PREA Facility Audit Report: Final

Name of Facility: North Carolina Correctional Institution for Women
Facility Type: Prison / Jail
Date Interim Report Submitted: 02/26/2026
Date Final Report Submitted: 09/03/2026

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:** 09/03/2026

AUDITOR INFORMATION	
Auditor name:	Uldricks, Aaron
Email:	confinementsolutions@gmail.com
Start Date of On-Site Audit:	01/05/2026
End Date of On-Site Audit:	01/07/2026

FACILITY INFORMATION	
Facility name:	North Carolina Correctional Institution for Women
Facility physical address:	1034 Bragg Street , Raleigh , North Carolina - 27610
Facility mailing address:	

Primary Contact

Name:	Edward Castelo
Email Address:	edward.castelo@dac.nc.gov
Telephone Number:	919-906-9257

Warden/Jail Administrator/Sheriff/Director	
Name:	Michelle Carlton
Email Address:	michelle.carlton@dac.nc.gov
Telephone Number:	919-873-5385

Facility PREA Compliance Manager	
Name:	Patience Reid
Email Address:	patience.reid@dac.nc.gov
Telephone Number:	9198735020
Name:	Edward Castelo
Email Address:	edward.castelo@dac.nc.gov
Telephone Number:	(919) 906-9257

Facility Health Service Administrator On-site	
Name:	James Alexander
Email Address:	james.alexander@dac.nc.gov
Telephone Number:	919-873-5138

Facility Characteristics	
Designed facility capacity:	1850
Current population of facility:	1162
Average daily population for the past 12 months:	1079

Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Women/girls
Age range of population:	42
Facility security levels/inmate custody levels:	Minimum, Medium and Close
Does the facility hold youthful inmates?	Yes
Number of staff currently employed at the facility who may have contact with inmates:	756
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	100
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	20

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:	2026-01-05
2. End date of the onsite portion of the audit:	2026-01-07

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:	InterAct Family Violence and Prevention Center

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1850
15. Average daily population for the past 12 months:	1079
16. Number of inmate/resident/detainee housing units:	12
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:	1134
24. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	1
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:	34
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:	11
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:	29
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:	20
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:	3

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:	25
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:	43
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:	4
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:	75
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:	526

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:	20
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:	39
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:	20
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?	The auditor interviewed offenders from several 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:	20
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".	
46. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:	1
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:	3

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:	2
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:	3
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:	3
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:	6
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).	The auditor confirmed the response with the PREA compliance manager and the warden.
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):	17

63. Were you able to interview the Agency Head?	○ Yes ◉ No
a. Explain why it was not possible to interview the Agency Head:	Interviewed the 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	122	1	122	1
Staff-on-inmate sexual abuse	8	1	8	1
Total	130	2	130	2

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	253	0	253	0
Staff-on-inmate sexual harassment	7	0	7	0
Total	260	0	260	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	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	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	6	113	3
Staff-on-inmate sexual abuse	0	6	1	1
Total	0	12	114	4

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	6	245	2
Staff-on-inmate sexual harassment	0	2	5	0
Total	0	8	250	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:	14

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:	7
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:	7
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:	14
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:	5
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 facility also conducted 51 preliminary investigations for allegations the facility investigators subsequently determined 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: • North Carolina Correctional Institution for Women (NCCIW) Pre-Audit Questionnaire (PAQ) ◦ Facility response ◦ North Carolina Department of Adult Correction (NCDAC) Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025* ◦ NCCIW Procedure L.4200 PREA - *The Response Plan*, *dated 03.21.2025* ◦ NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations*, *dated 09.04.2025* ◦ NCDAC Organizational Chart - PREA coordinator position, *dated 10.16.2025*

- NCCIW Memorandum - *Designation of PREA compliance managers (PCM), dated 04.08.2025*

- Supplemental documentation
  - NCCIW Organizational Chart - primary PCM, *undated*
  - NCCIW Organizational Chart - secondary PCM, *undated*
- Interview with PREA compliance manager (PCM)
- Interview with PREA coordinator

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.
- North Carolina Department of Adult Correction (NCDAC) Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy:*
  - DAC is committed to a standard of zero-tolerance of sexual abuse and sexual harassment toward offenders, either by staff, contractors, volunteers, or by offenders.
  - Provided definitions of prohibited behaviors regarding sexual abuse and sexual harassment.
- NCCIW Procedure L.4200 *PREA - The Response Plan:*
  - Described prevention efforts through staff training, offender education, screening, and detection efforts through multiple reporting options.
  - Outlined facility's coordinated response to an incident of sexual abuse or sexual harassment including actions taken by first responders, medical and mental health practitioners, investigators, PREA compliance manager (PCM), PREA support person (PSP), and facility/ agency leadership.
- NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations:*
  - Included disciplinary sanctions for offenders, employees, contractors, and volunteers who have engaged in substantiated sexual abuse or sexual harassment.

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.
- NCDAC Organizational Chart - PREA coordinator position:
  - The PREA coordinator has the title of PREA Director and reports to the NCDAC Operations Chief Deputy Secretary.
- Interview with PREA coordinator:
  - Indicated sufficient time to manage all PREA-related responsibilities.
  - Oversees 56 PREA compliance managers (PCM). Facilities designate a secondary PCM. Interacts with PCM through continuous sharing information sharing, trainings, and mock audits.
  - Develops and oversees a 30-day corrective action plan for a facility if a compliance issue is identified.
  - Supervises four PREA analysists and a PREA training coordinator who also 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.
- NCCIW Memo - *Designation of PREA compliance managers (PCM)*:
  - NCCIW warden designated a captain as the primary PCM and a facility compliance specialist as the secondary PCM.
  - Designees have sufficient time and authority to coordinate the facility's efforts to comply with the PREA Standards.
- NCCIW Organization Chart - primary PCM:
  - Primary PCM reports to the associate warden.
- NCCIW Organizational Chart - secondary PCM:
  - Secondary PCM reports to the warden.
- Interview with PREA compliance manager:
  - Indicated sufficient time to manage all PREA related responsibilities.

Determination:

The facility exceeds the standard.

- Continual process improvement by the PREA coordinator through mock audits and corrective action plans.
- Designated primary and secondary PREA compliance managers.

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: • NCCIW PAQ ◦ Facility response • Interview with agency's contract administrator **Reasoning and analysis**: **115.12(a)** • Facility response: ◦ Zero contracts have been entered into or renewed for the confinement of offenders since the last PREA audit. • Interview with agency's contract administrator: ◦ PREA director 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 is stated in contract and renewals. ◦ Indicated contracted entity is scheduled for a PREA audit during the current three-year cycle. **115.12(b)** • Facility response: ◦ Any contract or contract renewal requires the agency to monitor contractor's compliance. ◦ Zero contracts have been entered into or renewed for the confinement of offenders since the last PREA audit. **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:

- NCCIW PAQ
  - Facility response
  - NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025*
  - *NCDAC Prison Post Chart, dated 01.02.2026*
  - NCCIW Population Statistical Report, *dated 11.21.2025*
  - *Post Chart Report*, *undated*
  - *NCCIW Daily Rounds - Dorm H, dated 11.18.2025 - 12.15.2025*
- Supplemental documentation
  - NCCIW *115.13 PREA Staffing Analysis (2025), dated 12.29.2025*
- Site review
- Interview with warden
- Interview with PREA compliance manager
- Interview with captain

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 1079.
  - Since the last PREA audit, the staffing plan was predicated on the average offender population of 1079.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening:*
  - When calculating adequate staffing levels and determining the need for video monitoring, the facility shall take into consideration:
    - Generally accepted detention and correctional practices;
    - Any judicial findings of inadequacy;
    - Any findings of inadequacy from federal investigative agencies;
    - Any findings of inadequacy from internal or external oversight bodies;
    - All components of the facility's physical plant (including "blind-spots" or areas where employees or offenders may be isolated);
    - The composition of the offender population;
    - The number and placement of supervisory employees;
    - Institutional programs occurring on a particular shift;

        - Any applicable State or local laws, regulations, or standards;
        - The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
        - Any other relevant factors.
- *NCDAC Prison Post Chart*:
    - Listed facility post assignments for correctional officers and supervisors.
    - Accounted for offender housing, programing, vocational, recreational, diagnostic, visitation, medical, and other areas of the facility.
- NCCIW Population Statistical Report:
    - Listed 1078 as the average daily population for the facility.
- Site review:
    - The auditor observed staff assigned to housing units and other areas of the facility where offenders were present. Supervisors interacted regularly with staff and offenders. Previously identified blind spots were addressed through a combination of camera and mirror placements.
- Interview with warden:
    - Indicated that staffing levels are based on the number of offenders in specific areas. Staff are properly trained to deter and detect sexual abuse. Cameras and mirrors assist staff in monitoring and reducing blind spots.
    - Indicated that the facility considers all factors related to offender safety including identifying and correcting issues promptly.
    - Indicated that compliance is monitored through the review of post order logs, daily shift narratives, and an annual staffing analysis.
- Interview with PREA compliance manager:
    - Indicated that the assessment of adequate staffing levels and the need for video monitoring takes into account multiple factors including the offender population, the placement of supervisory staff, the facility’s physical layout, and all other relevant considerations. Any identified deficiencies are addressed and remedied as promptly as possible.

115.13(b)

- Facility response:
    - Staffing plan deviations are documented and justified.
    - Staff shortage is the most common reason for staffing plan deviation in the last 12 months.
- 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 warden:

- Indicated that all instances of non-compliance are documented and include explanations.

115.13(c)

- Facility response:
  - Agency/facility staffing plan reviews in collaboration with PREA coordinator to determine if adjustments are needed to:
    - staffing plan,
    - deployment of monitoring technology, or
    - allocation of resources to ensure compliance with staffing plan.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - Restated the language of the provision.
- *Post Chart Report*:
  - Last review conducted 03.26.2025.
- Interview with PREA coordinator:
  - Indicated collaboration with warden and PCM for annual staffing plan assessments and adjustments.

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.
- *NCCIW Daily Rounds - Dorm H*:
  - Unannounced rounds were documented.
  - Unannounced rounds covered all shifts.
  - Supervisors vary times for unannounced rounds.
- Site review:
  - Auditor observed daily rounds logs in housing units.
  - Logs contained entries by multiple supervisors.

	• Interview with captain: ◦ Indicated unannounced rounds are conducted every day. ◦ Indicated unannounced rounds are documented in a rounds log in each housing unit. ◦ Indicated unannounced rounds vary in order and times conducted. ◦ Indicated conducting unannounced rounds enabled supervisors to identify and correct issues that might not otherwise have been observed. **Corrective action requirement:** **115.13(c)** Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan. **Corrective action recommendation:** Provide facility's latest annual PREA staffing plan analysis or other documentation that accounts for: ◦ The facility's staffing plan; ◦ The facility's deployment of monitoring technologies; and ◦ The facility's resources for complying with the staffing plan. **Corrective action provided by the facility:** • NCCIW *115.13 PREA Staffing Analysis (2025):* ◦ Documented the agency's assessment and any adjustments to: ■ The facility's staffing plan; ■ The facility's deployment of monitoring technologies; and ■ The facility's resources for complying with the staffing plan. **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:

- NCCIW PAQ
  - Facility response
  - NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025*
  - NCCIW Post Orders - *A1 Youth Officer, dated 05.05.2025*
- Supplemental documentation
  - NCDAC *Housing and Bed Search Report*, *dated 01.27.2026*
- Site review
- Interview with youthful offender
- Interview with line staff who supervise youthful offenders
- Interview with education and program staff who work with youthful offenders

Reasoning and analysis:

115.14(a)

- Facility response:
  - The facility prohibits placing youthful offenders in a housing unit in which a youthful offender will have sight, sound, or physical contact with any adult offender through use of a shared dayroom or other common space, shower area, or sleeping quarters.
  - The facility has a dedicated housing unit (A-1 Housing) to which youthful offenders are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters.
  - Adult offenders are not assigned to this housing unit.
- NCDAC Policy and Procedure PREA-*100 PREA Prevention Planning and Screening*:
  - Youthful offenders shall not be placed in a housing unit where they shall have sight, sound, or physical contact with any adult offender.
- NCCIW Post Orders - *A1 Youth Officer:*
  - Only offenders assigned to the A1 housing unit will be allowed in the dorm.
- NCDAC *Housing and Bed Search Report*:
  - Listed offenders assigned to A1 housing unit.
- Site Review:
  - A youthful offender was the only individual assigned to the A1 housing unit when the auditor reviewed housing unit logs.
  - A dedicated staff was assigned to the A1 housing unit.
  - Zero adult offenders could be seen or heard during the auditor's time in the A1 housing unit.
- Interview with youthful offender:
  - Indicated there is no direct contact with adult offenders, only with

staff.

- Interview with line staff who supervise youthful offenders:
    - Indicated sight and sound separation are maintained.
    - Indicated sight and sound separation are achieved through a dedicated housing unit and staff.
    - Indicated problem solving included scheduling separate youthful opportunities.
    - Indicated youthful offenders are never placed in solitary confinement. They are assigned to the A1 housing unit.

115.14(b)

- Facility response:
    - The facility maintains sight, sound, and physical separation between youthful and adult offenders outside housing units.
    - The facility always provides direct staff supervision outside housing units.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening:*
    - In areas outside of housing units, direct employee supervision will be provided or sight and sound separation will be maintained.
- NCCIW Post Orders - *A1 Youth Officer:*
    - Custody staff escort and supervise the youthful offender any time the youthful offender exits the A1 housing unit.
- Interview with youthful offender:
    - Indicated staff are the only adults around when outside.
- Interview with education and program staff:
    - Indicated program staff make their best efforts to supply equivalent program and educational opportunities as adult offenders receive.
- Interview with line staff who supervise youthful offenders:
    - Indicated staff are always present with youthful offender in areas outside the A1 housing unit.

115.14(c)

- Facility response:
    - Facility documents exigent circumstances when a youthful offender is restricted from large-muscle exercise, legally required education services, or other program or work opportunities.
    - Zero youthful offenders have been placed in isolation to separate them from adult offenders in the past 12 months.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening:*
    - All efforts shall be made to avoid placing youthful offenders in isolation.
    - Youthful offenders will not be denied daily large-muscle exercise or

	legally required special education services, absent exigent circumstances. ◦ Youthful offenders will have access to programs and work opportunities to the extent possible. • NCCIW Post Orders - *A1 Youth Officer:* ◦ Offenders will be able to access the A1 yard area. • Site review: ◦ Auditor observed dedicated spaces in the A1 housing unit that are used for exercise during inclement weather, visitation, and programing. • Interview with staff who supervise youthful offenders: ◦ Indicated youthful offenders have access to daily exercise, legally required education services, and other opportunities. • Interview with education and program staff who work with youthful offenders: ◦ Indicated youthful offenders always have direct staff supervision outside the A1 housing unit. **Determination**: The facility meets the standard.

115.15	**Limits to cross-gender viewing and searches**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025* ◦ NCCIW Standard Operating Procedure D.3100 *Searches, dated 02.13.2023* • Supplemental documentation ◦ Photo - *Frosted Showers2.png* • Site review • Interviews with random sample of staff • Interviews with offenders **Reasoning and analysis**: **115.15(a)**

- Facility response:
  - The facility does not permit cross-gender pat-down searches of female offenders, absent exigent circumstances.
  - The facility does not restrict female offenders' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.
  - Staffing pattern allows for gender specific posts to prevent restrictions.
  - 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:
  - Screens were used in receiving, medical, and other areas of the facility where strip searches take place to obstruct possible cross-gender viewing by non-medical staff.
  - The PCM reiterated that male staff do not conduct cross-gender pat, strip, or visual body cavity searches of offenders.

115.15(b)

- Facility response:
  - The facility does not permit cross-gender pat-down searches of female offenders, absent exigent circumstances.
  - The facility does not restrict female offenders' access to programing or other out-of-cell opportunities to comply with cross-gender pat-down prohibition.
  - Zero pat-down searches of female offenders were conducted by male staff.
- NCCIW Standard Operating Procedure D.3100 *Searches:*
  - Male staff may not conduct a routine search on a female offender unless there is an emergency situation and must be approved by incident commander and warden.
  - Cross-gender search must be documented in unit's search log and the shift narrative.
- Site Review:
  - Auditor observed zero documentation of cross-gender searches in daily shift narratives provided.
- Interviews with random sample of staff:
  - Indicated female staff are always available for pat-down searches.
- Interviews with offenders:
  - Indicated female staff are always available for pat-down searches.

115.15(c)

- Facility response:
    - Facility policy requires all cross-gender strip and cross-gender visual body cavity searches be documented.
    - Facility policy requires all cross-gender pat down searches by documented.
- NCCIW Standard Operating Procedure D.3100 *Searches*:
    - Cross-gender pat-down searches of female offenders must be documented in unit's search log and the shift narrative.
- NCDAC Policy and Procedure PREA-100 NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
    - DAC facilities shall document all cross-gender pat-down searches of female offenders.
    - DAC facilities shall document 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.
- Site review:
    - Auditor identified a shower in Sparrow Dorm which had a shower curtain but was flanked by clear panels allowing for potential cross-gender viewing.
        - PCM initiated corrective action to resolve potential cross-gender viewing issue while the auditor was onsite.
        - PCM entered a work order for partial frosting of shower panels.
        - PCM provided photo documentation of completed work order on 02.17.2025, which resolved potential cross-gender viewing.
    - Male staff made loud cross-gender announcements when entering housing units.
    - Female staff made a loud announcement and checked bathroom and shower before auditor entered those areas.
    - Auditor viewed electronic monitoring of housing units and observed

	zero instances of areas where offenders were in a state of undress. • Photo - *Frosted Showers2.png* ◦ Documented completed work order to obscure the lower portion of shower panel. • Interviews with random sample of staff: ◦ Indicated male staff announce their presence when entering a housing unit. ◦ Indicated offenders are able to dress, shower, and toilet without being naked in full view of male staff. • Interviews with offenders: ◦ Indicated male staff announce their presence when entering the housing unit. ◦ Indicated offenders are never naked in full view of male 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: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025* • Supplemental documentation ◦ NC Department of Administration (NCDOA) Statewide Term Contract 961C *Translation & Interpretation Services, exp. 12.31.2026* ◦ Acolad *Interpretation & Translation Services "Access Contact Sheet", dated 12.2025* ◦ Form OPA-T100 *Person in Confinement of Under Supervision, Education Acknowledgement Form, dated 01.19.2023*

- Form OPA-T102S *LAS DENUNCIAS RELACIONADAS CON LA PREA AYUDAN A PREVENIR LA VIOLENCIA SEXUAL, dated 01.24.2026*
- NCCIW Memorandum *Re: PREA Standard 115.16 (Offenders with disabilities/LEP), dated 03.09.2026:*

- Site review
- Interview with agency head
- Interviews with offenders with disabilities
- Interviews with offenders who are limited English proficient

Reasoning and analysis:

115.16(a)

- Facility response:
  - The agency has established procedures that provide disabled 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 deaf or hard of hearing offenders by providing access to interpreters.
  - Ensure written materials are in formats or through methods that ensure effective communication with offenders with disabilities.
- Statewide Term Contract 961C *Translation & Interpretation Services:*
  - Included American Sign Language (ASL) interpretation service.
- Acolad *Interpretation & Translation Services "Access Contact Sheet":*
  - Provided instructions for on-site and remote video ASL interpretation service.
- Site review:
  - ASL interpreter was onsite and stated availability of three days per week at the facility.
  - Program staff and unit managers are available to assist those with low vision, limited reading skills, or an intellectual disability.
- Interview with agency head designee:
  - Indicated 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 therapist, program staff, or unit manager could 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.
- 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*:
    - 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.
- Site review:
    - Auditor accessed an interpretive service by phone, on-demand, for interviews with limited English proficient offenders.
    - 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 information about sexual abuse and sexual harassment in Spanish was provided in the diagnostic center upon arrival.
    - Indicated information was understood.
    - Indicated that PREA-related posters in Spanish are posted in housing units.
    - Indicated that Spanish speaking staff or interpretive services are available.

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, three 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. • NCCIW Memorandum *Re: PREA Standard 115.16 (Offenders with disabilities/ LEP):* ◦ The NCCIW PREA compliance manager stated: "NCCIW has utilized three contract interpreters, not three (3) offender interpreters/ assistants." For each of the three investigations, the name of the interpreter was provided. ◦ Memorandum corrects the erroneous facility response for PAQ section 115.16 (c)-3. • 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. • Interview with 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. **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: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025* • Supplemental documentation ◦ Form DAC-HR 005 *Applicant Verification, dated 07.2023*

- Form DAC-HR 013 *DAC Employee Acknowledgement, 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 (ii).
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - Restated the language of the provision.
- Documentation review:
  - 12 of 12 files reviewed contained completion of *DAC PREA Hiring and Prohibitions* course.

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*:
  - Listed six PREA hiring and promotion prohibition questions.
- Form DAC-HR 013 *DAC Employee Acknowledgement*:
  - Listed six PREA hiring and promotion prohibition questions.
- Interview with administrative (human resources) staff:
  - Indicated the facility consider priors 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.

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, 59 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.
- Documentation review:
    - 12 of 12 files reviewed by the auditor contained background checks.
- Interview with administrative (human resources) staff:
    - Indicated criminal record background checks are conducted for all newly hired employees and employees considered for promotions, 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, zero 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.
- Interview with administrative (human resources) staff:
    - Indicated criminal record background checks are conducted for all 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 listed on HR background spreadsheet had a completed background check within the past five years.
- Interview with administrative (human resources) staff:
    - Indicated Division of Criminal Investigation (DCI) background checks are conducted both initially and 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 employees have a continuing affirmative duty to disclose any such previous misconduct.
    - Indicated previous misconduct questions described in section (a) are asked on forms DAC-HR 005 Applicant Verification, DAC-HR 013 DAC Employee Acknowledgement, and DAC PREA Hiring and Prohibitions curriculum.

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*:
    - Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

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 reference check forms are sent to previous institutional employers which request information on substantiated allegations of sexual abuse or sexual harassment involving the former employee.

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: • NCCIW PAQ ◦ Facility response • Supplemental documentation ◦ NCDAC *Prison Rape Elimination Act (PREA) of 2023, Sexual Abuse Annual Report 2022-2023, undated* • Interview with agency head designee • Interview with 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 warden:

	◦ Indicated offenders were moved to other housing units and some housing areas were temporarily shuttered for an air conditioning installation project. **115.18(b)** • Facility response: ◦ The agency/facility has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit. • NCDAC *Prison Rape Elimination Act (PREA) of 2023, Sexual Abuse Annual Report 2022-2023*: ◦ "Made upgrades to technology (such as mirrors, motion lights, or cameras) in the area in which the incident occurred." • 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 warden: ◦ Indicated any facility expansion or modification must maintain or increase the facility's ability to protect offenders from sexual abuse. **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: • NCCIW 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 Memorandum *Compliance with PREA Investigations Standards , dated 04.02.2025* ◦ NCDPS Health Services Policy CP-18 *Sexual Abuse, dated 02.2014* ◦ *Memorandum of Understanding Between North Carolina Correctional*

Institution for Women and The Family Violence and Prevention Center, InterAct, dated 05.05.2025
    - NCDAC Memorandum - *PREA Sexual Abuse Response Team (SART), dated 09.03.2025*
- Supplemental documentation
    - NCDAC PREA Support Person (PSP) Training, *undated*
    - *InterAct of Wake County Director, "PREA Call." email chain, dated 07.08.2025*
- Interviews with a random sample of staff
- Interview with PREA compliance manager
- Interview with offender who reported a sexual abuse

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 North Carolina State Capitol Police 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 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.
- 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.

- Interviews with a random sample of staff:
  - Indicated staff would follow the protocol for obtaining usable physical evidence:
    - secure potential crime scene;
    - request/ensure that alleged victim/alleged abuser do not engage in hygiene activities; and
    - send alleged victim to hospital for forensic medical examination.
  - Indicated there were multiple investigators at NCCIW.

115.21(b)

- Facility response:
  - The protocol is developmentally appropriate for youth.
  - The protocol was adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "*A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents*".

115.21(c)

- Facility response:
  - The facility offers all offenders who experience sexual abuse access to forensic medical examinations.
  - The facility offers all offenders who experience sexual abuse access to forensic medical examinations onsite (*Auditor confirmed with facility administration that this was an erroneous answer*).
  - The facility offers all offenders who experience sexual abuse access to forensic medical examinations at an outside facility.
  - Forensic medical examinations are offered without financial cost to the victim.
  - Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) at Wake Medical Center.
  - When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations at Wake Medical Center.
  - Zero forensic medical exams have been conducted for NCCIW offenders during the past 12 months.

- 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.
- NCDPS Health Services Policy CP-18 *Sexual Abuse:*
    - All care for sexual abuse will be provided at no cost.

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 and documents these efforts.
    - 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.
- *Memorandum of Understanding Between North Carolina Correctional Institution for Women and The Family Violence and Prevention Center, InterAct*:
    - InterAct will serve as an outside resource for NCCIW offender victims of sexual assault including forensic exam accompaniment, emotional support, information/referrals, crisis intervention, and follow up services via hotline, in-person, and/or mail correspondence.
- Interview with PREA compliance manager:
    - Indicated facility PREA support person (PSP) provides emotional support, crisis intervention, and referrals.
    - Indicated facility and InterAct have a MOU where InterAct will provide a victim advocate.
- Interview with offender who reported a sexual abuse:
    - Indicated met with a facility PSP.
    - Indicated met a mental health counselor but it was not the counselor the offender sees once a month.

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:
    - Restated the language of this provision.
- Interview with PREA compliance manager:
    - Indicated MOU with InterAct contains provision for training InterAct personnel on PREA standards relevant to victim services.

115.21(f)

- Facility response:
    - The agency has requested that the responsible agency follow the requirements of paragraphs §115.21 (a) through (e) of the PREA Standards.
- *NCDAC Memorandum Compliance with PREA Investigations Standards*:
    - Requested that local law enforcement entities comply with the applicable requirements of PREA Standard 115.21.

115.21(g)

Auditor is not required to audit this provision.

115.21(h)

- NCDAC Memorandum - *PREA Sexual Abuse Response Team (SART)*:
    - Lists programs directors, programs supervisors, case managers, and an admissions technician as PREA support staff.
- NCDAC 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

Corrective action requirement:

115.21(c)

- The agency shall document efforts to provide SANE or SAFE.

Corrective action recommendation:

- Ensure the agency documents efforts to provide SAFEs/SANEs.

	Corrective action taken by the facility: • *InterAct of Wake County Director, "PREA Call." email chain*: ◦ Email response explaining logistical issues for providing SANE exams to NCCIW offenders at InterAct's Solace Center. **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: • NCCIW 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* ◦ *https://ncconnect.sharepoint.com/sites/PREACommunicationsSite* • Supplemental documentation: ◦ NCDAC *PREA Incident Detail Report, NC CI WOMEN (3010), INM/INM SEXUAL ABUSE, date range 12.01.24 - 11.30.25* ◦ NCDAC *PREA Incident Detail Report, NC CI WOMEN (3010), INM/INM SEXUAL HARASSMENT, date range 12.01.24 - 11.30.25* ◦ NCDAC *PREA Incident Detail Report, NC CI WOMEN (3010), INM/INM SEXUAL ACT, date range 12.01.24 - 11.30.25* ◦ NCDAC *PREA Incident Detail Report, NC CI WOMEN (3010), STAFF SEXUAL ABUSE, date range 12.01.24 - 11.30.25* ◦ NCDAC PREA *Incident Detail Report, NC CI WOMEN (3010), INM/INM SEXUAL HARASSMENT, date range 12.01.24 - 11.30.25* ◦ NCCIW Memorandum *Re: PREA Standard 115.22(b)&(c), dated 03.11.2026* • 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).
    - 445 allegations of sexual abuse and sexual harassment received in the past 12 months.
    - 445 allegations resulted in an administrative investigation in the past 12 months.
    - Zero allegations were referred for criminal investigation.
    - All investigations were completed in the last 12 months.
- NCDAC *PREA Incident Detail Report, NC CI WOMEN (3010), INM/INM SEXUAL ABUSE*:
    - 133 incidents of offender-on-offender sexual abuse
- NCDAC *PREA Incident Detail Report, NC CI WOMEN (3010), INM/INM SEXUAL HARASSMENT*:
    - 287 incidents of offender-on-offender sexual harassment
- NCDAC *PREA Incident Detail Report, NC CI WOMEN (3010), INM/INM SEXUAL ACT*:
    - Two incidents of offender-on-offender sexual act
- NCDAC *PREA Incident Detail Report, NC CI WOMEN (3010), STAFF SEXUAL ABUSE*:
    - Nine incidents of staff-on-offender sexual abuse
- NCDAC *PREA Incident Detail Report, NC CI WOMEN (3010), INM/INM SEXUAL HARASSMENT*:
    - 13 incidents of staff-on-offender sexual harassment
- Interview with agency head designee:
    - Indicated an investigation is initiated for every allegation received.
    - Indicated facility notifies 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.

155.22(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.

        - *https://ncconnect.sharepoint.com/sites/PREACommunicatio-nsSite*
    - The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy:*
    - 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 PREA-300 *PREA Official Response and Investigations:*
    - Accurate, uniform data for every allegation of sexual abuse shall be documented in OPUS by all facilities.
- Interview with investigative staff:
    - Indicated agency policy requires allegations involving potentially criminal behavior be referred to the N.C. State Capitol Police and N.C. State Bureau of Investigation.

115.22(c)

- Documentation review:
    - *https://ncconnect.sharepoint.com/sites/PREACommunicationsSite*:
        - Not a publicly accessible link.

115.22(d)

Auditor is not required to audit this provision.

115.22(e)

Auditor is not required to audit this provision.

Corrective action requirement:

115.22(b)

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.

Corrective action recommendation:

- Provide relevant link on agency's website to policy which ensures 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.

	Corrective action taken by the facility: • NCCIW Memorandum *Re: PREA Standard 115.22(b)&(c):* ◦ https://public.powerdms.com/NCDAC/tree/documents/2308409 ◦ Publicly accessible link to policy which ensures 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. **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: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy and Procedure 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* • Supplemental documentation ◦ 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* • Documentation review • Interviews with a 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 Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - New employees receive the Sexual Abuse and Harassment 101 training that addresses elements one through 10 of this provision.
- NCDAC Office of Staff Development and Training, 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.
- Documentation review:
    - 12 of 12 staff files reviewed by the auditor contained completion documentation for *PREA: Sexual Abuse and Sexual Harassment 101*.
- Interviews with a random sample of staff:
    - Indicated that staff receive instruction for the 10 elements of the provision in basic training and in annual in-service training.

115.31(b)

- Facility response:
    - Training is not tailored to the gender of the offenders at the facility (*Staff have previously received training tailored to the unique attributes of each gender as part of PREA: Sexual Abuse and Sexual Harassment 101*).
    - Employees who are reassigned from facilities housing the opposite gender are not given additional training.
    - Staff received the same training, regardless of gender.
- North Carolina Department of Adult Correction (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/or females in confinement/supervision.
- NCDAC Office of Staff Development and Training, PREA: *Sexual Abuse and Sexual Harassment 101*:
    - Define the unique attributes of working with females in confinement/ under supervision.
    - Define 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.
    - Employees who may have contact with offenders receive annual refresher training on PREA requirements.
- North Carolina Department of Adult Correction (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; and
        - Emphasizing zero-tolerance, duty to report, and current sexual abuse and sexual harassment policies and procedures.
- NCDAC Office of Staff Development and Training, *PREA: Sexual Abuse and Sexual Harassment 201*:
    - Lesson Purpose: To provide refresher training to NCDAC employees on current agency sexual abuse and sexual harassment (SAH) policies and procedures.
- Documentation review:
    - 12 of 12 staff files reviewed by the auditor contained completion documentation for *PREA: Sexual Abuse and Sexual Harassment 201*.

115.31(d)

- 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.
- North Carolina Department of Adult Correction (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:
    - DAC training is documented in each employee's E-Learning course file.

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:

- NCCIW PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
- Supplemental documentation
  - NCDAC Office of Staff Development and Training, *PREA: Sexual Abuse and Sexual Harassment 101, dated 07.01.2025*
  - NCDAC Form OPA-T10 *Prison Rape Elimination Act (PREA) Staff Training Acknowledgement of Understanding, dated 11.07.2023*
- Documentation review
- Interview with volunteer or contractor 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.
  - 59 volunteers and contractors have received this training.
- NCDAC Policy and Procedure F.3400 O*ffender Sexual Abuse and Sexual Harassment Policy:*
  - Volunteers (with the exception of one-time volunteers who have no direct contact with offenders), custodial agents, contractors and other persons providing services to offenders shall receive the Sexual Abuse and Harassment 101 training as part of initial orientation which addresses:
    - The agencies standard of zero-tolerance of sexual abuse and sexual harassment toward offenders, either by staff, contractors, volunteers, or by offenders; and
    - Applicable methods to report incidents of sexual abuse and sexual harassment.
- Documentation review
  - Contractors and volunteers completed:
    - PREA: Sexual Abuse and Sexual Harassment 101 and/or
    - Form OPA-T10 Prison Rape Elimination Act (PREA) Staff Training Acknowledgement of Understanding.
- Interview with volunteer or contractor who has contact with offenders:
  - Indicated PREA training was conducted before interacting with

offenders.

115.32(b)

- Facility response:
  - The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with offenders.
  - 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*:
  - One-time volunteers shall review information on Form OPA-T10 *PREA Acknowledgement* which addresses:
    - The agencies standard of zero-tolerance of sexual abuse and sexual harassment toward offenders, either by staff, contractors, volunteers, or by offenders
    - Applicable methods to report incidents of sexual abuse and harassment.
  - Volunteers (with the exception of one-time volunteers who have no direct contact with offenders), custodial agents, contractors and other persons providing services to offenders shall receive the *PREA: Sexual Abuse and Sexual Harassment 101* training.
- Interview with volunteer or contractor 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 Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - The application process will not be complete until the volunteer, custodial agent, contractor and other person providing services to offenders verifies understanding of training by signing the PREA acknowledgement form and returning the form to the facility.
  - The application process for one-time volunteers will not be complete until the volunteer verifies understanding of information by signing the PREA acknowledgement form and returning the form to the facility.
- Documentation review:
  - Volunteers and contractors completed NCDAC Form OPA-T10 *Prison*

	Rape Elimination Act (PREA) Staff Training Acknowledgement of Understanding form by affirming through signature their understanding of the agency's zero tolerance policy for sexual abuse and sexual harassment and their duty to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment. **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: • NCCIW 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-100 PREA Prevention Planning and Screening, dated 09.04.2025* • Supplemental documentation ◦ NCDAC Form OPA-T100 *Prison Rape Elimination Act (PREA) Person in Confinement or Under Supervision Education Acknowledgement, dated 01.19.2023* ◦ NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence, dated 01.07.2026* • 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. ◦ 2792 of 2792 offenders admitted during the past 12 months were

given this information at intake.

- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - 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.
- Form OPA-T100 *Prison Rape Elimination Act (PREA) Person in Confinement or Under Supervision Education Acknowledgement*:
  - Offenders signed form acknowledging:
    - Receipt of PREA education information (zero-tolerance policy and reporting);
    - Rape crisis center advocacy services; and
    - Opportunity to ask questions related to material presented.
- Site review:
  - NCCIW diagnostic case analysts/screeners:
    - Reviewed agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.
    - Read documents aloud to make accommodations for offenders with low vision or limited reading skills.
    - Had access to interpretation services including American Sign Language (ASL).
- Documentation review:
  - 21 of 21 offender records, reviewed by the auditor, contained documentation of offender receiving initial sexual safety information during intake/diagnostic process.
- 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 admission or transfer to the facility, are presented with required sexual safety information.
- Interview with offenders:
  - Indicated that information about sexual abuse and sexual harassment are given soon after arrival to the facility.

115.33(b)

- Facility response:
  - 2356 of 2356 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 Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Restated the language of the provision.
- Site review:
    - Offenders viewed video and NCDAC Poster OPA-T102 in diagnostic center during initial intake/diagnostic process:
        - Zero-tolerance of sexual abuse and sexual harassment of offenders;
        - Right to be free from sexual abuse, sexual harassment, and retaliation for reporting;
        - Ways for offenders, employees, and third parties to report; and
        - Employees responsibility to deter and respond to incidents.
- Documentation review:
    - 21 of 21 offender records, reviewed by the auditor, contained documentation of offender receiving comprehensive sexual safety information during intake/diagnostic process.
- Interview with intake staff:
    - Indicated offenders receive required information in video and written formats.
    - Indicated offenders receive comprehensive sexual safety information during intake/diagnostic process.
- Interviews with offenders:
    - Indicated received information about reporting and right to be free from sexual abuse, sexual harassment, and retaliation for reporting within a day of arrival.

115.33(c)

- Facility response:
    - Zero offenders who did not receive the comprehensive PREA education within 30 days of intake.
    - 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 admission or 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.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening:*
    - Restated the relevant language of NCDAC Policy and Procedure F.3400.
- Site review:
    - Auditor observed Spanish language copies of offender education materials were available including:
        - 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.*
    - Staff had access to interpretation services including American Sign Language (ASL).
    - Offenders had access to diagnostic staff for assistance.

115.33(e)

- Facility response:
    - The agency maintains documentation of offender participation in PREA education sessions.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
    - Each offender shall sign the Person in Confinement Education Acknowledgement (OPA-T100) on the department issued tablet or a hardcopy and placed in their field jacket.
- Documentation review:
    - Offenders signed *NCDAC Form OPA-T100 Prison Rape Elimination Act (PREA) Person in Confinement or Under Supervision Education Acknowledgement* upon completion of education session.

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, offender handbooks, or other written formats. • NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*: ◦ Additional information on sexual abuse and sexual harassment shall be provided to offenders through targeted educational materials, including brochures detailing prevention strategies and reporting procedures, handbooks outlining offender rights and institutional responsibilities under PREA, and posters reinforcing zero-tolerance messaging and available reporting channels. • Site review: ◦ Auditor observed NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence* on housing unit bulletin boards and in the visitation area. **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: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy and Procedure 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* ◦ NCCIW Memorandum - *PREA Sexual Abuse Response Team (SART), dated 09.03.2025* • Supplemental documentation: ◦ *PREA: Investigating Sexual Abuse in a Confinement Setting*, *undated* ◦ NC Learning Center training transcripts, *undated* • Documentation review • 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.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
    - Sexual abuse and harassment investigators shall receive training on conducting sexual abuse and harassment investigations in a confinement setting.
- *PREA: Investigating Sexual Abuse in a Confinement Setting*:
    - Sexual abuse in confinement,
    - Investigative process,
    - Working with victims,
    - Interview techniques,
    - Institutional culture,
    - N.C. specific sexual assault and harassment investigator training, and
    - Quiz at the end of each chapter.
- Interview with investigative staff:
    - Indicated investigator training included multiple modules on aspects of investigations, evidence collection and documentation, interviews, and dynamics of sexual abuse in confinement.

115.34(b)

- Interview with investigative staff:
    - Indicated training included proper use of Miranda and Garrity warnings, interviewing sexual abuse victims, and using the *preponderance of the evidence* standard to substantiate an administrative investigation.

115.34(c)

- Facility response:
    - The agency maintains documentation showing that investigators have completed the required training.
    - 10 investigators currently employed have completed the required training.
- North Carolina Department of Adult Correction (NCDAC) Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Completion of training shall be documented on form OSDT-1 and in appropriate agency training tracking system.
- NCCIW Memorandum - *PREA Sexual Abuse Response Team (SART)*:
    - Listed 10 PREA investigators.
- Documentation review:
    - Eight of eight NC Learning Center training transcripts for NCCIW investigators, reviewed by the auditor, included completion of *PREA: Investigating Sexual Abuse in a Confinement Setting* course.

	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: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ *Training Progress Summary - PREA - for Health Services, undated* • Documentation 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. ◦ 89 medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy. ◦ 96 percent of 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; and

	■ How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. • Interviews with medical and mental health staff: ◦ Indicated annual *PREA for Health Services* training covers detecting and assessing signs of sexual abuse and sexual harassment, preserving physical evidence, responding effectively to victims, and how to report allegations. **115.35(b)** • Facility response: ◦ Agency medical staff at this facility do not conduct forensic medical exams. ◦ Forensic medical exams are conducted at Wake Medical Center. • Interview with medical staff: ◦ Indicated forensic medical exams are conducted at Wake Medical Center. **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*: ◦ 86 heath care practitioners have completed training. ◦ Three health care practitioners were in process of completing training. ◦ One health care practitioner had registered but not started the training. **115.35(d)** • Documentation review: ◦ Medical and mental health staff completed the training mandated for employees under § 115.31 or contractors under § 115.32 including: ■ *NCDAC Form OPA-T10 Prison Rape Elimination Act (PREA) Staff Training Acknowledgement of Understanding,* and/or ■ *PREA: Sexual Abuse and Sexual Harassment 101*, and/or ■ *PREA: Sexual Abuse and Sexual Harassment 201*. **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:

- NCCIW PAQ
  - Facility response
  - NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025*
- Supplemental documentation
  - NCDAC OPA-S010 *Screening for Risk, dated 10.22.2024*
  - NCDAC *CM Screening List, undated*
- 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 PREA-100 *PREA Prevention Planning and Screening*:
  - All offenders in a DAC confinement or treatment facility shall receive a screening inventory, administered via the web-based OPUS intake system, within 24 hours after admission to a facility.
  - 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.
- Site review:
  - Diagnostic case analyst/screener completed a screening inventory of the offender which contained an objective screening instrument.
  - Screening staff affirmatively asked offenders about sexual orientation and gender identity.
  - Screening was conducted away from other offenders.
- Interview with staff responsible for risk screening:
  - Indicated offenders, upon admission or transfer from another facility, are screened for risk of sexual victimization and sexual abusiveness within 24 hours of arrival.
- Interviews with offenders:
  - Indicated offenders were asked screening questions within the first

day or two.

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.
  - 2754 of 2754 offenders entering the facility (either through intake of transfer) 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:
- Documentation review:
  - 20 of 20 offender files, review by the auditor, contained screening dates within one day of admission date.
- Interview with staff responsible for risk screening:
  - Indicated offenders are screened within 24 hours of admission.
- 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.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - The screening tool shall utilize a standardized, objective screening instrument established by DAC and implemented uniformly across all DAC facilities.

115.41(d) and (e)

- Documentation review:
  - NCDAC OPA-S010 *Screening for Risk*:
    - 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.

115.41(f)

- Facility response:
    - The policy requires that the facility reassess each offender's 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.
    - 2356 of 2356 offenders, who entered the facility within the past 12 months and whose length of stay in the facility was 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 PREA-100 *PREA Prevention Planning and Screening*:
    - After 15 days of arrival at the facility, and not to exceed 30 days, the facility shall 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:
    - NCDAC CM Screening List:
        - 16 of 16 offender files, reviewed by the auditor, contained risk rescreening dates withing 30 days of initial screening date.
- Interview with staff responsible for risk screening:
    - Indicated offenders are rescreened within 30 days of initial screening.
- Interviews with offenders:
    - Indicated offenders were asked similar questions during a second meeting with screening staff.

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 PREA-100 *PREA Prevention Planning and Screening*:
    - Restated the language of the provision.
- Interview with staff responsible for risk screening:
    - Indicated reassessments are completed 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 PREA-100 *PREA Prevention Planning and Screening*:
  - 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 offenders are never disciplined for refusing to respond to a question.

115.41(i)

- Site review:
  - Access to electronic files is profile based.
  - Access to physical file storage is restricted by locks.
- Interview with PREA coordinator:
  - Indicated access to offender risk assessments are 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 that access is limited to diagnostic staff as well as staff who are involved in housing and programing decisions.
- Interview with staff responsible for risk screening:
  - Indicated screening information access is restricted based on staff profile.

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:

- NCCIW PAQ
    - Facility response
    - NCDAC Policy and Procedure 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*
- Supplemental documentation
    - NCDAC OPA-S010 *Screening for Risk, dated 10.22.2024*
    - PREA Report - *High Risk for Victimization, dated 01.07.2026*
    - PREA Report - *High Risk for Abusiveness, dated 01.07.2026*
- 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 PREA-100 *PREA Prevention Planning and Screening*:
    - Managing housing and bed assignments:
        - Any offender identified as a high-risk abuser or high risk of being sexually victimized shall be restricted from double-cell housing.
        - A report of newly admitted high risk abusers shall be reviewed weekly by Division of Institutions (DOI) Administration, Manager of Classification Services, or designee to activate a Central Monitoring file to prevent double cell housing.
        - Designated personnel at each facility shall be responsible for identifying offenders classified as high-risk abusers and maintaining and up-to-date list to support appropriate housing, work, and program assignment decisions.
- Documentation review:
    - NCDAC OPA-S010 *Screening for Risk:*
        - List of offenders who are high risk for victimization (HRV) and those at high risk of abusiveness (HRA).
- PREA Report - *High Risk for Victimization*:
    - Listed name and bed assignment for HRV offenders.
- PREA Report - *High Risk for Abusiveness*:

	◦ Listed name and bed assignment for HRA offenders. • Interview with PREA compliance manager: ◦ Indicated use of an electronic dashboard which displays bed assignments for HRV and HRA offenders to ensure separation. HRV and HRA information is a factor for determining job, education, and program assignments. **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. • Interview with staff responsible for risk screening: ◦ Indicated offender's screening information is used to determine if offender is at high risk for victimization or at high risk of abusiveness. **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:

- NCCIW PAQ
    - Facility response
    - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
- Supplemental documentation
    - PREA Report - *High Risk for Victimization, dated 01.07.2026*
- Documentation review
- Interview with 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.
- Interview with warden:
    - Indicated offenders for high risk of sexual victimization and alleged victims are not placed in segregated housing. The alleged abuser would be moved to another housing unit.
- Interview with staff who supervise offenders in segregated housing:
    - Indicated that offenders for risk of victimization or who have alleged victimization are not placed in segregated housing for that reason.
- Documentation review:
    - Auditor review of PREA Report - *High Risk for Victimization* included HRV offenders assigned to several different housing units.

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 offender 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*:
  - Restated the language of the provision.

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: • NCCIW 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* ◦ NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence, dated 01.07.2026* • Site review • Interviews with a random sample of staff • Interviews with offenders • Interview with PREA compliance manager **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: (a) sexual abuse or sexual harassment; (b) retaliation by other offenders or staff for reporting sexual abuse and sexual harassment; and (c) 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 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.
- Site review:
  - The auditor observed poster OPA-T102 in housing units, visitation, computer classroom, diagnostic/intake area, and kitchen.
  - The auditor observed a locked grievance box outside of the dining hall.
- Interviews with a random sample of staff:
  - Indicated that offenders can report privately to staff, supervisors, or through the grievance process.
- Interviews with offenders:
  - Indicated reports could be made to officers, supervisors, administrators, medical staff, case managers, unit managers, and by 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 at 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. Before reporting on behalf of an offender by an organization for victims a signed consent is required.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy:*
  - 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).
- Site review:
  - Auditor tested the external hotline for people in confinement and could not connect the call with the steps listed initially.
    - PCM immediately began identifying correct steps to make a call and resolving the issue.
      - Auditor was then able to make a call to the people in confinement hotline.
      - Auditor's test call message was routed to NCDPS as the external reporting entity, then forwarded to the NCDAC office, who then emailed confirmation to the auditor.
      - PCM emailed the auditor confirmation that the revised prompts and phone number were operational.
      - Facility informed residents through tablet notification of the correct prompts and phone number for the hotline.
      - Unit managers posted updated PREA flyers and posters with the correct phone number for the hotline.
  - Auditor tested the number posted for the local rape crisis center, InterAct, and was able to speak to a representative who confirmed that InterAct was a reporting entity upon consent from the offender.
  - Phone calls did not require use of a pin number and were toll-free.

- Interviews with offenders:
    - Indicated phone numbers posted by the phones for the hotline and rape crisis center.
- Interview with PREA compliance manager:
    - Indicated phone numbers posted by the phones for offenders to call to make a report to an external entity.

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 DAC PREA Office by email at PREA@NCDAC.gov;
        - 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. Before reporting on behalf of an offender by an organization for victims a signed consent is required; or
        - Third party reporting can be made via email, phone or letter.
- 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.
- 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 possible.
- Interviews with offenders:
    - Indicated reports can be made in person, 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, posters, handouts, and flyers.
- 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 NCDAC PREA Office by email at PREA@NCDAC.gov or by telephone at (919) 825-2754;
        - Anonymously by contacting the NCDAC PREA Office; or
        - To their local law enforcement agency.
- 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:
    - Informal conversations with staff indicated staff were comfortable reporting privately to either the officer-in charge (OIC), PCM, or warden if needed.
- Interview with random sample of staff:
    - Indicated staff could report privately directly to facility administration, the OIC, 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: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy G.0300 *Administrative Remedy Procedures, dated 10.01.2023* ◦ 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* ◦ NCDAC Form DC-410 Prisons *Administrative Remedy Procedure, dated*

09.10.2025

- Documentation review
- Supplemental documentation
  - NCCIW Memorandum Re: *PREA Standard 115.52(d), dated 03.11.2026*
  - NCDAC *PREA Incident Detail Report, date range 12.01.2024 to 11.30.2025*
  - NCDAC *Step One - Unit Response, dated 10.01.2025*

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 the 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.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Ways of reporting incidents of sexual abuse and harassment include through the administrative remedy process.

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 requires that an offender grievance

alleging sexual abuse not be referred to the staff member who is the subject of the complaint.

- NCDAC Policy PREA-200 *PREA Reporting*:
  - Offenders may report sexual abuse or sexual harassment allegations via PREA/grievance locked box located at each DAC confinement or treatment facility.
- 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.
  - 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.
  - 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.
  - One grievance that alleged sexual abuse in the past 12 months that reached a final decision within 90 days after being filed.
  - Zero grievances alleging sexual abuse in the past 12 months that involved extensions because final decision was not reached within 90 days.
  - 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.
- NCDAC Prisons *Administrative Remedy Procedure*:
  - Allegation of sexual abuse by another offender.
- Documentation review:
  - Facility provided one sexual victimization related grievance for the

previous 12 months.
    - In the PAQ *Facility Information* section, the facility provided a list of PREA grievances from facility correspondence tracking system with a date range of 05.01.2022 to 04.30.2023.

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.

Corrective action requirement:

115.52 (d)

The agency issues 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.

Corrective action recommendation:

- Provide documentation of facility response to grievance listed in 115.52(d)-2 (NCDAC Form DC-410 *Prisons Administrative Remedy Procedure*).

Corrective action taken by the facility:

- NCCIW Memorandum *Re: PREA Standard 115.52(d):*
  - NCCIW PREA compliance manager stated:
    - "NCCIW received thirteen (13) inmate grievances that were categorized as PREA."
    - "Only one (1) grievance was determined to be alleged sexual

abuse."

- NCDAC *Step One - Unit Response*:
  - Grievance response given to the offender eight days after grievance received by facility staff.
  - Offender agreed with grievance response and did not wish to appeal to step two.
  - Allegation of sexual abuse was forwarded to the facility head for appropriate action according to the Prison Rape Elimination Act.
- NCDAC *PREA Incident Detail Report*:
  - Included sexual abuse investigation initiated on the same day the grievance was received by facility staff.

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: • NCCIW 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* ◦ *Memorandum of Understanding Between North Carolina Institution for Women and The Family Violence and Prevention Center, InterAct, dated 05.19.2025* • Site review • Interviews with offenders • Interview with offender who reported sexual abuse **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.
    - 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.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Restated language of the provision.
- NCDAC Policy PREA-200 *PREA Reporting*:
    - Offenders can contact a community-based organization that provides services to victims of sexual abuse or sexual harassment.
- Site review:
    - The auditor observed signage containing number to reach emotional support services posted by the phone.
    - Auditor completed a test call and was able to speak to a staff person at InterAct.
    - Interact staff person stated InterAct offers 24/7 crisis line, advocacy, and counseling.
- Interviews with offenders:
    - Indicated there is a number for emotional support services posted by the phones.
    - Indicated that the number is free to call.
- Interview with offender who reported sexual abuse:
    - Indicated there is a number for emotional support services posted by the phones.
    - Indicated it was a free call.

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 a phone call: "This call will be monitored and recorded."

- Interview with offenders:
    - Indicated that there is an announcement on the phones about being recorded.

115.53(c)

- Facility response:
    - The facility maintains a 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 copies of the MOU.
- *Memorandum of Understanding Between North Carolina Institution for Women and The Family Violence and Prevention Center, InterAct*:
    - Defines each entity's role and responsibilities to victims of sexual assault in custody at NCCIW.

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: • NCCIW 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 *END THE SILENCE Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act, dated 2023.03.24* • 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. ◦ The agency or facility publicly distributes information on how to report offender sexual abuse or sexual harassment on behalf of offenders. • 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 offenders behalf by calling 1(844) 208-4018. • Site review: ◦ OPA-T102 and *END THE SILENCE* posters were displayed on the bulletin board in the visitation area. ◦ Additional copies were attached to the bulletin board for public distribution. **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: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy PREA-200 *PREA Reporting, dated 09.04.2025* ◦ NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations, dated 09.04.2025* • Documentation review • Site review • Interviews with a random sample of staff **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.
- Site review:
  - Staff discussed with the auditor that verbal reports to a supervisor or the officer in charge (OIC) are the most immediate way to begin the facility response to an allegation.
- Interviews with a random sample of staff:
  - Indicated all staff are required to report any and all information about incidents of sexual abuse or sexual harassment, retaliation, or staff neglect that led to an incident.

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 PREA-300 *PREA Official Response and Investigations*:
  - 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; and
        - to otherwise comply with the law.
    - Interviews with a random sample of staff:
        - Indicated report information is on a need-to-know basis.

115.61(c)

- Interviews with medical and mental health staff:
    - Indicated limitations of confidentiality and mandatory reporting duties are disclosed prior to providing services.
    - Indicated duty to report all information about sexual victimization to supervisors or the OIC.
    - Indicated has not needed to report but would do so immediately.

115.61(d)

- Interview with warden:
    - Indicated if the alleged victim is considered a vulnerable adult under a state or local vulnerable persons statute, the Department of Social Services (DSS) would be contacted, their families would be notified, and a PREA support person would communicate with them throughout the investigation process.
- Interview with PREA coordinator:
    - Indicated DSS would be notified.

115.61(e)

- Documentation review:
    - Allegation notifications to investigators included anonymous offender and third-party offender reports through the people in confinement hotline.
- Interview with warden:
    - Indicated all allegations of sexual abuse and sexual harassment are reported to facility investigators including third-party and anonymous reports.

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: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy PREA-200 *PREA Reporting, dated 09.04.2025* • Interview with agency head designee • Interview with warden • Interview 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 when the agency or facility determined that an offender was subject to a substantial risk of imminent sexual abuse in the past 12 months. • NCDAC Policy PREA-200 *PREA Reporting*: ◦ When the employee 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 warden: ◦ Indicated offender would be moved to a safe area where they would be highly visible to staff and away from high-risk aggressors. PSP would continue to monitor the offender's status. • Interview with a random sample of staff: ◦ Indicated immediate removal of offender from threat, communicate with supervisor or OIC, and 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: • NCCIW 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* • Supplemental documentation ◦ *Warden notification.pdf, dated 11.05.2025* • Interview with warden • Interview with PREA coordinator **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. ◦ The facility received three allegations that an offender was abused while confined at another facility. ◦ The facility's response to the notification included housing offender in regular population or special management, assigning a PREA support person if needed, and providing medical assessment.: • *Warden notification.pdf:* ◦ Warden to warden email notification concerning an offender incident. **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. All PREA investigations shall be consulted (referred) to the Region level for final decision. **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. • 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 to the NCDAC PREA office in the past 12 months. • Interview with warden: ◦ Indicated the allegation notice from another facility triggers an investigation just like it would if the offender was still at NCCIW. ◦ Indicated she is not aware of any relevant notifications from other facilities. **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:

- NCCIW 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*
- Interview with security staff first responder
- Interview with offender who reported sexual abuse
- Interviews with a random sample of staff

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.
  - 144 allegations of offender sexual abuse were reported in the past 12 months.
  - 142 allegations where the first security staff member to respond to the report separated the alleged victim and abuser in the past 12 months.
  - 135 allegations where staff were notified within a time period that still allowed for the collection of physical evidence.
  - Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence:
    - Zero times the first security staff member to respond to the report preserved and protected any crime scene until

appropriate steps could be taken to collect any evidence; and
        - Zero times the first security staff member to respond to the report requested that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and
        - Zero times the first security staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy:*
    - Restated the language of the provision.
- NCDAC Policy PREA-200 *PREA Reporting:*
    - Restated the language of the provision.
- Interviews with security staff first responder:
    - Indicated separation of alleged victim and abuser, contacted OIC and PCM, ensured evidence was not destroyed on victim or abuser, secured scene, and wrote statement.
- Interview with offender who reported sexual abuse:
    - Indicated report was made to the people in confinement hotline on a Friday and the facility response was on the following Monday.
    - Indicated the staff responded in a timely manner.
    - Indicated staff asked the alleged victim if she was willing to write a statement.

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.
    - Two allegations of sexual abuse where a non-security staff member was the first responder.
    - Zero allegations of sexual abuse where the non-security staff first responder requested that the alleged victim not take any actions that could destroy physical evidence.
    - Two allegations of sexual abuse where the non-security staff first responder notified security staff.
- NCDAC Policy PREA-200 *PREA Reporting:*
    - Restated the language of the provision.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual*

	Harassment Policy: ◦ Restated the language of the provision. • Interview with random sample of staff: ◦ Indicated separation of alleged victim and abuser, contact supervisor or OIC, ensure evidence is not destroyed on victim or abuser, secure scene, and write statement. **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: • NCCIW PAQ ◦ Facility response ◦ NCCIW Procedure L.4200 *PREA - The Response Plan, dated 03.21.2025* • Interview with 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. • NCCIW Procedure L.4200 *PREA - The Response Plan*: ◦ Provided guidelines for the training, response, tracking, staff accountability, responsibility and the investigation of offender on offender and staff on offender sexual abuse and sexual harassment at NCCIW. ◦ Outlines response duties of NCCIW staff including: ■ First responder, ■ Medical and mental health practitioners, ■ PREA support person (PSP), ■ Investigator, ■ Facility leadership, and ■ Post Incident Review (PIR) team.

	• Interview with warden: ◦ Indicated a coordinated response that includes first responding staff, supervisors, medical, mental health, investigator, PSP, PCM, and administrative staff. **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: • NCCIW 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 August 20, 2012, or since the last PREA audit, whichever is later. • 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:

- NCCIW 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*
  - NCDAC Memorandum - *Designation of PREA Compliance Managers, dated 04.08.2025*
  - NCDAC Memorandum - *PREA Sexual Abuse Response Team, dated 09.03.2025*
- Supplemental documentation
  - Form OPA-I24 - *Retaliation Monitoring for Persons in Confinement, revised 01.01.2023*
  - NCCIW Memorandum *Re: Roles and Responsibilities as a PREA Support Person, undated*
- Documentation review
- Interview with agency head designee
- Interview with warden
- Interviews with staff member charged with monitoring
- Interview with offender who reported a sexual abuse

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 PREA-200 *PREA Reporting*:
  - All employees have a duty to report any retaliation against offenders or employees who reported such an incident; and any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - The PREA compliance manager shall monitor for retaliation against staff that either report or cooperate with investigations, of sexual abuse or sexual harassment.
  - The PREA support person (PSP) shall monitor retaliation against the victim and the offender who either report allegations, or cooperate

with investigations, of sexual abuse or sexual harassment.

- NCDAC Memorandum - *Designation of PREA Compliance Managers*:
  - Designated primary and secondary PREA compliance managers.
- NCDAC Memorandum - *PREA Sexual Abuse Response Team*:
  - Designated 12 facility staff to serve as PSP.

115.67(b)

- Interview with agency head designee:
  - Indicated PREA support person (PSP) is tasked with monitoring any offender who alleges to be a victim, who reported, or who participates in the investigation. The PREA compliance manager is tasked with monitoring retaliation for a staff member who may have reported and or been involved in that investigative process.
- Interview with warden:
  - Indicated PSP will monitor victim for retaliation including periodic meetings. Abuser will be moved to a different housing unit or transferred to a different facility.
- Interview with staff member charged with monitoring:
  - Indicated as PSP would address any housing, programing, or work assignment concerns of the victim offender.
  - Indicated checking in with victim offender every week or two, or more often as warranted for 90 days.
- Interview with offender who reported a sexual abuse:
  - Indicated that alleged abuser was moved and the offender who reported a sexual abuse now feels safe.

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 PSP 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*:
  - 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.
  - Upon notification of a sexual abuse or sexual harassment allegation, the PSP will initiate monitoring the alleged victim and offender who

reported the allegation or cooperated with officials during the investigation.
        - Continue monitoring for a minimum of 90 days or beyond 90 days if the initial monitoring indicates a continuing need.
- Interview with warden:
    - Indicated PSP would increase contact with the alleged victim, and removal of retaliating individual.
- Interview with staff member charged with monitoring retaliation:
    - Indicated looks for changes in behavior and changes in group dynamics.
    - Indicated monitors for 90 days but would extend the time if there was a concern.
- Documentation review:
    - Form OPA-I24 - *Retaliation Monitoring for Persons in Confinement:*
        - Zero of eight forms, provided by the facility, contained documentation of retaliation monitoring for 90 days, or that the offender had been released previous to the 90-day mark.

115.67(d)

- Documentation review:
    - Form OPA-I24 - *Retaliation Monitoring for Persons in Confinement*:
        - Zero of eight forms, provided by the facility, contain documentation of periodic status checks.

115.67(e)

- Interview with warden:
    - Indicated PSP will monitor any other offender who cooperates with an investigation and fears retaliation.
    - Indicated individual who retaliated against any other offender will be moved.

115.67(f)

Auditor is not required to audit this provision.

Corrective action requirement:

115.67(c)

For at least 90 days following a report of sexual abuse, ensure that the agency monitors the conduct and treatment of offenders or staff who reported the sexual abuse and of offenders who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by offenders or staff.

Corrective action recommendation:

- Complete fresher training for facility staff assigned to monitor for retaliation. Training should include monitoring criteria, timeline, periodic status checks, and documentation requirement.

Corrective action taken by the facility:

- NCCIW Memorandum *Re: Roles and Responsibilities as a PREA Support Person:*
  - Refresher training included:
    - Definition for PREA support person; and
    - PREA retaliation monitoring requirements included monitoring criteria, timeline, periodic status checks, and documentation requirement.
  - Copies of the memorandum were signed by seven staff persons designated in the memorandum as PREA support persons.

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:

- NCCIW PAQ
  - Facility response
  - NCDAC Policy and Procedure *PREA-100 PREA Prevention Planning and Screening, dated 09.04.2025*
- Documentation review
- Interview with warden
- Interview with staff who supervise offenders in segregated housing

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.
    - Zero offenders who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement.
    - If an involuntary segregated housing assignment is made, the facility affords each such offender a review every 30 days to determine whether there is a continuing need for separation from the general population.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
    - 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.
    - 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.
- Documentation review:
    - The auditor's review of housing assignments for offenders who alleged sexual abuse did not include any placements in segregated housing due to victimization status.
- Interview with warden:
    - Indicated offender victims are not moved to involuntary segregated housing. The aggressor would be moved to another housing unit.
    - Indicated it would be punitive to place an offender victim in involuntary segregated housing.
- Interview with staff who supervise offenders in segregated housing:
    - Indicated offenders are not placed in segregated housing for protection from sexual abuse or after alleging sexual victimization.

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:

- NCCIW 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
    - *115-71 & 115.86 (PREA Investigator - PSP refresher Training).pptx, dated 2026*
    - *115.71-115.86 Training Attendance.pdf, dated 03.25.2026*
- Documentation review
- Interview with investigative staff
- Interview with offender who reported a sexual abuse
- Interview with 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 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.
- Interview with investigative staff:
    - Indicated investigations begin immediately and are completed as soon as all steps of the investigation are accounted for.
    - Indicated all allegations, including third-party and anonymous, are investigated to the fullest extent possible.
- Documentation review:
    - Auditor reviewed investigation files including those conducted as a result of third-party and anonymous reports.

115.71(b)

- Interview with investigative staff:
  - Indicated investigator training included interacting with male and female victims, evidence collection, interviewing techniques, and recognizing bias.
  - Indicated proper use of Miranda and Garrity warnings were reviewed.
  - Indicated *preponderance of the evidence* was the standard used in administrative investigations.

115.71(c)

- Interview with investigative staff:
  - Indicated investigations begin with reviewing the allegation and ensuring all evidence is preserved and then collected.
  - Indicated investigations include collecting any physical evidence, reviewing video footage and phone calls, collecting witness statements for all parties involved, and interviewing alleged victim, staff and offender witnesses, and alleged abuser if willing.
- Documentation review:
  - Incident reports contained list of supporting documentation including employee/witness statement forms, video footage, and number of prior reports where the alleged victim and/or alleged abuser was involved.

115.71(d)

- Interview with investigative staff:
  - Indicated that the N.C. State Capitol Police and/or N.C. State Bureau of Investigation (SBI) would be consulted on allegations that appear to include criminal acts.

115.71(e)

- Interview with investigative staff:
  - Indicated credibility is assessed by comparing allegation or statement with the rest of the facts and evidence.
  - Indicated polygraph examinations are never administered as part of the administrative investigation.
- Interview with offender who reported a sexual abuse:
  - Indicated a polygraph examination was not part of the investigation.

115.71(f)

- Interview with investigative staff:

- Indicated staff actions or failure to act are documented.
- Indicated written reports include a description of the allegation, staff actions and responses, investigator actions, and all evidence gathered.

115.71(g)

- Interview with investigative staff:
  - Indicated criminal reports would be documented by the NC Capitol Police or SBI.
- Documentation review:
  - Zero criminal investigation reports available for the 12-month review period.

115.71(h)

- Facility response:
  - Substantiated allegations of conduct that appear to be criminal are referred for prosecution.
  - Zero substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA audit.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.
- Interview with investigative staff:
  - Indicated if the allegation includes possible criminal acts it is referred to NC Capitol Police or SBI.
- Documentation review:
  - Zero substantiated investigations of sexual abuse included a referral for a criminal investigation.

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 F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - All written reports referenced in paragraph (g) of this section shall be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

115.71(j)

- Interview with investigative staff:
    - Indicated an investigation is still completed 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 warden
    - Indicated facility administration receives a case number and contact information from the criminal investigator.
- Interview with PREA coordinator
    - Indicated facility wardens and the office of internal affairs liaise with investigators to stay updated on case status.
- Interview with PREA compliance manager
    - Indicated contact information and case number are received from the criminal investigator.
- Interview with investigative staff
    - Indicated sharing of reports with the criminal investigator.

Corrective action requirement:

115.71(e)

The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as offender or staff.

115.71(h)

Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

Corrective action recommendation:

- Provide refresher training addressing credibility assessment requirements.
- Provide refresher training addressing the requirement for substantiated sexual abuse cases that appear to be criminal be referred to outside law enforcement.

Corrective action provided by the facility:

- *115-71 & 115.86 (PREA Investigator - PSP refresher Training).pptx:*
    - Refresher training lesson plan for credibility assessments and law enforcement referrals.

	• 115.71-115.86 Training Attendance.pdf: ◦ Documentation of facility investigators who attended the refresher training. **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: • NCCIW 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: ◦ Administrative investigations review by the auditor used the *preponderance of the evidence* standard to determine whether allegations are substantiated. • Interview with investigative staff: ◦ Indicated preponderance of the evidence is the evidentiary standard used in administrative investigations. **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: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC *PREA Incident Detail Report, NC CI Women (3010), Staff Sexual Abuse, date range 12.01.24 - 11.30.25* ◦ Form DC-138B *Statement by Witness, dated 02.27.2025* • Supplemental documentation ◦ NCCIW Memorandum *Re: Roles and Responsibilities as a PREA Support Person, undated* • Documentation review • Interview with warden • Interview with investigative staff • Interview with offender who reported a sexual abuse **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. ◦ 139 criminal and/or administrative investigations of alleged offender sexual abuse that were completed by the agency/facility in the past 12 months. ◦ 44 of the alleged sexual abuse investigations that were completed in the past 12 months, the number of offenders who were 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.
- Documentation review:
    - On 01.27.2026, the facility provided the outcome notification for one administrative investigation. The sample uploaded to the OAS supplemental files did not have the investigation outcome notification marked as "unfounded", "unsubstantiated", or "substantiated".
- Interview with warden:
    - Indicated outcome notification is provided to victim offender upon completion of the investigation.
- Interview with investigative staff:
    - Indicated the PSP provides the notification to the victim.
- Interview with offender who reported a sexual abuse:
    - Indicated no outcome notification was given.

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.

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 have been eight substantiated or unsubstantiated complaints (i.e., not unfounded) of sexual abuse committed by a staff member against an offender in an agency facility in the past 12 months.
    - In each case the agency subsequently informed the offender.

- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Following an offender's allegation that a staff member has committed sexual abuse against the offender, the PSP shall subsequently inform the offender (unless 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.
- NCDAC *PREA Incident Detail Report, NC CI Women (3010), Staff Sexual Abuse 12.01.24 - 11.30.25*:
    - Displayed nine PREA incidents for staff sexual abuse allegations at NCCIW:
        - Six investigations with an outcome of unfounded/did not occur;
        - One investigation with an outcome of unsubstantiated;
        - One investigation with an outcome of substantiated; and
        - One investigation that was ongoing.
- Form DC-138B *Statement by Witness*:
    - PSP assigned to offender wrote: "Offender states the accused has been reassigned." and "forms OPA-124, OPA-130, and OPA-131 have all been completed and signed."
- Documentation review:
    - Sample Form DC-138B (N*otification by PSP.pdf*) provided in the PAQ by the facility did not include written documentation that the PSP made the notification to the offender victim.
    - On 01.27.2026 and 01.28.2026, the facility provided documentation in the OAS supplemental files for three investigations where the victim offender was notified that the alleged abuser had be temporarily reassigned away from the alleged victim's housing unit.

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; and
        - The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Restated the language of the provision.

115.73(e)

- Facility response:
  - The agency has a policy that all notifications to offenders described under this standard are documented.
  - PSP Forms OPA-124, OPA-130, OPA-131
  - In the past 12 months, 36 notifications to offenders that were provided pursuant to this standard.
  - In the past 12 months, 36 notifications documented.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - All such notifications or attempted notifications shall be documented.

115.73(f)

Auditor is not required to audit this provision.

Correct action requirements:

115.73(a)

Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

115.73(e)

All such notifications or attempted notifications shall be documented.

Corrective action recommendations:

- Ensure that the agency informs the offender as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded, following an investigation into an offender's allegation that he or she suffered sexual abuse in an agency facility.
- Ensure all such notifications or attempted notification are documented.

Corrective action taken by the facility:

- *NCCIW Memorandum Re: Roles and Responsibilities as a PREA Support Person:*
  - Refresher training included:
    - Definition for PREA support person;
    - Requirement for explanation to offender of case outcome as substantiated, unsubstantiated or unfounded; and
    - Documentation of notification on form OPA-I30.
    - Requirement of notification to offender of the status of cases

involving staff and the status of cases involving offenders unless unfounded.
        - Documentation of notification to offender on form OPA-I31.
    - Copies of the memorandum were signed by seven staff persons designated in the memorandum as PREA support persons (PSP).

- The facility provided additional documentation of four outcome notifications made to the respective offenders who alleged sexual abuse.

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: • NCCIW 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 *PREA Incident Detail Report, NC CI Women (3010), Staff Sexual Abuse, date range 12.01.24 - 11.30.25* • Supplemental documentation ◦ Notification Re: *Written Warning for Unacceptable Personal Conduct, dated 02.05.2026* • 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 PREA-300 *PREA Official Response and Investigations*:
    - Employees shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.
    - Any contractor or volunteer who engages in sexual abuse shall be immediately prohibited from contact with offenders and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

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.
- NCDAC *PREA Incident Detail Report, NC CI Women (3010), Staff Sexual Abuse*:
    - Listed one incident of staff sexual misconduct with a substantiated outcome.
- Documentation review:
    - The facility did not include any staff disciplinary documentation for the one substantiated incident of staff sexual abuse from the review period of 12.01.2024 to 11.30.2025.

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 F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment shall be commensurate with the nature and circumstances of the acts committed, the employee’s disciplinary history, and the sanctions imposed for comparable offenses by other employees with similar histories.

	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 PREA-300 *PREA Official Response and Investigations*: ◦ All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by employees who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. **Corrective action requirement:** **115.76(a)** Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. **Corrective action recommendation**: • Ensure that staff are subject to disciplinary sanctions for violating agency sexual abuse or sexual harassment policies. **Corrective action taken by the facility**: • *Notification Re: Written Warning for Unacceptable Personal Conduct*: ◦ Documentation of staff disciplinary sanction for substantiated investigation outcome of sexual abuse (voyeurism). **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:

- NCCIW 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*
- Documentation review

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 contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of offenders.
- NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations*:
  - Any contractor or volunteer who engages in sexual abuse shall be immediately prohibited from contact with offenders and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.
- Documentation review:
  - Zero incident reports, reviewed by auditor, named a contractor or volunteer as the alleged abuser.

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.

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:

- NCCIW 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*
- Supplemental documentation
  - NCCIW Memorandum Re: *PREA Standard 115.78*
  - *115.78 JD.png, undated*
  - *115.78.png 2.png, undated*
  - *115.78 JD 2.png, dated 02.19.2026*
  - *115.78.png, undated*
- Documentation review
- Interview with 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.
  - 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.
    - In the past 12 months, three 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 warden:
    - Indicated a substantiated investigation outcome would lead to a disciplinary process for the abuser.
- Documentation review:
    - Offender disciplinary reports were not provided in the PAQ for the three substantiated incidents of offender-on-offender sexual abuse from the review period of 12.01.2024 to 11.30.2025.

115.78(c)

- Interview with warden:
    - Indicated disciplinary process would consider whether the offender's mental disabilities or mental illness contributed to their behavior when determining if and what type of sanction should be imposed.
    - Indicated that developmentally disabled offenders would have a mental health representative with them 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.

- Interviews with medical and mental health staff:
  - Indicated the facility offers therapy, counseling, or other interventions to the abusing offender.
  - Indicated the facility considers whether to require the abusing offender to participate but ultimately participation in the intervention needs to be voluntary.

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.
- Documentation review:
  - The auditor noted zero incidents of offender discipline, relevant to this provision, in incident reports reviewed.

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 category 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.

Corrective action requirement:

115.78(a)

Offenders shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in offender-on-offender sexual abuse or following a criminal finding of guilt for offender-on-offender sexual abuse.

Corrective action recommendation:

- Ensure each offender who violates agency sexual abuse policies is subject to disciplinary sanctions.

Corrective action taken by the facility:

- NCCIW Memorandum *Re: PREA Standard 115.78.*
  - Stated there were two disciplinary actions were an offender was found guilty of assault on an offender.
- *115.78 JD.png*, *115.78 JD 2.png*,*115.78.png*, and 1*15.78.png 2.png:*
  - Each screenshot included offender information and disciplinary review

comments.

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:

- NCCIW PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - NCDAC Policy and Procedure S.2000 *Electronic Health Record, dated 04.30.2025*
- Supplemental documentation
  - *PREA MH Referrals*, undated
  - Form DC-945 *Confidentiality and Privileged Information*, *dated 10.2022*
  - *NC CI Women Dashboard PREA MH Referrals, date range 03.01.2025 to 03.12.2026*
- Site review
- Documentation review
- Interview with offender who disclose sexual victimization at risk screening
- Interview with staff responsible for risk screening

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, one percent of offenders who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner (*Auditor verified through facility documentation that this was an erroneous answer.*)

- Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services through the DAC HERO Program.

- NCDAC Policy and Procedure *S.2000 Electronic Health Record*:
  - *HERO* is the Electronic Healthcare Record for Offenders software application for healthcare documentation within the Department of Adult Correction (DAC) Division of Institutions.
- *PREA MH Referrals, undated*:
  - Listed 65 of 79 offenders whose mental health encounter date was within 14 days of their screening date.
- Interview with staff responsible for risk screening:
  - Indicated that an auto-generated referral is made when the screening indicates that an offender has experienced prior sexual victimization.

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, who were offered a follow-up meeting with a mental health practitioner.
  - Mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services through the DAC HERO Program.
- Interview with staff responsible for risk screening:
  - Indicated that an auto-generated referral is made when the screening indicates 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 is not strictly limited to medical and mental health practitioners.
  - The information shared with other staff is strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.

- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.
- Site review:
    - Physical storage of hard-copy PREA-related documentation was secured by locks.
    - Electronic storage of PREA-related documentation was secured through role-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.
- 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.

Corrective action requirement:

115.81a

If the screening pursuant to § 115.41 indicates that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

Corrective action recommendation:

- Ensure that all offenders who have experienced prior sexual victimization, as indicated by the screening pursuant to § 115.41, are offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

Corrective action taken by the facility:

- *115.81.png, 115.81 #2.png, and 115.81 #3.png:*
  - Each screenshot contained part of the *NC CI Women Dashboard PREA MH Referrals.*
  - All *MH Encounters* took place within 14 days of *Screen Date*.

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: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDPS Health Services Policy & Procedure *CP-18 Sexual Abuse, dated 02.2014* • Documentation review • Interview with medical staff • Interview with security staff with staff first responders **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. • NCDPS Health Services Policy & Procedure *CP-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.
- Documentation review:
    - The auditor's review of substantiated incident reports indicated that qualified medical staff were notified immediately and a medical assessment was conducted for three of three offender victims.
- Interview with medical staff:
    - Indicated that offender victims of sexual abuse receive timely and unimpeded access to emergency medical treatment as soon as medical is notified.
    - Indicated that treatment provided is determined according to medical staff's professional judgement, training, experience, and medical policies.

115.82(b)

- Interview with staff first responders:
    - Indicated that medical and mental health practitioners are always notified immediately following a report of sexual abuse.

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 emergency contraception and 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. • NCDPS Health Services Policy & Procedure CP-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: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDPS Health Services Policy & Procedure CP-18 *Sexual Abuse, dated 02.2014* ◦ NCDOC Health Services Policy & Procedure CC-4 *Pregnant Inmates, dated 03.2002* • Interviews with medical and mental health staff • Interview with offender who reported a sexual abuse **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.

115.83(b)

- Interviews with medical and mental health staff:
  - Indicated victimized offenders receive initial evaluation and treatment of injuries, additional services at hospital and/or facility as appropriate, referrals, and continuity of care.
- Interview with offender who reported a sexual abuse:
  - Indicated referral to mental health coordinator but not the counselor seen regularly.

115.83(c)

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

115.83(d)

- Facility response:
  - Female victims of sexual abusive vaginal penetration while incarcerated are offered pregnancy tests.
- NCDPS Health Services Policy & Procedure CP-18 *Sexual Abuse*:
  - Pregnancy test will be offered if less than 65 years old and vaginal abuse, as applicable.

115.83(e)

- Facility response:
  - If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services.
- NCDPS Health Services Policy & Procedure CP-18 *Sexual Abuse*:
  - The Outreach Nurse Clinician assigned to the facility will be available to assist with counseling and testing.
- NCDOC Health Services Policy & Procedure *CC-4 Pregnant Inmates*:
  - Comprehensive counseling and medical care are given to pregnant offenders in keeping with their expressed desires in planning for their unborn children.
- Interview with medical staff:
  - Indicated that offenders who become pregnant due to sexual abuse

	are given timely information and access to all lawful pregnancy-related services. ◦ Indicated that information is given to the offender as soon as practical and access to services is given upon pregnancy confirmation. **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. • NCDPS Health Services Policy & Procedure CP-18 *Sexual Abuse*: ◦ All care for sexual abuse will be provided at no cost. • Interview with offender who reported a sexual abuse: ◦ Indicated there was no cost to offender for treatment related to incident. **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. **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:

- NCCIW 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 01.01.2023*
- Supplemental documentation
  - NCDAC Prison Rape Elimination Act (PREA) of 2003, *Sexual Abuse Annual Report 2022-2023*, *undated*
  - NCCIW Memorandum Re: *PREA Standard 115.86(a)-2, dated 03.11.2026*
  - *115-71 & 115.86 (PREA Investigator -PSP refresher Training).pptx, dated 2026*
  - 115.86 PIR (Conducted after 4-15-26).pdf, *various dates*
- Interview with 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, 125 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:
  - Ten of ten OPA-I10 *Post Incident Review (PIR)* forms reviewed by the auditor, were completed for the corresponding sexual abuse investigations.

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, 25 criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents.
- 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.

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 warden:
    - Indicated the incident review team is multidisciplinary and comprised of PCM, investigator, supervisors, and administrators.

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.
    - Form OPA-I10 *Post Incident Review (PIR)*:
        - Contains all six requirements of the provision.
- Interview with warden:
    - Indicated the post incident review team uses PIR information to make changes to facility areas, staffing, policies, or procedures.
    - Indicated that group dynamics, blind spots and other physical barriers, staffing levels, and monitoring technologies, such as cameras and mirrors, are all assessed during the PIR.
- Interview with compliance manager:
    - Indicated results of incident reviews are documented on the PIR form.
    - Indicated review of PIR forms. Trends included incidents reported in areas without cameras such as bathrooms.
    - Indicated that corrective actions are initiated immediately when

feasible.

115.86(e)

- Facility response:
  - The facility implements the recommendations for improvement or documents its reasons for not doing so.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Report containing recommendations for improvement are submitted to the warden and PREA compliance manager.
- Document review:
  - NCDAC Prison Rape Elimination Act (PREA) of 2023, *Sexual Abuse Annual Report 2022-2023:*
    - Implementation of recommendations is noted for each facility under *Substantiated Sexual Abuse Cases with Corrective Actions* section.

Corrective action requirement:

115.86(a)

The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.

115.86(b)

Such review shall ordinarily occur within 30 days of the conclusion of the investigation.

Corrective action recommendation:

- Provide refresher training documentation which reviewed the requirement for the facility to conduct a sexual abuse incident review within 30 days of the conclusion of each substantiated or unsubstantiated sexual abuse investigation.
- Provide documentation of sexual abuse incident reviews completed within 30 days of substantiated or unsubstantiated sexual abuse investigations completed after the onsite phase of the audit.
- Clarify the difference between number the facility entered in the PAQ under 115.86 (b)-2 with the number entered in 115.86(a)-2.

Corrective action taken by the facility:

- *115-71 & 115.86 (PREA Investigator -PSP refresher Training).pptx*:
  - Refresher training for a post-incident review within 30 days of each

	substantiated or unsubstantiated sexual abuse investigation conclusion. ◦ Listed facility staff to include on the sexual abuse review team. ◦ Listed factors the team will evaluate or examine during the review. ◦ Factors reviewed and any corrective action taken to be documented on a post-incident review form. • *115.86 PIR (Conducted atter 4-15-26).pdf*: ◦ Documentation of seven post-incident reviews completed within 30 days of the respective substantiated or unsubstantiated sexual abuse investigation conclusion. • *NCCIW Memorandum Re: PREA Standard 115.86(a)-2:* ◦ The NCCIW PREA compliance manager stated: "For the time period of 11/30/2024 through 12/1/2025 there are 121 Unsubstantiated and Substantiated completed cases of sexual abuse. The breakdown of the cases is as follows: ■ Inmate on Inmate Sexual Abuse with a validity of Unsubstantiated = 113. ■ Inmate on Inmate Sexual Abuse with a validity of Substantiated = 3. ■ Inmate on Inmate Sexual Act with a validity of Unsubstantiated = 2. ■ Staff Sexual Abuse with a validity of Unsubstantiated = 2. ■ Staff Sexual Abuse with a validity of Substantiated = 1." **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: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* • Supplemental documentation: ◦ 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.

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, undated*:
  - Comparison chart of 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 a 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.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - Accurate, uniform data for every allegation of sexual abuse shall be documented in OPUS by all facilities.

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 PREA-100 *PREA Prevention Planning and*

Screening:

- 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:
  - Not applicable. (*The auditor verified this was an erroneous answer.*)
- *The Center for Women PREA Facility Audit Report: Final*:
  - The agency obtained 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 standard.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ *www.dac.nc.gov/information-and-services/prea-office, accessed 05.13.2026* • Supplemental documentation: ◦ *NCDAC Prison Rape Elimination Act (PREA) of 2003, Sexual Abuse Annual Report 2022-2023, undated* • 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 working with the NCDAC PREA Office to improve effectiveness of facility prevention, detection, and response practices.

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*:
  - Included a comparison of data and corrective actions from current year and previous year.
  - 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.
  - 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: • NCCIW PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* • Supplemental documentation ◦ 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 05.13.2026* • 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 web-based system, OPUS, and roles-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.
    - Listed *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)

- *dac.nc.gov/information-and-services/prea-office* contains links to:

	◦ 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: • *dac.nc.gov/information-and-services/prea-office, accessed 05.13.2026* • Document review • Site review **Reasoning and analysis**: **115.401(a)** • *dac.nc.gov/information-and-services/prea-office*: ◦ Contains 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)** • https://www.dac.nc.gov/information-and-services/prea-office ◦ The facility 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 facility provided the auditor with full access to all areas of the audited facility. **115.401(i)**

- The auditor was permitted to requested but did not receive copies of all relevant documents and information.

115.401(m)

- The facility provided the auditor a private setting to conduct interviews of offenders selected by the auditor.

115.401(n)

- Document review:
  - The facility posted the Notice of Audit in English and Spanish throughout the facility and emailed 22 proof photos to the auditor.
  - 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 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 letters so letters did not have to be given to staff.

Corrective action requirement:

115.401(i)

The auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information).

Corrective action recommendation:

- Ensure the facility provides documentation requested by the auditor.

Corrective action taken by the facility:

- On 03.11.2026, 03.12.2026, and 08.13.2026, the facility provided additional information the auditor had requested in a previous issue log.

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: • *dac.nc.gov/information-and-services/prea-office, accessed 05.13.2026* **Reasoning and analysis**: **115.403(f)** • *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).)	yes
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).)	yes
	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).)	yes
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).)	yes
	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).)	yes
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
115.15 (a)	**Limits to cross-gender viewing and searches**	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	**Limits to cross-gender viewing and searches**	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	yes

	facility does not have female inmates.)	
115.15 (c)	**Limits to cross-gender viewing and searches**	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
115.15 (d)	**Limits to cross-gender viewing and searches**	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	**Limits to cross-gender viewing and searches**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	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
	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	yes

	formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	
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	yes

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

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

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

	inmates on how to avoid inappropriate relationships with inmates?	
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	**Employee training**	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	**Employee training**	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	**Employee training**	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	**Volunteer and contractor training**	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	**Volunteer and contractor training**	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how	yes

	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)?	
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	yes

	prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
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.)	yes

115.35 (c)	**Specialized training: Medical and mental health care**	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	**Specialized training: Medical and mental health care**	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	**Screening for risk of victimization and abusiveness**	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	**Screening for risk of victimization and abusiveness**	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	**Screening for risk of victimization and abusiveness**	
	Are all PREA screening assessments conducted using an objective 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 criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	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	yes

	being sexually abusive, to inform: Work 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: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	**Use of screening information**	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	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
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	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 are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
115.43 (c)	**Protective Custody**	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes

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

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

	is exempt from this standard.)	
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.)	no
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	**Exhaustion of administrative remedies**	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate’s decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	**Exhaustion of administrative remedies**	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes

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

	inmates and these organizations and agencies, in as confidential a manner as possible?	
115.53 (b)	**Inmate access to outside confidential support services**	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	**Inmate access to outside confidential support services**	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	**Third-party reporting**	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	**Staff and agency reporting duties**	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual 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	yes

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

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

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

	of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	
	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,	yes

	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).)	
115.71 (b)	**Criminal and administrative agency investigations**	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	**Criminal and administrative agency investigations**	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	**Criminal and administrative agency investigations**	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	no
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?	no
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	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?	no

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?	no
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?	no
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	yes

	order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	
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?	no
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	no
	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?	no
	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?	no
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?	no
115.76 (a)	**Disciplinary sanctions for staff**	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	**Disciplinary sanctions for staff**	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	**Disciplinary sanctions for staff**	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	**Disciplinary sanctions for staff**	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	**Corrective action for contractors and volunteers**	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	**Corrective action for contractors and volunteers**	

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

	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.)	
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.)	yes
115.83 (e)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	**Sexual abuse incident reviews**	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation	yes

	has been determined to be unfounded?	
115.86 (b)	**Sexual abuse incident reviews**	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	no
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, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	**Data collection**	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	**Data collection**	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	**Data review for corrective action**	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant 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 where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	**Data storage, publication, and destruction**	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	**Data storage, publication, and destruction**	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	**Data storage, publication, and destruction**	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	**Data storage, publication, and destruction**	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	**Frequency and scope of audits**	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401	**Frequency and scope of audits**	

(b)		
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	**Frequency and scope of audits**	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	**Frequency and scope of audits**	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	no
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	yes

	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.)	