LCI who has completed the required training.
- Training Progress Summary *PREA – Investigating Sexual Abuse in a Confinement Setting*:
    - Displayed specialized investigator training completed by seven employees including the four designated PREA investigators for the facility.
- NCDAC Course Certificate of Completion *PREA – Credibility Assessments in Investigations, various dates*:
    - Displayed additional investigator training completed by the four designated PREA investigators for the facility.
- Training Progress Summary *PREA – Sexual Abuse and Sexual Harassment Investigator's Workshop 2018 "The Basics – Fundamentals Building Blocks of a SAH Investigation"*:
    - Displayed additional investigator training completed by six employees including the four designated PREA investigators for the facility.

115.34(d)

Auditor is not required to audit this provision.

Determination:

The facility meets the standard.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ LCI Memorandum Re: *115.35(b)-1, dated 01.13.2026* ◦ Online Training Status Report – *PREA for Health Services, undated* ◦ NCDAC Training Course Record – *PREA for Nurses, undated* ◦ NCDAC Course Completion Certificate – *PREA for Health Services*, *various dates* • Document review • Interviews with medical and mental health staff **Reasoning and analysis**: **115.35 (a)** • Facility response: ◦ The agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. ◦ 25 of 25 medical and mental health care practitioners who work regularly at this facility received the training required by agency policy. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ All full- and part-time medical and mental health care practitioners who work regularly in its facilities shall be trained in: ■ Detecting and assessing signs of sexual abuse and sexual harassment. ■ Preserving physical evidence of sexual abuse. ■ Responding effectively and professionally to victims of sexual abuse and sexual harassment. ■ How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. • Interviews with medical and mental health staff: ◦ Indicated completion of *PREA - for Health Services* course which included detecting and assessing signs of sexual abuse, preserving physical evidence including requesting the alleged victim does not complete any hygiene tasks, responding effectively to victims, and reporting allegations to the OIC. **115.35(b)** • Facility response: ◦ Medical staff at this facility do not conduct forensic medical exams. • LCI Memorandum Re: *115.35(b)-1:* ◦ Stated: “Lumberton Correctional does not conduct any forensic medical exams.” • Interview with medical staff: ◦ Indicated forensic medical exams are conducted offsite and offenders

	who allege sexual abuse are sent to the UNC Southeastern Hospital Emergency Department. **115.35(c)** • Facility response: ◦ The agency maintains documentation showing that medical and mental health practitioners have completed the required training. • Training Progress Summary – *PREA for Health Services*: ◦ Listed 11 staff who completed the required PREA specialized training for medical and mental health practitioners. • NCDAC Training Course Record – *PREA for Nurses*: ◦ Listed 12 staff who completed the required PREA specialized training for medical and mental health practitioners. • NCDAC Course Completion Certificate – *PREA for Health Services*: ◦ PREA specialized training course completion certificates for two staff. • Documentation review: ◦ Nine of nine medical or mental health practitioners' training documentation, reviewed by the auditor, contained completion of the specialized training required by the standard. **115.35(d)** • Documentation review: ◦ Nine of nine medical or mental health practitioner's training documentation, reviewed by the auditor, contained completed training mandated for employees under § 115.31 or contractors under § 115.32 including: ■ DAC-PREA-OPA T10 *Information for Person(s) with Direct and Indirect Contact, and/or* ■ PREA 101-*Sexual Abuse and Sexual Harassment, and/or* ■ PREA 201-*Sexual Abuse and Sexual Harassment*. **Determination**: The facility meets the standard.

115.41	**Screening for risk of victimization and abusiveness**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* • Supplemental documentation ◦ NCDAC OPA-S010 *Screening for Risk, dated 10.22.2024* ◦ *Case Management Screening List, various dates* • Site review

- Documentation review
- Interview with staff responsible for risk screening
- Interviews with offenders

Reasoning and analysis:

115.41(a)

- Facility response:
  - The agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other offenders.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - All offenders and safekeepers shall receive a screening inventory, administered via the web-based OPUS intake system, within 24 hours after admission. Diagnostic Services staff shall conduct screening to determine an offender's risk of being sexually abused by other offenders or their risk of being sexually abusive towards other offenders.
- Site review:
  - Offenders completed the admission screening at a diagnostic facility prior to being transferred to LCI.
  - Offenders answered the rescreening questions upon arrival to LCI.
  - Screening was conducted away from other offenders.
- Interview with staff responsible for risk screening:
  - Indicated offenders have their screening for risk of sexual victimization and sexual abusiveness updated upon transfer from another facility.
- Interviews with offenders:
  - Indicated offenders were asked rescreening questions the day of arrival or the next day.

115.41(b)

- Facility response:
  - The policy requires that offenders be screened for risk of sexual victimization or risk of sexually abusing other offenders within 72 hours of their intake.
  - 1156 of 1156 offenders entering the facility within the past 12 months, whose length of stay in the facility was for 72 hours or more, were screened for risk of sexual victimization or risk of sexually abusing other offenders within 72 hours of their entry into the facility.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - All offenders and safekeepers shall receive a screening inventory, administered via the web-based OPUS intake system, within 24 hours after admission to DOI. Diagnostic Services staff shall conduct screening to determine an offender's risk of being sexually abused by other offenders or their risk of being sexually abusive towards other offenders.
  - Upon transfer to another facility, within 24 hours, the PCM and/or OIC shall review an offender's risk of victimization and abusiveness by reviewing the dashboard and acknowledging housing placement is appropriate.
- *Case Management Screening List*:
  - Contained offender's initial screening and rescreening dates at LCI.
- Documentation review:
  - 26 of 26 offender's documentation, reviewed by the auditor, contained

screening dates within 72 hours of transfer to LCI.
    - An offender may occasionally miss the 72-hour deadline for screening due to a court date in another county, hospital stay, or other circumstance beyond the control of the facility.
- Interview with staff responsible for risk screening:
    - Indicated offenders are ordinarily screened within a day of transfer from another facility.
- Interviews with offenders:
    - Indicated screening questions included being asked about prior sexual abuse, sexual orientation, and perceived safety.

115.41(c)

- Facility response:
    - Risk assessment is conducted using an objective screening instrument.

115.41(d) and (e)

- Documentation review:
    - New admission screenings at a diagnostic facility use the NCDAC OPA-S010 *Screening for Risk* objective screening instrument.
        - Contained six questions where the offender's answer was used in assessing risk of sexual victimization and abusiveness.
        - Contained eight data points from offender information screen used in the assessment.
        - Contained one question answered by screening staff used in the assessment.
- Interview with staff responsible for risk screening:
    - Indicated the initial screening inventory considers all factors listed in 115.41(d) and (e).
    - Indicated the initial screening inventory is a combination of offender responses and offender data previously collected.
    - Indicated the rescreening questions are used to update offender's risk for victimization upon transfer from another facility.

115.41(f)

- Facility response:
    - The policy requires that the facility reassess each offenders' risk of victimization or abusiveness within a set time period, not to exceed 30 days after the offenders' arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening.
    - 949 of 949 offenders, who entered the facility within the past 12 months and whose length of stay in the facility was over 30 days or more, were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Within a set time period, not to exceed 30 days from the offender’s arrival at the facility, the facility will reassess the offender’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.
- Documentation review:
    - Rescreening at LCI consisted of asking offender three questions to

update the initial screening.
    - 23 of 23 applicable offender's documentation, reviewed by the auditor, contained a rescreening date within 30 days of arrival date.
    - An offender may occasionally miss the 30-day deadline for rescreening due to a court date in another county, hospital stay, or other circumstance beyond the control of the facility.
- Interview with staff responsible for risk screening:
    - Indicated offenders are rescreened between 15 and 30 days after transfer to the facility.
- Interviews with offenders:
    - Indicated offenders were asked similar questions during a second meeting with their case manager.

115.41(g)

- Facility response:
    - The policy requires that an offender's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the offender's risk of sexual victimization or abusiveness.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Restated the language of the provision.
- Interview with staff responsible for risk screening:
    - Indicated offenders are reassessed based on referral, request, incident of sexual abuse, or any other relevant information.

115.41(h)

- Facility response:
    - The policy prohibits disciplining offenders for refusing to answer (or for not disclosing complete information related to) questions regarding: (a) whether or not the offender has a mental, physical, or developmental disability; (b) whether or not the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) whether or not the offender has previously experienced sexual victimization; and (d) the offender's own perception of vulnerability.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Offenders may not be disciplined for refusing to answer or for not disclosing complete information during screening or assessment.
- Interview with staff responsible for risk screening:
    - Indicated offender would not be disciplined. Staff would document the offender declined to answer one or more questions.

115.41(i)

- Site review:
    - Auditor observed electronic files access was profile based.
    - Auditor observed physical file storage access was restricted by locks.
- Interview with PREA coordinator:
    - Indicated access to offender risk assessments is based on staff roles and profiles to protect sensitive information. The warden, PREA compliance staff, and screening staff have access to this information.
- Interview with PREA compliance manager:
    - Indicated screening information is limited to the case manager

	assigned to the offender, medical and mental health staff for referrals, and staff responsible for housing, job, and program placements. • Interview with staff responsible for risk screening: ◦ Indicated information is limited to the assigned case manager and his or her supervisor. **Determination**: The facility meets the standard.

115.42	**Use of screening information**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* • Supplemental documentation ◦ NCDAC OPA-S010 *Screening for Risk, dated 10.22.2024* ◦ *PREA Report – High Risk for Victimization, undated* ◦ *PREA Report – High Risk for Aggressors, undated* • Documentation review • Interview with PREA compliance manager • Interview with staff responsible for risk screening **Reasoning and analysis:** **115.42(a)** • Facility response: ◦ The agency/facility uses information from the risk screening required by §115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ Restated the language of the provision. • NCDAC OPA-S010 *Screening for Risk*: ◦ Included determination of high risk for victimization (HRV) and/or abusiveness (HRA). • *PREA Report - High Risk for Victimization*: ◦ Listed name, bed assignment, and job/primary assignment for each HRV offender. • *PREA Report - High Risk for Abusiveness*: ◦ Listed name, bed assignment, and job/primary assignment for each HRA offender. • Interview with PREA compliance manager: ◦ Indicated housing assignment determinations include HRV and HRA

information to deter victimization. HRV offenders are placed away from HRA offenders. PCM monitors housing video and HRV and HRA offender lists to ensure housing, programing, and job separation.

115.42(b)

- Facility response:
  - The agency/facility makes individualized determinations about how to ensure the safety of each offender.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - The facility shall make individualized determination for bed assignments, based on facility housing designs, to ensure the safety of each offender.
  - Facilities will consider such factors as the amount of staff supervision in the area, the presence or absence of surveillance equipment, and whether the job is in an isolated area prior to making assignments for high-risk abusers.
  - Facilities shall take appropriate action to ensure all program assignments are appropriate for high-risk abusers.
- NCDAC OPA-S010 *Screening for Risk*:
  - Displayed HRA and HRV offender lists to facilitate individualized housing, work, programing, and education assignments.
- Documentation review:
  - HRV offenders were assigned to several housing units and various job assignments.
- Interview with staff responsible for risk screening:
  - Indicated offender's screening information is used for determining appropriate housing, work, and program placements.

115.42(c)

Auditor no longer audits this provision.

115.42(d)

Auditor no longer audits this provision.

115.42(e)

Auditor no longer audits this provision.

115.42(f)

Auditor no longer audits this provision.

115.42(g)

Auditor no longer audits this provision.

Determination:

The facility meets the standard.

115.43	**Protective Custody**
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - LCI Memorandum Re: *115.43(e)-1, dated 01.13.2026*
- Supplemental documentation
  - *PREA Report – High Risk for Victimization*, *undated*
- Interview with associate warden
- Interview with staff who supervise offenders in segregated housing

Reasoning and analysis:

115.43(a)

- Facility response:
  - The agency has a policy prohibiting the placement of offenders 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.
  - Zero offenders at risk for sexual victimization were held in involuntary segregated housing in the past 12 months.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.
- *PREA Report – High Risk for Victimization*:
  - Listed name and bed assignment for HRV offenders.
  - Included assignments for several housing units.
- Interview with associate warden:
  - Indicated offenders at high risk for sexual victimization are assigned to a different housing unit or a different area of a housing unit away from HRA offenders. Warden and PCM monitor housing and work assignments.

115.43(b)

- Interview with staff who supervise offenders in segregated housing:
  - Indicated an offender at high risk for victimization is not placed in restrictive housing based on that designation. An offender who reported sexual abuse can request segregated housing and then would be moved back to regular population when he feels safe.

115.43(c)

- Facility response:
  - In the past 12 months, zero offenders at risk of sexual victimization were assigned to involuntary segregated housing.

115.43(d)

- Facility response:
  - From a review of case files, zero offenders at risk for sexual

victimization were held in involuntary segregated housing in the past 12 months.

115.43(e)

- Facility response:
  - If an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Every 30 days, the facility shall afford each such offender a review to determine whether there is a continuing need for separation from the general population.
- LCI Memorandum Re: *115.43(e)-1*:
  - Stated: “Lumberton Correctional has not had any offenders placed in segregated housing involuntarily.”

Determination:

The facility meets the standard.

115.51	**Inmate reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence, dated 03.24.2023*
  - NCDAC Poster OPA-T102S *Ley y para la Eliinacion de la Violacion en las Prisiones (PREA) Reportelo Ayude A Prevenir La Violencia Sexual En Las Prisones, revised 01.01.2023*
  - NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement, dated 04.09.2025*
  - *Sexual Abuse and Harassment Victim Support Memorandum of Agreement, dated 11.25.2025*
  - NCDAC Office of Staff Development and Training – *PREA: Sexual Abuse and Sexual Harassment 101, dated 07.01.2025*
  - NCDAC Office of Staff Development and Training – *PREA: Sexual Abuse and Sexual Harassment 201, dated 07.01.2025*
- Supplemental documentation
  - NCDAC Policy PREA 200 - *PREA Reporting, dated 09.04.2025*
  - NCDAC Pamphlet *End the Silence: Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act, dated 03.24.2023*

- *Rompa el Silencio: Tolerancia cero con el abuso sexual y el acoso sexual: Ley para la Eliminación de las Violaciones en la Cárcel (PREA), 03.24.2023*
- Site review
- Interview with PREA compliance manager
- Interviews with a random sample of staff
- Interviews with offenders

Reasoning and analysis:

115.51(a)

- Facility response:
  - The agency has established procedures allowing for multiple internal ways for offenders to report privately to agency officials about: sexual abuse or sexual harassment; retaliation by other offenders or staff for reporting sexual abuse and sexual harassment; and staff neglect or violation of responsibilities that may have contributed to such incidents.
- NCDAC Policy PREA-200 *PREA Reporting*:
  - Offenders may report sexual abuse or sexual harassment allegations via the following methods:
    - Notifying any DAC employee;
    - Administrative remedy process;
    - PREA/grievance locked box located at each DAC confinement or treatment facility; or
    - Contacting the DAC PREA Office by email at *PREA@NCDAC.gov*.
- NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement*:
  - Report to any departmental employee; or
  - PREA Office at MSC 4201.
- NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence*:
  - Included internal ways for offenders to report sexual abuse, sexual harassment, or retaliation:
    - To any departmental employee; or
    - Through the administrative remedy process (grievance).
  - Stated employees have a responsibility to do whatever is reasonable and necessary to reduce incidents of sexual abuse, sexual harassment, and to respond appropriately when they do occur.
  - OPA-T102S – Spanish language poster.
- NCDAC Pamphlet *End the Silence - Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act*:
  - Internal reporting includes:
    - Reporting to any staff, volunteer, contractor, medical, or mental health staff;
    - Submitting a grievance or sick call slip;
    - Reporting to the PREA coordinator or PREA compliance manager;
    - Submitting a third-party report on behalf of another offender; or
    - By writing to the PREA Office at MSC 4265, Raleigh, NC.
- *Rompa el Silencio: Tolerancia cero con el abuso sexual y el acoso sexual: Ley para la Eliminación de las Violaciones en la Cárcel (PREA)*:
  - Spanish language version of NCDAC Pamphlet *End the Silence.*
- Site review:
  - Auditor observed:

        - Posters OPA-T102, OPA-T102S, and/or *End the Silence* (English and Spanish) displayed in housing units, receiving, visitation, clothes house, and dining hall.
        - Signage that was clear with appropriately sized text, and placed at a suitable height.
        - Locked boxes for grievances and mail were available for offenders to drop letters into.
    - Offenders and staff indicated, during informal conversations with the auditor, offenders could report sexual abuse or harassment to officers, supervisors, administrators, medical staff, case managers, or through the grievance process.
- Interviews with a random sample of staff:
    - Indicated offenders can report privately to any staff person or through the grievance process.
- Interviews with offenders:
    - Indicated reports could be made to officers, supervisors, medical staff, case managers, or by submitting a grievance.

115.51(b)

- Facility response:
    - The agency provides at least one way for offenders to report abuse or harassment to a public or private entity or office that is not part of the agency.
    - The agency has a policy requiring offenders detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.
- NCDAC Policy PREA-200 *PREA Reporting*:
    - Offenders may report sexual abuse or sexual harassment allegations via the following methods:
        - Contacting the external organization at (972) 535-3499 which is only accessible by offender phones.
        - Contacting the anonymous DAC Fraud, Waste, Abuse and Misconduct Hotline at (844) 208-4018.
        - Contacting a community-based organization that provides services to victims of sexual abuse or sexual harassment. A signed consent form is required before reporting on behalf of an offender.
        - Offenders detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the US Department of Homeland Security.
- NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence*:
    - Included external options for offenders to report sexual abuse, sexual harassment, or retaliation:
        - By calling the external hotline for people in confinement. Dial 972-535-3499;
        - To the local rape crisis center (requires offender consent before facility can be informed)
- NCDAC P*amphlet End the Silence - Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act*:
    - By calling the Offender Reporting Sexual Abuse and Sexual Harassment Hotline at 972-535-3499.
- *Sexual Abuse and Harassment Victim Support Memorandum of Agreement*:
    - The Rape Crisis Center of Robeson County agreed to report eminent danger, threat of harm, or report of abuse by an LCI offender to the PREA Office or to the institution.

- Site review:
  - Auditor tested the external hotline for people in confinement and was able to make a test call.
  - Phone call did not require use of a pin number and was toll-free.
  - Auditor was informed the facility does not detain offenders solely for civil immigration purposes.
  - Locked mail and grievance boxes could only be opened by designated staff.
- Interviews with offenders:
  - Indicated phone numbers posted on the bulletin boards and on the wall near the phones to make a report.
- Interview with PREA compliance manager:
  - Indicated that offenders can make a report through the external reporting hotline or the Rape Crisis Center of Robeson County.
  - Indicated external reports through the hotline are forwarded from the external entity (NCDPS) to the NCDAC PREA office and to the facility so an investigation can be initiated.
  - Indicated offenders can make an anonymous report through the external reporting hotline.

115.51(c)

- Facility response:
  - The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties.
  - Staff are required to immediately document verbal reports.
- NCDAC Policy PREA-200 *PREA Reporting*:
  - Offenders may report sexual abuse or sexual harassment allegations via the following methods:
    - Notifying any DAC employee;
    - Administrative remedy process;
    - PREA/grievance locked box located at each DAC confinement or treatment facility;
    - Contacting the anonymous DAC Fraud, Waste, Abuse, and Misconduct Hotline at (844)208-4018.
  - Employees, volunteers, contractors, custodial agents, and third parties may report sexual abuse or sexual harassment allegations privately. Ways to report include but are not limited to the following methods:
    - DAC PREA Office at PREA@NCDAC.gov or (919)825-2754;
    - Anonymously to the DAC PREA Office; or
    - Local law enforcement agency.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy:*
  - All reports of sexual abuse and sexual harassment, however made, are to be reported to the warden and the DAC PREA Office.
- NCDAC Pamphlet *End the Silence - Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act:*
  - Third-party reporting for offenders:
    - Tell a family member, friend, legal counsel, or anyone else outside the facility.
    - They can report on your behalf by calling (844) 208-4018.
- Interviews with a random sample of staff:
  - Indicated offenders can make reports verbally, in writing, anonymously, and through third parties.
  - Indicated reports are documented immediately or as soon as the situation is controlled.
- Interviews with offenders:
  - Indicated reports can be made verbally to staff, by phone including

anonymously, in writing, and through a third party.

115.51(d)

- Facility response:
  - The agency has established procedures for staff to privately report sexual abuse and sexual harassment of offenders.
  - Staff are informed of these procedures through policy review and annual training.
- NCDAC Policy PREA-200 *PREA Reporting*:
  - Employees, volunteers, contractors, custodial agents, and third parties may report sexual abuse or sexual harassment allegations privately. Ways to report include but are not limited to the following methods:
    - To the DAC PREA Office by email at PREA@NCDAC.gov or by telephone at (919) 825-2754;
    - Anonymously by contacting DAC at (919) 825-2754; or
    - To their local law enforcement agency.
- NCDAC Office of Staff Development and Training – *PREA: Sexual Abuse and Sexual Harassment 101*:
  - In-service course includes private options for staff reporting.
- NCDAC Office of Staff Development and Training – *PREA: Sexual Abuse and Sexual Harassment 201*:
  - Biennial refresher course includes private options for staff reporting.
- NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence*:
  - Reports can be made immediately by contacting the PREA Office via telephone or email.
- Site review:
  - Staff stated being comfortable reporting privately to the OIC or PCM.
- Interview with a random sample of staff:
  - Indicated staff could report privately to the OIC or another supervisor, the PCM, or to the NCDAC PREA Office.

Determination:

The facility meets the standard.

115.52	**Exhaustion of administrative remedies**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
  - NCDAC Policy G.0300 *Administrative Remedy Procedures, dated 10.01.2023*
  - Correspondence Tracking System search – *PREA/undue familiarity, date range 01.08.2025 – 01.08.2026*

Reasoning and analysis:

115.52(a)

- Facility response:
  - The agency has an administrative procedure for dealing with offender grievances regarding sexual abuse.
- NCDAC Policy G.0300 *Administrative Remedy Procedures*:
  - If a grievance complains about sexual abuse or sexual harassment of an offender(s), immediate notification shall be made to the facility PREA Compliance Manager and a PREA investigation shall be initiated, if not already in the process. DAC's PREA Office may review offender grievances to ensure compliance with PREA standards.

115.52(b)

- Facility response:
  - Agency policy or procedure allows an offender to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred.
  - Agency policy does not require an offender to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse.
- NCDAC Policy G.0300 *Administrative Remedy Procedures*:
  - No offender grievance alleging sexual abuse or harassment shall be rejected.
  - No employee who appears to be involved in a grievance shall participate in any capacity in the resolution process, except as a witness where necessary.

115.52(c)

- Facility response:
  - The agency's policy and procedure allow an offender to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint.
  - The agency's policy and procedure require that an offender grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint.
- NCDAC Policy G.0300 *Administrative Remedy Procedures*:
  - Any aggrieved offender in the custody of DAC may submit a paper grievance Form DC-410 at their housing facility. Paper forms may be submitted to custody staff, through facility mail, or in designated drop-box locations.
  - In addition, no employee who appears to be involved in an offender sexual abuse or harassment allegation shall accept a grievance which suggests such personal involvement or shall participate in any capacity in the response to the grievance.

115.52 (d)

- Facility response:
  - The agency's policy and procedure require that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance.
  - One grievance filed that alleged sexual abuse in the past 12 months.
  - The agency always notifies an offender in writing when the agency files for an extension, including notice of the date by which a decision will be made.

- NCDAC Policy G.0300 *Administrative Remedy Procedures*:
  - The staff responsible for investigation and response to the offender grievance shall provide this formal Step 1 response within 15 days.
  - The warden/designee shall investigate the grievance and review records gathered at Step 1 and complete the investigation within 20 days after the appeal to Step 2.
  - The IGE shall forward their decision to the offender within 30 days from the date of the offender's appeal from Step 2.
- Correspondence Tracking System search – *PREA/undue familiarity*:
  - Listed nine PREA related grievances.
- Documentation review:
  - Six of six grievances, reviewed by the auditor, resulted in an initial investigation of the allegation and a written response to the offender.

115.52(e)

- Facility response:
  - Agency policy and procedure permits third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, to assist offenders in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of offenders.
  - Agency policy and procedure requires that if an offender declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the offender's decision to decline.
  - Zero grievances alleging sexual abuse filed by offenders in the past 12 months in which the offender declined third-party assistance, containing documentation of the offender's decision to decline.
- NCDAC Policy G.0300 *Administrative Remedy Procedures*:
  - Only PREA-related grievances regarding allegations of sexual abuse may be submitted by third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, on an offender's behalf.
  - Such PREA related grievances from third parties must be submitted to the warden of the facility where the offender is housed.
  - A facility may require, as a condition of processing the third-party grievance, that the alleged victim consent to have the grievance submitted on their behalf and require their participation in subsequent steps in the grievance process.
  - If the offender declines to have the third-party grievance processed on their behalf, the facility shall document the offender's decision.

115.52(f)

- Facility response:
  - The agency has a policy and established procedures for filing an emergency grievance alleging that an offender is subject to a substantial risk of imminent sexual abuse.
  - The agency's policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours.
  - Zero emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months.
  - The agency's policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires that a final agency decision be issued within 5 days.
- NCDAC Policy G.0300 *Administrative Remedy Procedures*:
  - Emergency grievances must be labeled as such and are grievances

	regarding matters which pose imminent substantial risk of personal injury or serious and irreparable harm to an offender. ◦ Emergency grievances shall be submitted at an offender's housing facility and forwarded immediately, without substantive review, to the level at which corrective action can be taken by the facility screening officer. ◦ Review at the corrective action level shall conclude with a Step 2 response, including any action taken in response to the grievance, within five days. **115.52(g)** • Facility response: ◦ The agency has a written policy that limits its ability to discipline an offender for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the offender filed the grievance in bad faith. ◦ In the past 12 months, zero offender grievances alleging sexual abuse that resulted in disciplinary action by the agency against the offender for having filed the grievance in bad faith. • NCDAC Policy G.0300 *Administrative Remedy Procedures*: ◦ No reprisals shall be taken against any offender or staff member for a good faith use of or participation in the grievance procedure. **Determination**: The facility meets the standard.

115.53	**Inmate access to outside confidential support services**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Policy PREA 200 - *PREA Reporting, dated 09.04.2025* ◦ *Confidential PREA Reporting Procedures, undated* ◦ *Sexual Abuse and Harassment Victim Support Memorandum of Agreement, dated 11.25.2025* ◦ NCDAC Factsheet OPA-*T101 Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement, dated 04.09.2025* • Site review • Interviews with offenders **Reasoning and analysis**: **115.53(a)**

- Facility response:
  - The facility provides offenders with access to outside victim advocates for emotional support services related to sexual abuse.
  - Offenders are given mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations.
  - The facility provides access to mailing address and telephone numbers for immigrant services agencies for offenders detained solely for civil immigration purposes. LCI does not house for immigrant service agencies of persons detained solely for civil immigration purposes.
  - The facility provides offenders with access to such services by enabling reasonable communication between offenders and these organizations in as confidential a manner as possible.
- *Confidential PREA Reporting Procedures*:
  - Contained phone number and mailing address for the Rape Crisis Center of Robeson County.
- NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement*:
  - Included directions for contacting the local rape crisis center for confidential support services.
- Site review:
  - Auditor observed signage containing the Rape Crisis Center of Robeson County phone number and address, to reach emotional support services, posted on bulletin boards throughout the facility.
  - Auditor placed a test call to the Rape Crisis Center of Robeson County (RCCRC) and was able to reach an advocate who described the services available to LCI offenders who call RCCRC.
  - Auditor verified with the PCM that the facility does not detain persons solely for civil immigration purposes.
- Interviews with offenders:
  - Indicated information for emotional support services is posted on bulletin boards in the housing units and on tablets.
  - Indicated the number can be dialed using a phone or tablet but have not needed to contact this organization.

115.53(b)

- Facility response:
  - The facility informs offenders, prior to giving them access to outside support services:
    - The extent to which such communications will be monitored.
    - The mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.
- Site review:
  - Initial announcement when placing any phone call: "This call will be monitored and recorded."
- Interviews with offenders:
  - Indicated that there is an announcement on the phones about being recorded.

115.53(c)

- Facility response:
  - The facility maintains memorandum of understanding (MOU) or other agreements with community service providers that are able to provide offenders with emotional support services related to sexual abuse.
  - The facility maintains a copy of the MOU.
- *Sexual Abuse and Harassment Victim Support Memorandum of Agreement:*
  - The Rape Crisis Center of Robeson County agreed to provide victim support and counseling to offenders in LCI custody, who have been sexual abused or sexual harassed.

Determination:

The facility meets the standard.

115.54	Third-party reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility responses
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement, revised 04.09.2025*
  - NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence, dated 03.24.2023*
  - *Confidential PREA Reporting Procedures, undated*
- Supplemental documentation
  - *www.dac.nc.gov/information-and-services/prea-office, accessed 04.20.2026*
  - NCDAC Poster *END THE SILENCE Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act, dated 03.24.2023*
- Site review

Reasoning and analysis:

115.54(a)

- Facility responses:
  - The agency or facility provides a method to receive third-party reports of offender sexual abuse or sexual harassment. Third-party reports can be received via email, telephone, and mail.
  - The agency or facility publicly distributes information on how to report offender sexual abuse or sexual harassment on behalf of offenders.
- *www.dac.nc.gov/information-and-services/prea-office*:
  - Contained reporting methods including email and telephone contacts for the NCDAC PREA Administration Office.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:

	◦ Third party reporting can be made via email, phone or letter. • NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement*: ◦ Third party reporting to include family members, friends, or outside organization. ◦ OPA-T101 Facility Talking Points was read to offenders during their orientation process. • NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence*: ◦ Family members and friends of offenders can report by email to SVC_dac.prea@dac.nc.gov. • NCDAC Poster *END THE SILENCE Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act*: ◦ Third-party reporting by telling a family member, friend, legal counsel, or anyone else outside the facility. They can report on offender's behalf by calling (844) 208-4018. • Site review: ◦ NCDAC Posters OPA-T102 and *END THE SILENCE* were posted in the visitation and offender housing areas and contain third-party reporting options. ◦ NCDAC Factsheet OPA-T101 was read by staff during the orientation of transferred offenders and included third-party reporting options. ◦ Auditor submitted a third-party report which the facility confirmed was received. **Determination**: The facility meets the standard.

115.61	**Staff and agency reporting duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy PREA-200 *PREA Reporting, dated 09.04.2025* ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.06.2022* • Documentation review • Site review • Interviews with a random sample of staff • Interviews with medical and mental health staff • Interview with associate warden **Reasoning and analysis**: **115.61(a)** • Facility response:

- The agency requires all staff to report immediately and according to agency policy:
    - Any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency.
    - Any retaliation against offenders or staff who reported such an incident.
    - Any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.
- NCDAC Policy PREA-200 *PREA Reporting*:
  - Employees, volunteers, contractors, and custodial agents shall immediately report:
    - Any knowledge, suspicion, or information regarding an incident of offender sexual abuse or sexual harassment involving an offender.
    - Any allegation that an offender is having a sexual relationship with another offender, or with an employee, volunteer, contractor or custodial agent.
    - Any retaliation against offenders, or employees, volunteers, contractors, and custodial agents who reported such an incident.
    - Any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation.
- Interviews with a random sample of staff:
  - Indicated all staff are required to report any knowledge or suspicion about incidents of sexual abuse or sexual harassment, retaliation, or staff neglect that led to an incident.
- Site review:
  - Staff discussed with the auditor that a verbal report to the OIC, another supervisor, or PCM, is the most immediate way to begin the facility response to an allegation, retaliation, or staff neglect.

115.61(b)

- Facility response:
  - Apart from reporting to designated supervisors or officials and designated state or local services agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - The facility investigator and all others involved in the PREA process, to the extent possible, will ensure the confidentiality of PREA complaints as well as all data collected through the investigation of those complaints except as required in the following circumstances:
    - To cooperate with law enforcement in any investigation and prosecution of the incidents alleged in such complaints.
    - To take and enforce disciplinary action against any staff member as a result of the incidents alleged in the complaints.
    - To defend against claims brought by the offender for violation of the offender’s rights for having been subjected to sexual abuse.
    - To otherwise comply with the law.
- Interviews with a random sample of staff:
  - Indicated report information is limited to staff involved in the response to an allegation including the investigator, PSP, PCM, and facility leadership.

115.61(c)

- Interviews with medical and mental health staff:
  - Indicated limitations of confidentiality and mandatory reporting duties are disclosed to the offender prior to providing services.
  - Indicated duty to report all information about sexual victimization to the OIC or PCM.
  - Indicated has not been made aware of an incident of sexual abuse or sexual harassment but would report it immediately.

115.61(d)

- Interview with associate warden:
  - Indicated youthful offenders are not housed at the facility.
  - Indicated the Department of Social Services and local law enforcement would be notified if there were an allegation made by or about an offender considered a vulnerable adult.

115.61(e)

- Interview with associate warden:
  - Indicated all allegations of sexual abuse and sexual harassment, including those made anonymously or by a third party, are reported to and investigated by a facility investigator.

Determination:

The facility meets the standard.

115.62	Agency protection duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - LCI Memorandum Re: *115.62(a)-3, dated 01.13.2026*
- Interview with agency head designee
- Interview with associate warden
- Interviews with a random sample of staff

Reasoning and analysis:

115.62(a)

- Facility response:
  - When the agency or facility learns that an offender is subject to a

	substantial risk of imminent sexual abuse, it takes immediate action to protect the offender (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay). ◦ Zero times the agency or facility determined that an offender was subject to a substantial risk of imminent sexual abuse in the past 12 months. • LCI Memorandum Re: *115.62(a)-3*: ◦ Stated: “In the past 12 months, Lumberton Correctional has not had any instances of this nature.” • NCDAC Policy and Procedure F.3400 Offender Sexual Abuse and Sexual Harassment Policy: ◦ When an employee, volunteer, contractor, or custodial agent learns that an offender is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the offender. • Interview with agency head designee: ◦ Indicated the coordinated facility response plan would be initiated immediately. Offender would be separated from the imminent threat. • Interview with associate warden: ◦ Indicated staff would separate the offender from anyone who threatens sexual abuse. An investigation would be initiated immediately. Would move or transfer any offender who threatens another offender. • Interviews with a random sample of staff: ◦ Indicated immediate separation of offender from threat, notify the OIC or another supervisor of the issue, and continue to monitor the offender. **Determination**: The facility meets the standard.

115.63	**Reporting to other confinement facilities**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy PREA-200 *PREA Reporting, dated 09.04.2025* ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ LCI Memorandum Re: *115.63(a)-3, dated 01.13.2026* ◦ LCI Memorandum Re: *115.63(d)-1, dated 01.13.2026* • Interview with agency head designee • Interview with associate warden **Reasoning and analysis**: **115.63(a)**

- Facility response:
  - The agency has a policy requiring that, upon receiving an allegation that an offender was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred.
  - In the past 12 months, the facility has received zero allegations that an offender was abused while confined at another facility.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.
- LCI Memorandum Re: *115.63(a)-3*:
  - Stated: “In the past 12 months, Lumberton Correctional has not had any instances of this nature.”

115.63(b)

- Facility response:
  - Agency policy requires that the facility head provide such notification as soon as possible, but no later than 72 hours after receiving the allegation.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - When reporting to other agencies or facilities, such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.

115.63(c)

- Facility response:
  - The agency or facility documents that it has provided such notification within 72 hours of receiving the allegation.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Reported allegations, including persons involved and preliminary steps taken, shall be documented in OPUS on the PR (PREA) Incident Report within 72 hours of receiving the report.

115.63(d)

- Facility response:
  - The agency or facility policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards.
  - The facility received zero allegations of sexual abuse from other facilities during the past 12 months.
- NCDAC Policy PREA-200 *PREA Reporting*:
  - Upon receiving notification from another facility or agency that an allegation of sexual abuse and/or sexual harassment has been reported, the warden shall ensure the allegation is investigated in accordance with the DAC-PREA-200 *PREA Investigations* policy and applicable Division policies.
- LCI Memorandum Re: *115.63(d)-1*:
  - Stated: “In the past 12 months, Lumberton Correctional has not had any instances of this nature.”
- Interview with agency head designee:
  - Indicated the NCDAC PREA office is the designated point of contact as

well as notifying the warden of the facility where the allegation occurred.
    - Indicated the NCDAC PREA office ensures the facility completes an investigation of the allegation. No such notifications were made to the NCDAC PREA office in the past 12 months.
- Interview with associate warden:
    - Indicated an allegation received from another facility or agency prompts an immediate investigation. Facility investigator would gather all evidence and information that corroborates or refutes the allegation, including video footage and eyewitness statements.
    - Indicated no notifications made by another facility or agency to LCI staff during the past 12 months.

Determination:

The facility meets the standard.

115.64	Staff first responder duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- LCI PAQ
    - Facility response
    - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
- Documentation review
- Interview with security staff first responder

Reasoning and analysis:

115.64(a)

- Facility response:
    - The agency has a first responder policy for allegations of sexual abuse.
    - The policy requires that, upon learning of an allegation that an offender was sexually abused, the first security staff member to respond to the report:
        - Separate the alleged victim and abuser; and
        - Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.
    - The policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report:
        - Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and
        - 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.
    - Five allegations of offender sexual abuse were reported in the past 12 months.
    - Five allegations where it was applicable for the first security staff member to respond to the report to separate the alleged victim and abuser.
    - One allegation where staff were notified within a time period that still allowed for the collection of physical evidence.
    - One allegation where it was applicable for the first security staff member to respond to the report to preserve and protect evidence at any crime scene until appropriate steps could be taken to collect any evidence.
    - One allegation where it was applicable for the first security staff member to respond to the report 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.
    - One allegation where it was applicable for the first security staff member to respond to the report to ensure that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Ensure alleged victim is safe by separation from an alleged abuser.
    - Preserve and protect the crime scene until appropriate steps can be taken to collect any evidence.
    - Request the alleged victim not take any action which may destroy physical evidence.
    - Ensure alleged abuser does not take any action which may destroy physical evidence.
- Documentation review:
    - Auditor reviewed three investigations conducted in the previous 12 months subsequent to an allegation of sexual abuse.
        - Alleged victims were separated from other parties involved and assessed by medical.
        - Physical, video, and testimonial evidence were preserved and collected where applicable.
    - Auditor reviewed additional allegations which were outside of the previous 12 months or did not meet the PREA Standards definitions for sexual abuse or sexual harassment.
- Interview with security staff first responder:
    - Indicated first responder duties include separation of alleged victim from abuser, notify the OIC or another supervisor, monitor the alleged victim, secured scene to preserve any evidence, ensure offenders involved do not destroy evidence on their person, have victim assessed by medical, and completed a statement of all actions taken.

115.64(b)

- Facility response:
    - Agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence.
    - Agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to notify security staff.
    - Three allegations of sexual abuse where a non-security staff member was the first responder. Non-security staff member received

	grievances. ◦ All three allegations were reported to security staff. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy:* ◦ Restated the language of the provision. • Documentation review: ◦ Three investigations reviewed by auditor where a facility non-security staff member was the first responder to an allegation of sexual abuse (received grievances). Non-security staff member notified security staff for each grievance related to sexual abuse or sexual harassment. **Determination**: The facility meets the standard.

115.65	**Coordinated response**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ *PREA Sexual Abuse Institutional Response Plan, 01.01.2025* • Interview with associate warden **Reasoning and analysis**: **115.65(a)** • Facility response: ◦ The facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. • *PREA Sexual Abuse Institutional Response Plan*: ◦ Provided guidelines for offender safety, evidence preservation, reporting, notifications, and investigation of offender-on-offender and staff-on-offender sexual abuse and sexual harassment at LCI. ◦ Identified staff who serve in specific response roles. ◦ Outlined response duties of LCI staff including: ■ Officer in Charge (OIC); ■ First responder; ■ Medical practitioners; ■ PREA support person (PSP); ■ Investigator; ■ PREA compliance manager (PCM); and ■ Warden. • Interview with associate warden: ◦ Indicated the coordinated response includes first responders, supervisors, medical and mental health staff, PSP, investigator, and facility leadership.

	Determination: The facility meets the standard.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response • Interview with agency head designee **Reasoning and analysis:** **115.66(a)** • Facility response: ◦ The agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has not entered into or renewed any collective bargaining agreement or other agreement since the last PREA audit. • Interview with agency head designee: ◦ Indicated North Carolina is not a collective bargaining state. **115.66(b)** Auditor is not required to audit this provision. **Determination**: The facility meets the standard.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ Form OPA-I22 *Prison Rape Elimination Act (PREA) Retaliation*

Monitoring – Staff, revised 01.01.2023
    - Form OPA-I24 *Prison Rape Elimination Act (PREA) Retaliation Monitoring – Persons in Confinement, revised 01.01.2023*
    - LCI Memorandum Re: *Designation of PREA Support Person(s), dated 01.08.2026*
- Documentation review
- Interview with agency head designee
- Interview with associate warden
- Interview with staff member charged with monitoring

Reasoning and analysis:

115.67(a)

- Facility response:
    - The agency has a policy to protect all offenders and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other offenders or staff.
    - The agency designates staff member(s) or charges department(s) with monitoring for possible retaliation.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - The PSP shall monitor retaliation against the victim and the offender who either report allegations, or cooperate with investigations, of sexual abuse or sexual harassment.
    - The PCM shall monitor for retaliation against staff that either report or cooperate with investigations, of sexual abuse or sexual harassment.
- LCI Memorandum Re: *Designation of PREA Support Persons*:
    - Four case managers were designated as facility PSP.

115.67(b)

- Interview with agency head designee:
    - Indicated PSP is tasked with monitoring any offender who alleges to be a victim, who reported, or who participates in the investigation. The PCM is tasked with monitoring retaliation for a staff member who may have reported and or been involved in that investigative process.
- Interview with associate warden:
    - Indicated the PSP is assigned to the alleged victim to monitor for retaliation and provide emotional support. PSP would review documentation and speak with the alleged offender victim periodically to monitor for negative changes to the offender's daily routine. Any offender found to be retaliating against another offender would be moved to special management or transferred. PCM would review staff documentation to ensure there are zero negative consequences for staff who report an allegation.
- Interview with staff member charged with monitoring retaliation:
    - Indicated monitoring the alleged victim for 90 days for any negative changes to bed, job, or program assignments. Immediately report retaliation to the OIC and PCM.
    - Indicated making initial contact upon being assigned as the PSP. Asks the alleged victim if he wants emotional support services. Begins retaliation monitoring regardless of offender accepting or declining support services. PSP documents all responses on the appropriate forms.
    - Indicated the OIC would move or transfer anyone observed retaliating against an offender.

115.67(c)

- Facility response:
  - The agency/facility monitors the conduct or treatment of offenders or staff who reported sexual abuse and of offenders who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by offenders or staff.
  - The agency/facility monitors for 90 days.
  - The agency/facility acts promptly to remedy any such retaliation.
  - The agency/facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need.
  - Zero incidents of retaliation occurred in the past 12 months.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Continue monitoring for a minimum of 90 days or beyond 90 days if the initial monitoring indicates a continuing need.
- Documentation review:
  - Auditor reviewed two investigation files for an allegation of sexual abuse with a known victim that occurred during the previous 12 months.
  - 90-day retaliation monitoring was completed for one investigation and was ongoing for the other investigation.
  - Auditor reviewed additional investigation files for allegations of sexual abuse with a known victim where retaliation monitoring occurred until an unfounded outcome determination was made.
- Interview with associate warden:
  - Indicated PSP is assigned to offender to monitor for retaliation. Suspected retaliation would trigger an investigation. Offender or staff who retaliated against an offender would be moved or transferred and put in for disciplinary action if there was evidence of retaliation.
- Interview with staff member charged with monitoring retaliation:
  - Indicated PSP would look for any changes from previous behavior by speaking periodically with the offender and checking offender documentation.
  - Indicated monitors for 90 days or longer if there is a continuing need.

115.67(d)

- Form OPA-I24 *Prison Rape Elimination Act (PREA) Retaliation Monitoring – Persons in Confinement*:
  - Contained section for documenting status checks related to retaliation monitoring by the PSP of alleged victim or offenders who reported or cooperated with the investigation.
- Form OPA-I22 *Prison Rape Elimination Act (PREA) Retaliation Monitoring – Staff*:
  - Contained section for documenting status checks related to retaliation monitoring of staff by the PCM.

115.67(e)

- Interview with associate warden:
  - Indicated any offender or staff who expressed a fear of retaliation after being part of an investigation would be monitored.
  - Indicated PSP would monitor an offender involved in an investigation for a minimum of 90 days.

115.67(f)

	Auditor is not required to audit this provision. **Determination**: The facility meets the standard.

115.68	**Post-allegation protective custody**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ LCI Memorandum Re: *115.68(a)-5, dated 01.13.2026* • Supplemental documentation ◦ NCDAC Policy and Procedure O.0300 *Conditions of Confinement, dated 04.30.2025* • Interview with associate warden **Reasoning and analysis:** **115.68(a)** • Facility response: ◦ The agency has a policy prohibiting the placement of offenders who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. ◦ Zero offenders who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment. ◦ If an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ Offenders at high risk for sexual victimization shall not be placed in restrictive 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. If a facility cannot conduct such an assessment immediately, the facility may hold the offender in restrictive housing for less than 24 hours while completing the assessment. ◦ The warden has the discretion regarding how separation occurs, who is moved, and where. Should the alleged victim be placed in restrictive housing, then an analysis of 1) information from the preliminary review to include the type of allegation, 2) prior complaints filed against the alleged abuser, 3) will the movement appear punitive

toward an alleged victim shall be considered, and 4) documentation of the decision to move the alleged victim.
- NCDAC Policy and Procedure O.0300 *Conditions of Confinement*:
  - Included classification status for offenders who must be temporarily restricted from the general offender population to provide necessary control while completing an investigation.
  - Status will be reviewed and documented every seven days for the first two months and at least every 30 days thereafter.
- LCI Memorandum Re: *115.68(a)-5:*
  - Stated: “In the past 12 months, Lumberton Correctional has not had any instances of this nature.”
- Interview with associate warden:
  - Indicated the facility does not place offenders at high risk of sexual victimization or who allege sexual abuse in involuntary segregated housing.
  - Indicated offenders at high risk of sexual victimization (HRV) are assigned to dorms or areas of a dorm where they are separated from offenders at high risk of sexual abusiveness (HRA). PCM monitors HRA and HRV offender placements to ensure separation.

Determination:

The facility meets the standard.

115.71	**Criminal and administrative agency investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations, dated 09.04.2025* • Supplemental documentation ◦ Training Progress Summary *PREA – Investigating Sexual Abuse in a Confinement Setting, undated* ◦ *NCDAC Incident Report*, *various dates* • Documentation review • Interview with investigative staff • Interview with PREA compliance manager • Interview with associate warden • Interview with PREA coordinator **Reasoning and analysis**: **115.71(a)** • Facility response: ◦ The agency/facility has a policy related to criminal and administrative

agency investigations.

- NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations*:
  - If an alleged act of sexual abuse or sexual harassment is reported or discovered, an immediate preliminary review shall be conducted by a SAH investigator to determine if the incident meets the standards of PREA.
  - DAC confinement or treatment facilities shall cooperate with non-DAC law enforcement agencies investigating sexual abuse, providing information upon request, unless prohibited by law. Facilities shall endeavor to remain informed about the progress of the investigation.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data including video and/or audio recordings; shall interview alleged victims, suspected perpetrators, and witnesses.
  - In order to preserve the integrity of the investigation, one person, or a specific team, shall be designated to investigate an incident, and only that person (or team) shall be involved in the collection of evidence and interviewing of potential witnesses. A thorough investigation is necessary to ensure the potential for prosecution if it is determined that a crime has been committed.
- Documentation review:
  - *NCDAC Incident Report*:
    - The auditor reviewed 14 investigations that occurred in the previous 12 months.
    - The auditor also reviewed nine investigations that occurred outside of the previous 12 months, and 18 allegations that did not meet the PREA Standards definitions for sexual abuse or sexual harassment.
- Interview with investigative staff:
  - Indicated an investigation is initiated as soon as the investigator is notified of the allegation.
  - Indicated an investigation is started for all allegations including third-party and anonymous reports.

115.71(b)

- Training Progress Summary *PREA – Investigating Sexual Abuse in a Confinement Setting*:
  - Displayed completed specialized investigator training for the four designated investigators for the facility.
- Interview with investigative staff:
  - Indicated investigator training included all the steps for writing a comprehensive incident report in OPUS, techniques for interviewing alleged victims, alleged abusers, and witnesses, identifying and collecting physical, electronic, and testimonial evidence, and then evaluating all evidence to making an outcome determination based on the *preponderance of the evidence*.

115.71(c)

- Documentation review:
  - Auditor reviewed documentation for 14 investigations. Reports routinely included applicable testimonial, physical, and/or video evidence and investigator's review of prior incidents involving

participants.

- Interview with investigative staff:
  - Indicated the first step of the investigation is to determine who the alleged victim and abuser(s) are and make sure they stay separated.
  - Indicated additional steps include determining if the allegation meets the PREA Standards for sexual abuse or sexual harassment, collecting evidence, interviewing the alleged victim, alleged abuser, and any witnesses, evaluating all physical, testimonial, and video evidence collected, and then assessing all of the evidence to determine the outcome.

115.71(d)

- Interview with investigative staff:
  - Indicated the Lumberton Police Department would conduct all criminal investigation interviews.

115.71(e)

- Interview with investigative staff:
  - Indicated the credibility assessment is based on information given and behavior. The evidence collected is the basis for the outcome determination.
  - Indicated a polygraph examination of the alleged victim is never a condition of proceeding with an investigation.

115.71(f)

- Interview with investigative staff:
  - Indicated that staff actions or failure to act, if relevant, are documented in reports.
  - Indicated the investigation report includes the allegation, testimonial, video, and physical evidence, staff response, investigator actions, medical and mental health assessments, and the outcome determination, based on the *preponderance of the evidence*.

115.71(g)

- Interview with investigative staff:
  - Indicated criminal reports would be documented by the Lumberton Police Department.

115.71(h)

- Facility response:
  - Substantiated allegations of conduct that appear to be criminal are referred for prosecution.
  - Zero substantiated allegations that appeared to be criminal that were referred for prosecution since the last PREA audit.
- NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations*:
  - Restated the language of the provision.
- Documentation review:
  - The auditor reviewed two incident reports where the Lumberton Police Department was notified about the allegation. One administrative

	investigation resulted in an unsubstantiated outcome and the other administrative investigation resulted in an unfounded outcome. • Interview with investigative staff: ◦ Indicated if the allegation includes possible criminal acts it is referred to the Lumberton Police Department. **115.71(i)** • Facility response: ◦ The agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. • NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations*: ◦ All written PREA related reports shall be retained in the Offender Population Unified System (OPUS) for as long as the alleged abuser is incarcerated or employed by DAC, plus five years. **115.71(j)** • Interview with investigative staff: ◦ Indicated an investigation is always completed even when an alleged abuser, whether offender or staff, is no longer at the facility. **115.71(k)** Auditor is not required to audit this provision. **115.71(l)** • Interview with investigative staff / PREA compliance manager: ◦ Indicated staying in contact with Lumberton Police Department for criminal investigation updates, since the administrative investigation cannot proceed until law enforcement tells the investigator to go ahead. • Interview with associate warden: ◦ Indicated contacting the Lumberton Police Department on a regular basis to get updates on the criminal investigation and provide additional assistance when needed. • Interview with PREA coordinator: ◦ Indicated facility warden and the office of internal affairs liaise with investigators to stay updated on case status. **Determination**: The facility meets the standard.

115.72	**Evidentiary standard for administrative investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
- Documentation review
- Interview with investigative staff

Reasoning and analysis:

115.72(a)

- Facility response:
  - The agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - The agency shall impose no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.
- Documentation review:
  - The auditor reviewed 14 allegations of sexual abuse and sexual harassment for the past 12 months. Investigators routinely based their outcome determination on the *preponderance of the evidence*.
- Interview with investigative staff:
  - Indicated the *preponderance of the evidence* was the evidentiary standard used to substantiate allegations of sexual abuse or sexual harassment.

Determination:

The facility meets the standard.

115.73	**Reporting to inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - NCDAC Policy and Procedure PREA-300 PREA *Official Response and Investigations, dated 09.04.2025*
  - NCDAC Form OPA-I30 *Prison Rape Elimination Act (PREA) Support Services for Persons in Confinement, dated 01.01.2023*
  - NCDAC Form OPA-I31 *Prison Rape Elimination Act (PREA) Support Services – Status Notification for Persons in Confinement, various dates*

- Documentation review
- Interview with investigative staff
- Interview with associate warden

Reasoning and analysis:

115.73(a)

- Facility response:
  - The agency has a policy requiring that any offender who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency.
  - Five administrative investigations of alleged offender sexual abuse that were completed by the agency/facility in the past 12 months.
  - Five offenders who was notified, verbally or in writing, of the results of the investigation.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Following an investigation into an offender's allegation that he or she suffered sexual abuse in a facility, the PSP shall inform the offender as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.
  - Notification shall be documented on Form OPA-I30 Support Services.
  - If the DAC did not conduct the investigation, the PSP shall request, through the chain of command, the relevant information from the investigative agency in order to inform the offender.
- NCDAC Form OPA-I30 *Prison Rape Elimination Act (PREA) Support Services for Persons in Confinement*:
  - Asked alleged victim to accept or decline support services.
  - Informed alleged victim of investigation outcome.
- Documentation review:
  - Auditor reviewed investigation documentation for three allegations of sexual abuse with a known alleged victim during the previous 12 months. All three alleged victims were notified of the investigation outcome.
- Interview with investigative staff:
  - Indicated outcome notification is provided to the alleged victim by the investigator/PCM.
- Interview with associate warden:
  - Indicated outcome notification is provided to the alleged victim by the PCM.

115.73(b)

- Facility response:
  - If an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the offender of the outcome of the investigation.
  - Zero investigations of alleged offender sexual abuse in the facility that were completed by an outside agency in the past 12 months. Lumberton Police Department was not required to conduct investigations due to the evidence received during the agency's investigation.

115.73(c)

- Facility response:
  - Following an offender's allegation that a staff member has committed sexual abuse against the offender, the agency/facility subsequently informs the offender (unless the agency has determined that the allegation is unfounded) whenever:
    - The staff member is no longer posted within the offender's unit;
    - The staff member is no longer employed at the facility;
    - The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
    - The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.
  - There has not been a substantiated or unsubstantiated complaint (i.e., not unfounded) of sexual abuse against staff in the previous 12 months.
- NCDAC Form OPA-I31 *Prison Rape Elimination Act (PREA) Support Services – Status Notification for Persons in Confinement*:
  - Listed the required staff status notifications.
- Documentation review:
  - Auditor observed zero investigations with a substantiated or unsubstantiated outcome where the staff status notification to an alleged victim was applicable.
  - Auditor observed one investigation with an unfounded outcome where the staff status notification to an alleged victim was made.

115.73(d)

- Facility response:
  - Following an offender’s allegation that he or she has been sexually abused by another offender in an agency facility, the agency subsequently informs the alleged victim whenever:
    - The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or
    - The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.
- NCDAC Form OPA-I31 *Prison Rape Elimination Act (PREA) Support Services – Status Notification for Persons in Confinement*:
  - Listed the required alleged abuser status notifications.
- Documentation review:
  - Auditor observed zero investigations where the alleged offender abuser status notification to the alleged victim was applicable.

115.73(e)

- Facility response:
  - The agency has a policy that all notifications to offenders described under this standard are documented.
  - In the past 12 months, zero notifications to offenders that were provided pursuant to this standard.
- NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations*:
  - All such notifications or attempted notifications shall be documented.
- Documentation review:
  - The auditor observed documentation of applicable investigation outcome notifications made to three alleged victims.

115.73(f)

	Auditor is not required to audit this provision. **Determination**: The facility meets the standard.

115.76	**Disciplinary sanctions for staff**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Policy and Procedure J.0100 *Conduct of Employees, dated 06.03.2024* • Supplemental documentation ◦ State Human Resources Manual – *Disciplinary Action Policy, dated 10.17.2024* • Documentation review **Reasoning and analysis:** **115.76(a)** • Facility response: ◦ Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ Restated the language of the provision. • NCDAC Policy and Procedure J.0100 *Conduct of Employees*: ◦ An employee who engages in sexual misconduct or harassment with an offender will be subject to disciplinary action up to and including dismissal. **115.76(b)** • Facility response: ◦ In the past 12 months, zero staff from the facility have violated agency sexual abuse or sexual harassment policies. ◦ In the past 12 months, zero staff from the facility have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies. • State Human Resources Manual – *Disciplinary Action Policy*: ◦ Stated an employee may be dismissed for causes relating to any form of unacceptable personal conduct. • Documentation review: ◦ Auditor observed zero investigations conducted in the past 12 months

	where disciplinary sanctions taken against facility staff would be applicable. **115.76(c)** • Facility response: ◦ The disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. ◦ In the past 12 months, zero staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse). • NCDAC Policy and Procedure Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ Restated the language of the provision. **115.76(d)** • Facility response: ◦ All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies. ◦ In the past 12 months, zero staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ Restated the language of the provision. **Determination:** The facility meets the standard.

115.77	**Corrective action for contractors and volunteers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ LCI Memorandum Re: *115.77(a)-3, dated 01.13.2026*

- Documentation review
- Interview with associate warden

Reasoning and analysis:

115.77(a)

- Facility response:
  - Agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies.
  - Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with offenders.
  - In the past 12 months, zero incidents where contractors or volunteers engaged in sexual abuse of offenders.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.
- LCI Memorandum Re: *115.77(a)-3*:
  - Stated: "In the past 12 months, Lumberton Correctional has not had any instances of this nature."
- Documentation review:
  - Auditor observed zero allegations of sexual abuse by a facility contractor or volunteer during the past 12 months.

115.77(b)

- Facility response:
  - The facility takes appropriate remedial measures and considers whether to prohibit further contact with offenders in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Volunteers /Contracting agents:
    - Appropriate remedial measures shall be considered whether to prohibit further contact with offenders in the case of any other violation of sexual abuse or sexual harassment policies.
- Interview with associate warden:
  - Indicated the contractor's or volunteer's access to the facility would be immediately cut off after an allegation and during the investigation. If the investigation is substantiated, the contractor or volunteer would have no further access to the facility. The Lumberton Police Department would be contacted if conduct appears to be criminal.

Determination:

The facility meets the standard.

115.78	**Disciplinary sanctions for inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - NCDAC Policy and Procedure B.0200 *Offender Disciplinary Procedures, dated 12.04.2024*
  - *Offender's Disciplinary Infraction, dated 07.18.2025*
- Supplemental documentation
  - NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse, dated 04.2024*
  - *Sexual Offense Accountability and Responsibility (SOAR), dated 02.17.2021*
- Documentation review
- Interview with associate warden
- Interviews with medical and mental health staff

Reasoning and analysis:

115.78(a)

- Facility response:
  - Offenders are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that an offender engaged in offender-on-offender sexual abuse.
  - Offenders are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for offender-on-offender sexual abuse.
  - In the past 12 months, zero administrative findings of offender-on-offender sexual abuse that have occurred at the facility.
  - In the past 12 months, zero criminal findings of guilt for offender-on-offender sexual abuse that have occurred at the facility.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy:*
  - Restated the language of the provision.

115.78(b)

- NCDAC Policy and Procedure B.0200 *Offender Disciplinary Procedures*:
  - Contained offense categories for sexual assault against offenders, staff, or any other person.
  - Contained offense category for soliciting or inciting a sexual act, indecent exposure, or touching another offender for sexual gratification.
- Interview with associate warden:
  - Indicated a substantiated investigation outcome would lead to a disciplinary process for the abuser.

115.78(c)

- Interview with associate warden:
  - Indicated disciplinary process would consider whether the offender's mental disabilities or mental illness contributed to their behavior when determining the sanction imposed.
  - Indicated the mental health provider would give input during the disciplinary process.

115.78(d)

- Facility response:
  - The facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse.
  - The facility considers whether to require the offending offender to participate in such interventions as a condition of access to programming or other benefits.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - A mental health evaluation shall be conducted after a substantiated incident and the offender shall be offered treatment when deemed appropriate by mental health practitioners. If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending offender to participate in such interventions as a condition of access to programming or other benefits.
- NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*:
  - Once an investigation has been completed and an inmate has been determined to be an inmate-on-inmate abuser, within 60 days, a mental health clinician will attempt to conduct an evaluation and offer treatment when deemed appropriate.
- *Sexual Offense Accountability and Responsibility (SOAR):*
  - Treatment program to address inappropriate and deviant sexual behavior.
- Interviews with medical and mental health staff:
  - Indicated the facility offers counseling or other interventions to the abusing offender if the offender wants to access mental health services.
  - Indicated the facility considers whether to require the abusing offender to participate but participation in the intervention is ultimately up to the offender.

115.78(e)

- Facility response:
  - The agency disciplines offenders for sexual conduct with staff only upon finding that the staff member did not consent to such contact.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - The agency may not discipline an offender victim for sexual contact with staff unless a finding that the staff member did not consent to such contact.
- *Offender's Disciplinary Infraction*:
  - Disciplinary report for offender sexual conduct with staff member who did not consent to sexual contact.
- Documentation review:
  - The auditor observed one disciplinary report where offender disciplinary action was applicable due to staff not consenting to sexual contact.

115.78(f)

- Facility response:
  - The agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged

conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.

115.78(g)

- Facility response:
  - The agency prohibits all sexual activity between offenders.
  - If the agency prohibits all sexual activity between offenders and disciplines offenders for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.
- NCDAC Policy and Procedure B.0200 *Offender Disciplinary Procedures*:
  - Contained offense categories for committing, soliciting, or inciting a sexual act, indecent exposure, or touching another offender for sexual gratification.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Sexual abuse of an offender, detainee, or resident by another offender, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:
    - Contact between the penis and the vulva or the penis and the anus, including penetration, however slight.
    - Contact between the mouth and the penis, vulva, or anus.
    - Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
    - Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.

Determination:

The facility meets the standard.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse, dated 04.2024* ◦ Form DC 598 *North Carolina Department of Public Safety Health*

Services, Patient Medical Consent Form, dated 01.2021

- Supplemental documentation:
  - NCDAC Form DC-540 *Behavioral Health Services Referral, dated 11.2023*
  - Form DC-945 *Confidentiality and Privileged Information, dated 10.2022*
  - NCDAC Form DC947 *Informed Consent for Sexual Offense Accountability and Responsibility Services, revised 11.2025*
  - NCDAC Form DC967 *SOAR Screening and Referral Report, revised 11.2025*
  - *PREA MH Referrals, dated 04.14.2026*
  - *NCDAC Mental Health Progress Note, dated 02.17.2026*
- Site review
- Interview with staff responsible for risk screening
- Interviews with medical and mental health staff

Reasoning and analysis:

115.81(a)

- Facility response:
  - All offenders at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner.
  - The follow-up meeting was offered within 14 days of the intake screening.
  - In the past 12 months, six offenders who disclosed prior victimization during screening were offered a follow-up meeting with a medical practitioner (*Staff confirmed a follow-up meeting would be offered at a diagnostic center prior to transfer to LCI if disclosed at that time*).
  - Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.
- NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*:
  - Guidelines for providing all offenders who allege sexual abuse a prompt medical evaluation and to offer a referral to mental health services.
- NCDAC Form DC-540 *Behavioral Health Services Referral*:
  - Behavioral Health Services referral form based on staff referral or offender request.
  - Form was available in English and Spanish.
- *PREA MH Referrals*:
  - Displayed three offenders who were referred to mental health after a screening.
- *NCDAC Mental Health Progress Note*:
  - Offender seen by mental health provider after positive response to screening question asked by case manager.
- Site review:
  - Auditor confirmed with screening staff that a referral is made if an offender discloses prior sexual victimization during a screening that had not previously been disclosed.
- Interview with staff responsible for risk screening:
  - Indicated that a referral is made to medical and mental health when the screening indicates that an offender affirmatively answers question about prior sexual victimization that was not previously disclosed.

115.81(b)

- Facility response:
  - All prison offenders who have previously perpetrated sexual abuse, as indicated during the screening pursuant to § 115.41, are offered a follow-up meeting with a mental health practitioner.
  - The follow-up meeting was offered within 14 days of the intake screening.
  - In the past 12 months, 100 percent of offenders who have previously perpetrated sexual abuse, as indicated during the screening, are offered a follow-up meeting with a mental health practitioner (*Staff confirmed a follow-up meeting would be offered at a diagnostic center prior to transfer to LCI if known at that time*).
  - Mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.
- NCDAC Form DC967 *SOAR Screening and Referral Report*:
  - Screening and referral report for therapeutic services to decrease deviant and unhealthy sexual behavior.
- NCDAC Form DC947 *Informed Consent for Sexual Offense Accountability and Responsibility Services*:
  - Offender consent form to participate in the SOAR program.
- Interview with staff responsible for risk screening:
  - Indicated offenders answer screening questions about previously perpetrated sexual abuse at a diagnostic center before transfer to LCI.
  - Indicated a referral would be made if any new information reveals that an offender previously perpetrated sexual abuse.

115.81(c)

Not applicable to prisons.

115.81(d)

- Facility response:
  - Information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.
- Site review:
  - Physical storage of hard-copy PREA-related documentation was secured by locks.
  - Electronic storage of PREA-related documentation was secured through profile-based access and password protection.

115.81(e)

- Facility response:
  - Medical and mental health practitioners obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the offender is under the age of 18.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:

	◦ Restated the language of the provision. • Form DC 598 *North Carolina Department of Public Safety Health Services, Patient Medical Consent Form*: ◦ Patient consent form in English and Spanish. ◦ Offender voluntarily consents to medical examinations, treatments, and/or procedures which are deemed necessary in the opinion of the physician and health providers. • Form DC-945 *Confidentiality and Privileged Information*: ◦ Explained limits to the confidentiality of offender behavioral health information. • Interviews with medical and mental health staff: ◦ Indicated informed consent is obtained from an offender before reporting about prior sexual victimization that did not occur in an institutional setting. ◦ Indicated the facility does not house youthful offenders. **Determination**: The facility meets the standard.

115.82	**Access to emergency medical and mental health services**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse, dated 04.26.2024* • Interview with medical staff • Interview with security staff first responder **Reasoning and analysis**: **115.82(a)** • Facility response: ◦ Offender victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. ◦ The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ If an alleged act of sexual abuse has occurred and there may be forensic medical evidence, the offender may need medical assistance, or other circumstances dictate, arrangements shall be promptly made to have the alleged offender-victim examined by medical services. • NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*: ◦ It is the policy of the Division of Adult Correction to provide to all

offenders who allege sexual abuse a prompt medical evaluation and to offer a referral to Mental Health Services.
    - This protocol is not intended to be applicable to every clinical situation which practitioners may encounter and is not meant as a substitute for individual judgment and professional expertise.
- Interview with medical staff:
    - Indicated offender victims of sexual abuse are provided an initial assessment by facility medical staff and treatment is provided for any life-threatening injuries such as significant bleeding. Medical staff preserve evidence but do not collect evidence. The offender is then sent for a forensic exam and additional medical treatment at the hospital, if appropriate.
    - Indicated treatment provided is determined according to medical staff's professional judgement, training, experience, and medical policies.

115.82(b)

- Interview with security staff first responder:
    - Indicated offender was separated from the situation and other persons involved in the incident. Notified the OIC. Instructed offender not to destroy any evidence on their person. Secured the area where the incident took place. Had the offender assessed by medical staff. Listened to the offender when he felt like talking. Completed a statement of what was said by the offender. Notified the PCM of all steps taken.

115.82(c)

- Facility response:
    - Offender victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Medical Services will follow medical protocol, which includes provisions for examination, documentation, and transport to the local emergency department when appropriate, where the following will occur, collection of forensic evidence, testing for sexually transmitted diseases, counseling, and prophylactic treatment. Medical Services will ensure that the offender receives medical follow-up and is offered a referral for mental health services.
- Interview with medical staff:
    - Indicated victims of sexual abuse are offered timely information about access to sexually transmitted infection prophylaxis.

115.82(d)

- Facility response:
    - Treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.
- NCDAC Clinical Practice Guideline CPG-18 Sexual *Abuse*:
    - All care for sexual abuse will be provided at no cost.

	Determination: The facility meets the standard.

115.83	**Ongoing medical and mental health care for sexual abuse victims and abusers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse, dated 04.26.2024* ◦ LCI Memorandum Re: *115.83(d)-1, dated 01.13.2026* • Documentation review • Interviews with medical and mental health staff **Reasoning and analysis**: **115.83(a)** • Facility response ◦ The facility offers medical and mental health evaluation and, as appropriate, treatment to all offenders who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ Medical Services will follow medical protocol, which includes provisions for examination, documentation, and transport to the local emergency department when appropriate, where the following will occur, collection of forensic evidence, testing for sexually transmitted diseases, counseling, and prophylactic treatment. Medical Services will ensure that the offender receives medical follow-up and is offered a referral for mental health services. • NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*: ◦ NCDAC will provide all offenders who allege sexual abuse a prompt medical evaluation and to offer a referral to mental health services. **115.83(b)** • Interviews with medical and mental health staff: ◦ Indicated victimized offenders receive an initial assessment and care for any emergency medical needs, preservation of any evidence on the offender, sent to the hospital for a forensic exam if appropriate, mental health referral, and continuation of care based on discharge summary and provider orders. **115.83(c)**

- Interviews with medical and mental health staff:
    - Indicated that medical and mental health services provided are consistent with the community level of care.

115.83(d)

- N/A. (*Facility does not house female offenders*.)
- LCI Memorandum Re: *115.83(d)-1*:
    - Stated: “Lumberton Correctional Institution does not house female offenders.”
- Documentation review:
    - Auditor noted zero transgender men from facility information received.

115.83(e)

- N/A. *(Facility does not house female offenders.)*
- Documentation review:
    - Auditor noted zero transgender men from facility information received.

115.83(f)

- Facility response:
    - Offender victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Medical Services will follow medical protocol, which includes provisions for examination, documentation, and transport to the local emergency department when appropriate, where the following will occur, collection of forensic evidence, testing for sexually transmitted diseases, counseling, and prophylactic treatment.

115.83(g)

- Facility response:
    - Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.
- NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*:
    - All care for sexual abuse will be provided at no cost.

115.83(h)

- Facility response:
    - The facility attempts to conduct a mental health evaluation of all known offender-on-offender abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.
- NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*:
    - Once an investigation has been completed and an offender has been determined to be an abuser, within 60 days, a mental health provider will attempt to conduct an evaluation and offer treatment when deemed appropriate.
- Interviews with medical and mental health staff:
    - A mental health referral is made for known offender-on-offender

abusers.

Determination:

The facility meets the standard.

115.86	Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - Form OPA-I10 *Post Incident Review (PIR), revised 02.23.2023*
- Documentation review
- Interview with associate warden
- Interview with PREA compliance manager

Reasoning and analysis:

115.86(a)

- Facility response:
  - The facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded.
  - In the past 12 months, four criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - A PIR shall be completed for all substantiated and unsubstantiated allegations of sexual abuse and documented on Form OPA-I10 Post Incident Review (PIR).
- Documentation review:
  - The auditor reviewed documentation for the three allegations of sexual abuse with a substantiated or unsubstantiated outcome during the previous 12 months.

115.86(b)

- Facility response:
  - The facility ordinarily conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation.
  - In the past 12 months, 10 criminal and/or administrative investigations of alleged sexual abuse completed at the facility where a subsequent sexual abuse incident review within 30 days was applicable.

- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - The PIR shall be completed by the facility within 30 days of the conclusion of the sexual abuse investigation.
- Documentation review:
    - The auditor observed post-incident reviews for the three allegations of sexual abuse with a substantiated or unsubstantiated outcome during the previous 12 months.
    - The auditor observed post-incident reviews for two allegations of sexual abuse with an unfounded outcome during the previous 12 months.
    - The auditor observed post-incident reviews for nine allegations of sexual harassment during the previous 12 months.

115.86(c)

- Facility response:
    - The sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - The PIR is completed with input from upper-level management officials, investigators, and medical or mental health practitioners.
- Interview with associate warden:
    - Indicated the incident review team includes the PCM, associate warden, medical and mental health staff, and other staff involved in the facility's response.

115.86(d)

- Facility response:
    - The facility prepares a report of its findings from sexual abuse incident reviews including, but not necessarily limited to, determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section and any recommendations for improvement, and submits such report to the facility head and PREA compliance manager.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Restated the language of the provision.
- Form OPA-I10 *Post Incident Review (PIR)*:
    - Form to document consideration of all six requirements of the provision.
- Interview with PREA compliance manager:
    - Indicated the facility conducts a post-incident review after every sexual abuse investigation. PCM is part of the post-incident review team.
    - Indicated the post-incident review report includes determining if policies and procedures were followed, staffing levels and placements, if group dynamics were a factor, if any physical barriers contributed to the incident, and any corrective action recommendations.
    - Indicated corrective action is enacted by the facility after review by the regional office. The NCDAC PREA Office will also assist the facility with corrective action implementation.
- Interview with associate warden:
    - Indicated the incident review team considers staffing levels, staff response to the incident, the physical layout of the area including any blind spots, and if video monitoring and mirror placements were

	adequate. ◦ Indicated the incident review team considers if the allegation or incident was motivated by group dynamics or gang affiliation. ◦ Indicated corrective action may include adjustments to offender housing placements, adding a mirror or camera to eliminate a blind spot, or having staff review a policy or procedure. **115.86(e)** • Facility response: ◦ The facility implements the recommendations for improvement or documents its reasons for not doing so. • Form OPA-I10 *Post Incident Review (PIR)*: ◦ Contained section for actions taken and/or additional comments. **Determination**: The facility meets the standard.

115.87	**Data collection**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* • Supplemental documentation ◦ NCDAC Manual *OPUS: Incident Management System (Web based), undated* ◦ NCDAC Prison Rape Elimination Act (PREA) of 2003, *Sexual Abuse Annual Report 2022-2023, undated* ◦ The Center for Women *PREA Facility Audit Report: Final, dated 07.21.2025* **Reasoning and analysis:** **115.87(a)** • Facility response: ◦ The agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ Accurate, uniform data for every allegation of sexual abuse shall be documented in OPUS by all facilities. • NCDAC Manual *OPUS: Incident Management System (Web based)*: ◦ Instructions for capturing accurate, uniform data for allegations of

sexual abuse and sexual harassment.

115.87(b)

- Facility response:
  - The agency aggregates the incident-based sexual abuse data at least annually.
- NCDAC Prison Rape Elimination Act (PREA) of 2003, *Sexual Abuse Annual Report 2022-2023*:
  - 2023 aggregated data by incident type and investigation outcome.
  - 2022 aggregated data by incident type and investigation outcome.
  - Comparison charts for 2022 and 2023 by:
    - Type of reported allegation;
    - Type of substantiated case;
    - Type of alleged perpetrator;
    - Gender of alleged victim; and
    - Victims that identify as transgender offender.

115.87(c)

- Facility response:
  - The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.

115.87(d)

- Facility response:
  - The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - All written investigation reports will be retained as long as the alleged abuser is incarcerated or employed by the agency, plus five years; or sexual abuse data collected for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise, whichever is greater.

115.87(e)

- Facility response:
  - The agency obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its offenders.
  - No facility response for: “The data from private facilities complies with SSV reporting regarding content.”
- The Center for Women *PREA Facility Audit Report: Final*:
  - The agency obtains incident-based and aggregated data from the one private facility with which it contracts for the confinement of offenders.

115.87(f)

	• Facility response: ◦ The agency provided the Department of Justice (DOJ) with data from the previous calendar year upon request. **Determination:** The facility meets the standard.

115.88	**Data review for corrective action**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • LCI PAQ ◦ Facility response ◦ *NCDAC Prison Rape Elimination Act (PREA) of 2003, Sexual Abuse Annual Report 2022-2023, undated* ◦ *www.dac.nc.gov/information-and-services/prea-office, accessed 04.20.2026* • Supplemental documentation: ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* • Interview with agency head designee • Interview with PREA coordinator • Interview with PREA compliance manager **Reasoning and analysis**: **115.88(a)** • The agency reviews data collected and aggregated pursuant to §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including: ◦ Identifying problem areas; ◦ Taking corrective action on an ongoing basis; and ◦ Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole. • *NCDAC Prison Rape Elimination Act (PREA) of 2023, Sexual Abuse Annual Report 2022-2023:* ◦ Described corrective actions taken at each facility that had a substantiated sexual abuse allegation in 2022 or 2023. • Interview with agency head designee: ◦ Use post-incident sexual abuse data to determine if there is a need for policy changes, training modifications, or practice adjustments. • Interview with PREA coordinator: ◦ Indicated the agency takes corrective action after identifying an issue and lists corrective actions by facility in the annual reports. • Interview with PREA compliance manager: ◦ Indicated all PREA-related facility data is shared with the NCDAC PREA Office to improve offender safety through trend identification and by forwarding corrective action strategies to other facilities.

115.88(b)

- Facility response:
  - The annual report included a comparison of the current year's data and corrective actions with those from prior years.
  - The annual report provided an assessment of the agency's progress in addressing sexual abuse.
- *NCDAC Prison Rape Elimination Act (PREA) of 2003, Sexual Abuse Annual Report 2022-2023*:
  - Described departmental accomplishments in prevention, response, training and education.

115.88(c)

- Facility response:
  - The agency makes its annual report readily available to the public at least annually through its website (*www.dac.nc.gov/information-and-services/prea-office*).
  - The annual reports are approved by the agency head.
- *www.dac.nc.gov/information-and-services/prea-office*:
  - Listed annual reports on the NCDAC website.
- Interview with agency head designee:
  - Indicated the Secretary of the NC Department of Adult Correction approves annual reports.

115.88(d)

- Facility response:
  - When the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility.
  - The agency indicates the nature of material redacted.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - CONFIDENTIALITY: The facility investigator and all others involved in the PREA process, to the extent possible, will ensure the confidentiality of PREA complaints as well as all data collected through the investigation of those complaints except as required in the following circumstances: (1) to cooperate with law enforcement in any investigation and prosecution of the incidents alleged in such complaints; (2) to take and enforce disciplinary action against any staff member as a result of the incidents alleged in the complaints; (3) to defend against claims brought by the offender for violation of the offender’s rights for having been subjected to sexual abuse; and (4) to otherwise comply with the law.
- Interview with PREA coordinator:
  - Indicated the annual report does not include sensitive information as it is a public document.

Determination:

The facility meets the standard.

115.89	Data storage, publication, and destruction

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- LCI PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
- Supplement documentation
  - *NCDAC Prison Rape Elimination Act (PREA) of 2003, Sexual Abuse Annual Report 2022-2023, undated*
  - NCDAC Manual *OPUS: Incident Management System (Web based), undated*
  - *www.dac.nc.gov/information-and-services/prea-office, accessed 04.20.2026*
- Site review
- Interview with PREA coordinator

Reasoning and analysis:

115.89(a)

- Facility response:
  - The agency ensures that incident-based and aggregate data are securely retained.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Ensure that data is securely retained.
- Site review:
  - Facility physical storage of hard-copy PREA-related documentation was secured by locks.
  - Facility electronic storage of PREA-related documentation was secured through role-based access and password protection.
- Interview with PREA coordinator:
  - Indicated electronic data is securely retained through the OPUS system and role-based access.

115.89(b)

- Facility response:
  - Agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website.
- *www.dac.nc.gov/information-and-services/prea-office*
  - Contained links to annual reports with aggregated sexual abuse data from its facilities.
  - Contained links to facility PREA audit final reports.

115.89(c)

- Facility response:
  - Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.

	◦ The agency maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ All written investigation reports will be retained as long as the alleged abuser is incarcerated or employed by the agency, plus five years; or sexual abuse data collected for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise, whichever is greater. • *NCDAC Prison Rape Elimination Act (PREA) of 2003, Sexual Abuse Annual Report 2022-2023*: ◦ All personal identifiers removed from aggregated sexual abuse data. **115.89(d)** • *www.dac.nc.gov/information-and-services/prea-office* ◦ Sexual abuse annual reports for 2015-2024; and ◦ Facility PREA audit reports for 2014-2026. **Determination**: The facility meets the standard.

115.401	**Frequency and scope of audits**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • *www.dac.nc.gov/information-and-services/prea-office, accessed 04.20.2026* • Document review • Site review **Reasoning and analysis**: **115.401(a)** • *www.dac.nc.gov/information-and-services/prea-office* ◦ Contained links to facility PREA audit reports for 2014-2026. ◦ Facilities were audited once every three-year cycle. ◦ The agency met this standard during Cycle IV. **115.401(b)** • *www.dac.nc.gov/information-and-services/prea-office* ◦ The agency met this provision in the prior year. ◦ During audit cycle IV: ■ 17 facilities were audited in year 1. ■ 20 facilities were audited in year 2.

	■ 22 facilities were audited in year 3. **115.401(h)** • The auditor was provided with full access to all areas of the audited facility. **115.401(i)** • The auditor requested and received copies of all relevant documents and information. **115.401(m)** • The facility provided the auditor a private setting to conduct interviews with offenders selected by the auditor. **115.401(n)** • Document review: ◦ The facility posted the Notice of Audit in English and Spanish throughout the facility which the auditor observed during the onsite portion of the audit. ◦ Notice of Audit included: ■ Dates for the onsite portion of the facility's PREA audit; ■ A confidentiality statement; ■ Auditor's name; ■ Auditor's mailing address; and ■ Auditor's email address. • Site review: ◦ Auditor verified that Notices of Audit were posted in housing units and other high traffic areas for offenders and staff. ◦ Through informal conversations with the auditor, offenders indicated that the Notice of Audit had been posted for several weeks. ◦ Offenders stated they had access to locked mail boxes to send mail so letters did not have to be given to staff. **Determination**: The facility meets the standard.

115.403	**Audit contents and findings**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • *www.dac.nc.gov/information-and-services/prea-office, accessed 04.20.2026* **Reasoning and analysis**:

	115.403(f) • *www.dac.nc.gov/information-and-services/prea-office* ◦ During audit cycle IV: ■ Final reports were posted for 17 facilities audited in year 1 ■ Final reports were posted for 20 facilities audited in year 2 ■ Final reports were posted for 22 facilities audited in year 3 **Determination**: The facility meets the standard.

Appendix: Provision Findings		
115.11 (a)	**Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	**Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	**Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	**Contracting with other entities for the confinement of inmates**	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	**Contracting with other entities for the confinement of inmates**	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	yes

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

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

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

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

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

	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	**Inmates with disabilities and inmates who are limited English proficient**	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	**Hiring and promotion decisions**	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who 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
115.17 (b)	**Hiring and promotion decisions**	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	**Hiring and promotion decisions**	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	**Hiring and promotion decisions**	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	**Hiring and promotion decisions**	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	**Hiring and promotion decisions**	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have	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
115.17 (g)	**Hiring and promotion decisions**	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	**Hiring and promotion decisions**	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	**Upgrades to facilities and technologies**	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	**Upgrades to facilities and technologies**	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	**Evidence protocol and forensic medical examinations**	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the	yes

	agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	
115.21 (b)	**Evidence protocol and forensic medical examinations**	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	**Evidence protocol and forensic medical examinations**	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	**Evidence protocol and forensic medical examinations**	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes

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

	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	**Policies to ensure referrals of allegations for investigations**	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	**Employee training**	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates’ right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	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?	
115.31 (b)	**Employee training**	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	**Employee training**	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	**Employee training**	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	**Volunteer and contractor training**	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	**Volunteer and contractor training**	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	**Volunteer and contractor training**	

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

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

	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	**Specialized training: Medical and mental health care**	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or 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
115.35 (b)	**Specialized training: Medical and mental health care**	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.35 (c)	**Specialized training: Medical and mental health care**	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental	yes

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

	criteria to assess inmates for risk of sexual victimization: (4) 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) Whether the inmate’s criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	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) 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) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	**Screening for risk of victimization and abusiveness**	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	**Screening for risk of victimization and abusiveness**	
	Within a set time period not more than 30 days from the inmate’s arrival at the facility, does the facility reassess the inmate’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

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

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

	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
115.43 (c)	**Protective Custody**	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	**Protective Custody**	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility’s concern for the inmate’s safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation	yes

	can be arranged?	
115.43 (e)	**Protective Custody**	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	**Inmate reporting**	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b)	**Inmate reporting**	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain 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
115.51 (c)	**Inmate reporting**	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	**Inmate reporting**	

	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	**Exhaustion of administrative remedies**	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	**Exhaustion of administrative remedies**	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	**Exhaustion of administrative remedies**	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	**Exhaustion of administrative remedies**	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision,	yes

	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.)	yes
115.52 (e)	**Exhaustion of administrative remedies**	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate’s decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	**Exhaustion of administrative remedies**	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days?	yes

	(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.)	yes
	Does the initial response document the agency’s action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency’s final decision document the agency’s action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	**Exhaustion of administrative remedies**	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	**Inmate access to outside confidential support services**	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, 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
115.53 (b)	**Inmate access to outside confidential support services**	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	**Inmate access to outside confidential support services**	
	Does the agency maintain or attempt to enter into memoranda of	yes

	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
115.54 (a)	**Third-party reporting**	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	**Staff and agency reporting duties**	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	**Staff and agency reporting duties**	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	**Staff and agency reporting duties**	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner’s duty to report, and the limitations of	yes

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

	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
115.64 (b)	**Staff first responder duties**	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	**Coordinated response**	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	**Preservation of ability to protect inmates from contact with abusers**	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency’s behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency’s ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	**Agency protection against retaliation**	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate	yes

	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
115.67 (b)	**Agency protection against retaliation**	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	**Agency protection against retaliation**	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of 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

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	**Agency protection against retaliation**	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	**Agency protection against retaliation**	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	**Post-allegation protective custody**	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	**Criminal and administrative agency investigations**	
	When the agency conducts its own investigations into allegations 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
115.71 (b)	**Criminal and administrative agency investigations**	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	**Criminal and administrative agency investigations**	
	Do investigators gather and preserve direct and circumstantial	yes

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

	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	**Criminal and administrative agency investigations**	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	**Criminal and administrative agency investigations**	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	**Evidentiary standard for administrative investigations**	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	**Reporting to inmates**	
	Following an investigation into an inmate’s allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	**Reporting to inmates**	
	If the agency did not conduct the investigation into an inmate’s allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	**Reporting to inmates**	
	Following an inmate’s allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate’s unit?	yes
	Following an inmate’s allegation that a staff member has	yes

	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
115.73 (d)	**Reporting to inmates**	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually 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
115.73 (e)	**Reporting to inmates**	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	**Disciplinary sanctions for staff**	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	**Disciplinary sanctions for staff**	
	Is termination the presumptive disciplinary sanction for staff who	yes

	have engaged in sexual abuse?	
115.76 (c)	**Disciplinary sanctions for staff**	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	**Disciplinary sanctions for staff**	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	**Corrective action for contractors and volunteers**	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	**Corrective action for contractors and volunteers**	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	**Disciplinary sanctions for inmates**	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	**Disciplinary sanctions for inmates**	

	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	**Disciplinary sanctions for inmates**	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	**Disciplinary sanctions for inmates**	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	**Disciplinary sanctions for inmates**	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	**Disciplinary sanctions for inmates**	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	**Disciplinary sanctions for inmates**	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	**Medical and mental health screenings; history of sexual abuse**	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	**Medical and mental health screenings; history of sexual abuse**	

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

115.82 (c)	**Access to emergency medical and mental health services**	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	**Access to emergency medical and mental health services**	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If pregnancy results from the conduct described in paragraph §	na

	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.)	
115.83 (f)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	**Sexual abuse incident reviews**	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	**Sexual abuse incident reviews**	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	**Sexual abuse incident reviews**	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	**Sexual abuse incident reviews**	

	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	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
115.86 (e)	**Sexual abuse incident reviews**	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	**Data collection**	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	**Data collection**	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	**Data collection**	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	**Data collection**	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports,	yes

	investigation files, and sexual abuse incident reviews?	
115.87 (e)	**Data collection**	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	**Data collection**	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	**Data review for corrective action**	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant 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
115.88 (b)	**Data review for corrective action**	
	Does the agency’s annual report include a comparison of the current year’s data and corrective actions with those from prior years and provide an assessment of the agency’s progress in addressing sexual abuse?	yes
115.88 (c)	**Data review for corrective action**	
	Is the agency’s annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	**Data review for corrective action**	
	Does the agency indicate the nature of the material redacted	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?	
115.89 (a)	**Data storage, publication, and destruction**	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	**Data storage, publication, and destruction**	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	**Data storage, publication, and destruction**	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	**Data storage, publication, and destruction**	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	**Frequency and scope of audits**	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	**Frequency and scope of audits**	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by	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.)	
115.401 (h)	**Frequency and scope of audits**	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	**Frequency and scope of audits**	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	**Frequency and scope of audits**	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	**Frequency and scope of audits**	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	**Audit contents and findings**	
	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