PREA Facility Audit Report: Final

Name of Facility: Robeson Confinement in Response to Violation Center
Facility Type: Community Confinement
Date Interim Report Submitted: NA
Date Final Report Submitted: 10/30/2026

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:** 10/30/2026

AUDITOR INFORMATION	
Auditor name:	Uldricks, Aaron
Email:	confinementsolutions@gmail.com
Start Date of On-Site Audit:	08/27/2026
End Date of On-Site Audit:	08/27/2026

FACILITY INFORMATION	
Facility name:	Robeson Confinement in Response to Violation Center
Facility physical address:	803 North Carolina 711, Lumberton, North Carolina - 28360
Facility mailing address:	

Primary Contact

Name:	Pamela Oxendine
Email Address:	pamela.locklear@dac.nc.gov
Telephone Number:	910-618-5535

Facility Director	
Name:	Pamela Oxendine
Email Address:	pamela.oxendine@dac.nc.org
Telephone Number:	9107026161

Facility PREA Compliance Manager	
Name:	Robert Allen
Email Address:	robert.allen1@dac.nc.gov
Telephone Number:	9107026168
Name:	Jennifer Scott
Email Address:	jennifer.hunt@dac.nc.gov
Telephone Number:	9107026233

Facility Health Service Administrator On-Site	
Name:	Mary Peterson
Email Address:	mary.peterson1@dac.nc.gov
Telephone Number:	9107026174

Facility Characteristics	
Designed facility capacity:	220
Current population of facility:	191
Average daily population for the past 12 months:	185

Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Men/boys
Age range of population:	18-99
Facility security levels/resident custody levels:	minimum
Number of staff currently employed at the facility who may have contact with residents:	93
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	10
Number of volunteers who have contact with residents, currently authorized to enter the facility:	42

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	• 115.211 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
Number of standards met:	
40	
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:	2026-08-27
2. End date of the onsite portion of the audit:	2026-08-27

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	(●) Yes ( ) No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Rape Crisis Center of Robeson County

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	220
15. Average daily population for the past 12 months:	185
16. Number of inmate/resident/detainee housing units:	4
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:	191
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:	0
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:	0
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:	0
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:	1
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:	0
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:	4

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:	0
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:	0
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:	5
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:	93
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:	42

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:	10
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:	13
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 multiple 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:	9
As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".	
47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	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 answer with the facility compliance specialist and through documentation review.
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:	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 answer with the facility compliance specialist and through documentation review.
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:	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 answer with the facility compliance specialist and through documentation review.
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:	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 answer with the facility compliance specialist and through documentation review.

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:	4
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:	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 answer with the facility compliance specialist and through documentation review.
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:	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 answer with the facility compliance specialist and through documentation review.
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:	4
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 answer with the facility compliance specialist and through documentation review.

57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	Additional randomly selected offenders were interviewed to make up for the lack of offenders in some targeted groups.

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):	14
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
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:	5
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	0	0	0	0
Staff-on-inmate sexual abuse	1	0	1	0
Total	1	0	1	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	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	0	0	0
Staff-on-inmate sexual abuse	0	1	0	0
Total	0	1	0	0

Sexual Harassment Investigation Outcomes

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	1

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:	0
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	( ) Yes ( ) No (●) NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	( ) Yes ( ) No (●) NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	( ) Yes (●) No ( ) NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	The facility reported zero allegations of sexual harassment during the 12-month review period.
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:	0
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	( ) Yes ( ) No (●) NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

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

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

102. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	○ Yes ◉ No

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.

115.211	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: • Robeson Confinement in Response to Violation Center (RCRVC) Pre-Audit Questionnaire (PAQ) ◦ Facility response ◦ North Carolina Department of Adult Correction (NCDAC) Policy and Procedure DAC-PREA-100 *PREA Prevention Planning and Screening, dated 09.04.2025* ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* • Supplemental documentation ◦ NCDAC Organizational Chart, *dated 03.31.2026* • Interview with PREA coordinator **Reasoning and analysis**: **115.211(a)** • Facility response:

- The agency has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment in facilities it operates directly or under contract.
- The facility has a policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment.
- The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment.
- The policy includes sanctions for those found to have participated in prohibited behaviors.
- The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of offenders.

- NCDAC Policy and Procedure DAC-PREA-100 *PREA Prevention Planning and Screening*:
  - DAC is committed to a standard of zero-tolerance of sexual abuse and sexual harassment toward offenders either by employees, volunteers, contractors, and custodial agents, or by other offenders.
  - Included definitions of prohibited behaviors regarding sexual abuse and sexual harassment.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Included agency's commitment to a standard of zero-tolerance of sexual abuse and sexual harassment toward offenders.
  - Contained prevention and detection measures including staff training, offender education, and risk screening.
  - Contained response measures including reporting options, staff response duties, victim advocacy, and investigations.
  - Included definitions of sexual abuse and sexual harassment.
  - Included disciplinary sanctions for offenders and staff who are found to have committed sexual abuse or sexual harassment against an offender.

115.211(b)

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

Determination:

The facility exceeds the standard.

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

115.212	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ *State of North Carolina Memorandum of Agreement between North Carolina Department of Public Safety and Center for Community Transitions – contract DPS-11836258-JEC, dated 03.03.2022* ◦ *Amendment Number One (1) State of North Carolina Department of Adult Correction and Center for Community Transitions, dated 07.05.2023* • Supplemental documentation ◦ NCDAC Memorandum Re*: The Center for Community Transitions, dated 02.23.2026* ◦ The Center for Women *PREA Facility Audit Report: Final, dated 07.21.2025* • Interview with agency's contract administrator **Reasoning and analysis**: **115.212(a)** • Facility response: ◦ One contract has been entered into or renewed by the agency for the confinement of its offenders with private agencies or other entities since the last PREA audit. ◦ The above contract requires contractors to adopt and comply with PREA standards. • *State of North Carolina Memorandum of Agreement between North Carolina Department of Public Safety and Center for Community Transitions – contract DPS-11836258-JEC*: ◦ Contractual facility agreed to comply with the national PREA Standards. • *Amendment Number One (1) State of North Carolina Department of Adult Correction and Center for Community Transitions*: ◦ Extended agreement until 12.31.2023 or subsequent execution of a new contractual agreement for the 2023-2025 fiscal biennium. • NCDAC Memorandum Re*: The Center for Community Transitions*: ◦ Explained extension of agreement between NCDAC and The Center for Community Transitions until the subsequent execution of a new contractual agreement. **115.212(b)** • Facility response: ◦ The contract or contract renewal requires the agency to monitor contractor's compliance with PREA Standards. • *State of North Carolina Memorandum of Agreement between North Carolina Department of Public Safety and Center for Community Transitions – contract DPS-11836258-JEC*: ◦ Contractual facility agreed to NCDAC monitoring to ensure compliance with the PREA Standards.

- The Center for Women *PREA Facility Audit Report: Final*:
  - The facility's auditor determined the facility was compliant with 40 PREA Standards and exceeded one PREA Standard during the previous three-year cycle audit.
  - The facility is scheduled for a PREA audit during the current three-year audit cycle.
- Interview with agency's contract administrator:
  - Indicated the agency has one contract with a non-profit entity for confinement of offenders.
  - Indicated monitoring of facility compliance through ongoing communication and annual review of compliance.
  - Indicated obligation to comply with the PREA Standards stated in contract and renewals.

115.212(c)

· Facility response:

  - The agency has not entered into any contracts with a private agency or entity that failed to comply with the PREA Standards.

Determination:

The facility meets the standard.

115.213	**Supervision and monitoring**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ Department of Adult Corrections – *Prison Post Chart, dated 07.29.2025* ◦ Robeson Confinement in Response to Violation (CRV) *115.13 PREA Staffing Analysis (2026), dated 08.27.2026* ◦ NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 06.16.2026* • Supplemental documentation ◦ NCDAC Policy and Procedure .3500 *Facility Post Assignment Management, dated 01.30.2023* • Site review • Documentation review • Interview with director • Interview with PREA coordinator • Interview with intermediate- or higher-level facility staff **Reasoning and analysis**: **115.213(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 185.
  - Since the last PREA audit, the staffing plan was predicated on the average offender population of 185.
- Department of Adult Corrections – *Prison Post Chart*:
  - Listed facility post assignments for correctional officers and supervisors.
  - Accounted for offender housing, operations, support services, and supervisory roles.
- NCDAC Policy and Procedure .3500 *Facility Post Assignment Management:*
  - Directions for appropriate staffing levels, supervisory organizational structure, correctional officer duties, and effective management of security posts.
- Site review:
  - Auditor observed:
    - Staff assigned to housing units, kitchen, medical, educational area, clothes house, and other areas of the facility where offenders were present.
    - Supervisors interacted regularly with staff and offenders.
    - A combination of camera and mirror placements were deployed to supplement staff supervision and eliminate previously identified blind spots.
- Interview with director:
  - Indicated adequate staffing levels to protect offenders against sexual abuse and video monitoring are part of the staffing plan.
  - Indicated the staffing assessments consider appropriate staff to offender ratios, staff positioning, the composition of the offender population including offenders who are at high risk of victimization, programs occurring on each shift, and the physical layout of the facility including any blind spots or isolated areas.
  - Indicated staffing plan is documented through the post chart and any adjustments made through annual reviews. The daily shift narratives include the number of staff on duty and are compared to the post chart to ensure compliance with the staffing plan.
- Interview with PREA coordinator:
  - Indicated the staffing plan considers the number and placement of staff on each shift, the composition of the offender population including those at high risk of sexual victimization or sexual abusiveness, video monitoring and the placement of mirrors to supplement staff supervision and reduce blind spots, and evaluating areas of the facility where sexual abuse was alleged.

115.213(b)

- Facility response:
  - N/A - No deviations.
- 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 director:
  - Indicated deviations from the staffing plan would be documented in the shift narrative. The facility has an on-call list for calling in

	additional staff and has not had any deviations from the staffing plan. **115.213(c)** • Facility response: ◦ Annual agency/facility staffing plan reviews in collaboration with the PREA coordinator to determine if adjustments are needed to: ■ Staffing plan; ■ Deployment of monitoring technology; and/or ■ Allocation of resources to ensure compliance with staffing plan. • Robeson Confinement in Response to Violation (CRV) *115.13 PREA Staffing Analysis (2026)*: ◦ Documented facility's annual efforts to consider the 11 factors listed in the standard. • Documentation review: ◦ Auditor observed annual staffing plan review documentation that assessed staffing, monitoring technology, and resources committed to the staffing plan. • Interview with PREA coordinator: ◦ Indicated collaboration with the facility director for annual staffing plan assessments and adjustments. **Determination**: The facility meets the standard.

115.215	**Limits to cross-gender viewing and searches**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 06.16.2026* ◦ RCRVC Memorandum *Re: Standard 215(b)-1, dated 08.19.2026* • Supplemental documentation ◦ NCDAC Policy and Procedure .3300 *Facility Search Procedures, dated 03.03.2026* ◦ NCDAC Form OPA-T30 *Cross-Gender Viewing, Announcement, and Acknowledgement, dated 01.12.2023* • Site Review • Interviews with a random sample of staff • Interviews with offenders **Reasoning and analysis**: **115.215(a)**

- Facility response:
  - The facility does not conduct cross-gender strip or cross-gender visual body cavity searches of offenders.
  - Zero cross-gender strip or cross-gender visual body cavity searches of offenders have been conducted in the past 12 months.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening:*
  - The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners.

115.215(b)

- Facility response:
  - N/A. The facility does not house female offenders.
- RCRVC Memorandum *Re: Standard 215(b)-1*:
  - Stated: “At this time Robeson CRV does not house female offenders.”

115.215(c)

- Facility response:
  - Facility policy requires that all cross-gender strip searches and cross-gender visual body cavity searches be documented.
- NCDAC Policy and Procedure .3300 *Facility Search Procedures*:
  - Offenders housed at male facilities will be strip searched by a male correctional officer, except in exigent circumstances as determined by the shift supervisor. In such cases, the staff conducting the search will thereafter submit a statement by witness form, explaining the exigent circumstances that justified the search exception. A supervisor will be responsible for completing an Incident Report.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - DAC confinement or treatment facilities shall document all cross-gender strip searches and cross-gender visual body cavity searches.

115.215(d)

- Facility response:
  - Facility policy and procedures enable offenders to shower, perform bodily functions, and change clothing without opposite-gender, non-medical staff viewing their breasts, buttocks, or genitalia, absent exigent circumstances or incidental to routine cell checks.
  - Facility policy and procedures require opposite-gender staff to announce their presence when entering a housing unit.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - Facility opposite-gender staff are required to announce their presence when entering a housing unit.
  - Facility enables offenders to shower, perform bodily functions, and change clothing without opposite-gender, non-medical staff viewing their breasts, buttocks, or genitalia, absent exigent circumstances or incidental to routine cell checks.
- NCDAC Form OPA-T30 *Cross-Gender Viewing, Announcement, and Acknowledgement*:
  - Staff acknowledgement of requirement for opposite-gender staff to announce their presence when entering a housing unit.
- Site Review:

	◦ Auditor observed a variety of strategies the facility implemented to obstruct possible cross-gender viewing by non-medical staff where offenders may be in a state of undress, including: ■ Shower curtains and half walls in housing unit bathrooms; ■ Individual stalls for searches and blacked-out exterior windows in receiving; and ■ Privacy screens and curtains in the medical area. ◦ Female staff made loud opposite-gender announcements when entering housing units. • Interviews with a random sample of staff: ◦ Indicated that female staff announce their presence when entering a housing unit. ◦ Indicated that offenders are able to dress, shower, and toilet without being viewed by female staff. • Interviews with offenders: ◦ Indicated that female staff announce their presence when entering the offender's housing unit. ◦ Indicated that offenders are never naked in full view of female staff. **115.215(e)** This provision is no longer applicable to the compliance finding. **115.215(f)** This provision is no longer applicable to the compliance finding. **Determination**: The facility meets the standard.

115.216	**Residents with disabilities and residents who are limited English proficient**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 06.16.2026* ◦ NCDAC Policy and Procedure P.0400 *Non-English-Speaking Offender Program, dated 10.10.2023* ◦ NCDAC Policy and Procedure E.2600 *Reasonable Accommodations for Offenders with Disabilities, dated 02.25.2025* ◦ NCDAC Policy and Procedure E.3900 *Developmental Disabilities, dated 08.06.2024* ◦ NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting Help Prevent Prison Sexual Violence, dated 03.24.2023* ◦ NCDAC Poster OPA-T102S *Ley de Eliminacion de Violaciones en Prision (PREA) - Denunciar Ayuda A Prevenir La Violencia Sexual En Prision, revised 03.24.2023*

- Robeson CRVC Memorandum *Re: Standard 115.216(c)-2, dated 08.19.2026*
- Supplemental documentation
  - Acolad *Interpretation & Translation Services* "*Access Contact Sheet*", *undated*
  - *Rompa el Silencio: Tolerancia cero con el abuso sexual y el acoso sexual: Ley para la Eliminación de las Violaciones en la Cárcel (PREA), undated*
  - NCDAC Form OPA-I30S *Ley Para La Eliminación De La Violación En Las Prisiones (PREA) Servicios De Apoyo, dated 01.01.2023*
  - Form OPA-T100 *Person in Confinement of Under Supervision, Education Acknowledgement Form, revised 10.18.2024*
  - NCDOC Health Services Policy TX VII-2 *Physical, Mental, or Cognitive Disabilities, dated 08.13.2009*
  - NC Department of Administration (NCDOA) Statewide Term Contract 961C *Translation & Interpretation Services, exp. 12.31.2026*
  - NCDAC Form OPA-I31S *SERVICIOS DE APOYO DE LA LEY DE ELIMINACIÓN DE VIOLACIONES EN PRISIÓN (PREA): NOTIFICACIÓN DE ESTADO DE PERSONAS EN RECLUSIÓN, dated 01.01.2023*
- Site review
- Interview with agency head designee
- Interviews with offenders with disabilities
- Interviews with a random sample of staff

Reasoning and analysis:

115.216(a)

- Facility response:
  - The agency has established procedures to provide disabled offenders equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - Effective communication with deaf or hard of hearing offenders by providing access to interpreters.
  - Written materials are in formats or through methods that ensure effective communication with offenders with disabilities.
- NCDAC Policy and Procedure E.2600 *Reasonable Accommodations for Offenders with Disabilities*:
  - Eligible otherwise qualified offenders with a disability shall have the same opportunity for access to jobs, programs, activities, or services as eligible otherwise qualified non-disabled offenders. Offenders in North Carolina institutions shall be provided the same equal effective access, including additional time where necessary, to properly operate the assistive devices/auxiliary aids as those offenders who are non-disabled in completing the same or similar activity.
- NCDOC Health Services Policy TX VII-2 *Physical, Mental, or Cognitive Disabilities*:
  - Described use of specialized housing, equipment, and/or services for offenders with disabilities to participate in and benefit from facility programs, services, and activities.
- NCDAC Policy and Procedure E.3900 *Developmental Disabilities*:
  - Described specialized case management services for developmentally disabled offenders.
- Acolad *Interpretation & Translation Services* "*Access Contact Sheet*":
  - Provided instructions for on-site and remote video American Sign Language (ASL) interpretation service.

- Statewide Term Contract 961C *Translation & Interpretation Services:*
  - Included American Sign Language (ASL) interpretation service.
- Site review:
  - Receiving and screening staff were available to assist those with low vision, limited reading skills, and/or an intellectual disability.
- Interview with agency head designee:
  - Indicated that DAC works with the state's Americans with Disabilities Act (ADA) Office. Receives ADA Office approval for offender education materials.
- Interviews with offenders with disabilities:
  - Indicated facility sexual abuse and sexual harassment information was understood.
  - Indicated a case manager was available to offer assistance if needed.

115.216(b)

- Facility response:
  - The agency has established procedures that provide limited English proficient offenders an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - Ensure effective communication with limited English proficient offenders by providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.
- NCDAC Policy and Procedure P.0400 *Non-English-Speaking Offender*:
  - Facility signs that provide information and directions to the offender population will be posted in English and Spanish.
  - The case manager of a non-English-speaking offender will take the action necessary to help the offender understand the information being communicated in official memoranda that are posted on offender bulletin boards.
  - Case management services for non-English-speaking offenders should include assignment to a case manager who has the ability to communicate in other languages or who has access to staff or translation services which will enable effective communications.
  - Programs and services comparable to services provided to English speaking offenders should be provided to non-English-speaking offenders. At a minimum, all non-English-speaking offenders will receive primary services.
- Acolad *Interpretation & Translation Services* "*Access Contact Sheet*":
  - Provided instructions for telephonic and remote video interpretation service with limited English proficient offenders.
- Form OPA-T100 *Person in Confinement of Under Supervision, Education Acknowledgement Form*:
  - Section II in Spanish:
    - Listed agency standard of zero-tolerance for sexual abuse or sexual harassment of offenders.
    - Requested signature to affirm understanding of information provided.
- Form OPA-T102S *LAS DENUNCIAS RELACIONADAS CON LA PREA AYUDAN A PREVENIR LA VIOLENCIA SEXUAL:*
  - Spanish language form described ways for offenders to report sexual abuse, sexual harassment, and retaliation.
  - Included telephone number, mailing address, and email address.
  - Stated that the agency accepts anonymous and third-party reports.

- *Rompa el Silencio: Tolerancia cero con el abuso sexual y el acoso sexual: Ley para la Eliminación de las Violaciones en la Cárcel (PREA)*:
    - Spanish language pamphlet including zero-tolerance policy, definitions of sexual abuse and sexual harassment, tips for avoiding sexual victimization, offender's right to report, options for reporting, support services available, and steps to take after sexual abuse.
- NCDAC Form OPA-I30S *Ley Para La Eliminación De La Violación En Las Prisiones (PREA) Servicios De Apoyo*:
    - Spanish language form described the PREA support person's (PSP) role, investigation process, services available, and how to report retaliation.
- NCDAC Form OPA-I31S *SERVICIOS DE APOYO DE LA LEY DE ELIMINACIÓN DE VIOLACIONES EN PRISIÓN (PREA): NOTIFICACIÓN DE ESTADO DE PERSONAS EN RECLUSIÓN*:
    - Spanish language form for alleged abuser status changes reported to the alleged victim.
- Site review:
    - Auditor observed Spanish language PREA-related posters in housing units, receiving, chow hall, and other high traffic areas of the facility for offenders.
    - Auditor observed Spanish language information about sexual abuse and sexual harassment available to use with limited English proficient offenders during screenings.
    - Auditor accessed an interpreter by phone, on-demand, using the prompts from the Acolad *Interpretation & Translation Services* "*Access Contact Sheet*".
        - Phone prompts asked for an OPUS number but auditor was able to input a random number.

115.216(c)

- Facility response:
    - Agency policy prohibits use of offender interpreters, offender readers, or other types of offender assistants except in limited circumstances when offender safety, first-responder staff duties, or investigations could be compromised.
    - In the past 12 months, zero instances where offender interpreters, readers, or other types of offender assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the offender's safety, the performance of first-response duties under §115.64, or the investigation of the offender's allegations.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
    - Staff will not rely on offender interpreters, readers, or other types of assistants except in limited circumstances where delays could compromise offender safety, staff response, or the investigation process.
- Robeson CRVC Memorandum *Re: Standard 115.216(c)-2*:
    - Stated: "At Robeson CRV at no time are offenders used as interpreters."
- Interviews with a random sample of staff:
    - Indicated facility staff do not use offender interpreters to assist limited English proficient offenders when communicating about sexual abuse or sexual harassment allegations.
    - Indicated interpretive services through the language line phone number would be used when needed.

Determination:

	The facility meets the standard.

115.217	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening, dated 06.16.2026* ◦ Form DAC-HR 004 *Criminal History Record Check, dated 07.2023* ◦ Form DAC-HR 005 *Applicant Verification, dated 07.2023* ◦ Form DAC-HR 008 *Professional Reference Check, dated 07.2023* ◦ Form DAC-HR 013 *DAC Employee Acknowledgement, dated 07.2023* • Supplemental documentation ◦ *115.217 5Yr Background Check.pdf, undated* • Documentation review • Interview with administrative (human resources) staff **Reasoning and analysis**: **115.217(a)** • Facility response: ◦ Agency policy prohibits hiring or promoting any staff or contractor who may have contact with offenders who: ■ Has engaged in sexual abuse in an institutional setting (as defined in 42 U.S.C. 1997); ■ Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force or coercion, or if the victim did not consent or was unable to consent or refuse; or ■ Has been civilly or administratively adjudicated to have engaged in the any activity listed in (2). • NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*: ◦ Restated the language of the provision. • Form DAC-HR 005 *Applicant Verification*: ◦ Listed six PREA hiring and promotion prohibition questions. • Form DAC-HR 013 *DAC Employee Acknowledgement*: ◦ Listed same prohibition questions as DAC-HR 005. • Documentation review: ◦ 18 of 18 files, reviewed by the auditor, of staff recently hired, rehired, or promoted contained completed *DAC PREA Hiring and Prohibitions* forms. **115.217(b)** • Facility response: ◦ Agency policy requires the consideration of any incidents of sexual

harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with offenders.

- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - Restated the language of the provision.
- Form DAC-HR 005 *Applicant Verification*:
  - Asked: "Have you ever been accused of sexual harassment?"
- Form DAC-HR 013 *DAC Employee Acknowledgement*:
  - Asked same question as DAC-HR 005.
- Interview with administrative (human resources) staff:
  - Indicated the agency considers prior incidents of sexual harassment when determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with offenders.

115.217(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, 19 persons hired who may have contact with offenders who have had criminal background record checks.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening:*
  - Perform a criminal and administrative background records check, to include any applicable North Carolina registry, criminal justice standards commission, or other licensing authorities or bodies.
  - Contained the language of clause (2) from this provision.
- Form DAC-HR 004 *Criminal History Record Check*:
  - Requested applicant information used for criminal history verification.
- Form DAC-HR 008 *Professional Reference Check*:
  - Requested information from applicant’s former institutional employers about prohibited behaviors.
- Documentation review:
  - 16 of 16 new employee 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, who may have contact with offenders.

115.217(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, 10 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 the provision.

- Documentation review:
  - Contractor file, reviewed by the auditor, contained a background check.
- Interview with administrative (human resources) staff:
  - Indicated criminal record background checks are conducted for contractors who may have contact with offenders.

115.217(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.
- *115.217 5Yr Background Check.pdf*:
  - Listed dates of completed background checks within the last five years for facility staff.
- Documentation review:
  - 10 of 10 applicable staff files, reviewed by the auditor, contained completed background checks within the last 5 years.
- Interview with administrative (human resources) staff:
  - Indicated Division of Criminal Investigation (DCI) background checks are conducted every five years and tracked on a spreadsheet.

115.217(f)

- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - For all applicants and employees who may have contact with offenders, DAC shall ask about previous misconduct described in this section in written applications, in interviews for hiring or promotions, and in any interviews or written self-evaluations conducted as part of reviews of current employees.
  - All employees shall have a continuing affirmative duty to disclose sexual misconduct.
- Interview with administrative (human resources) staff:
  - Indicated previous misconduct questions described in section (a) are asked during the interview process and hiring processes, and for any promotional process.
  - Indicated employees have a continuing affirmative duty to disclose any such misconduct to the facility’s administration.

115.217(g)

- Facility response:
  - Agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.
- NCDAC Policy and Procedure PREA-100 *PREA Prevention Planning and Screening*:
  - Restated the language of the provision.

115.217(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 facility staff would provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee, if requested by another agency or facility.

Determination:

The facility meets the standard.

115.218	Upgrades to facilities and technology

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- RCRVC PAQ
  - Facility response
- Interview with agency head designee
- Interview with director

Reasoning and analysis:

115.218(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 director:
  - Indicated no substantial expansions or modifications to the facility since the last PREA audit. Any modifications or expansions would include safety considerations to protect offenders from sexual abuse.

115.218(b)

- Facility response:

	◦ The agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit. • Interview with agency head designee: ◦ Indicated video monitoring equipment cannot always replace staff, but it augments their ability to protect offenders. Monitoring equipment is also used post-incident for investigations and corroboration. • Interview with director: ◦ Indicated installed cameras and mirrors enhance offender safety by reducing blind spots and improving staff's ability to monitor offenders. **Determination**: The facility meets the standard.

115.221	**Evidence protocol and forensic medical examinations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy and Procedure PREA-300 *PREA official Response and Investigations, dated 06.16.2026* ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Memorandum *Re: Compliance with PREA Investigations Standards, dated 03.05.2026* ◦ *Letter of Understanding of Assistance between Robeson County Sheriff's Department – Lumberton, N.C. and Robeson CRV Modification Center (N.C. Department of Adult Correction – Division of Prisons), dated 01.06.20216* ◦ NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse, dated 04.26.2024* ◦ RCRVC Memorandum *Re: Standard 115.221(b)-1, dated 08.19.2026* ◦ *Memorandum of Understanding PREA Victim Support Partnership Between the North Carolina Department of Adult Correction Robeson CRV Center and Robeson County Rape Crisis Center, 01.23.2026.* ◦ NCDAC Form OPA-I30 *Support Services for Persons in Confinement, dated 01.01.2023* • Supplemental documentation: ◦ *https://www.uncmedicalcenter.org/uncmc/care-treatment/emergency-care/sexual-assault-nurse-examiner, accessed 08.22.2026* ◦ NCDAC *Internal Investigation PREA Investigator Guidelines - Facility, dated 01.01.2023* ◦ NCDAC Course Completion Certificate *PREA Support Person Training, dated 10.17.2024* ◦ NCDAC Form OPA-I30S *Ley Para La Eliminación De La Violación En Las Prisiones (PREA) Servicios De Apoyo, dated 01.01.2023* ◦ NCDAC Course *PREA Support Person (PSP) Training, undated*

- Interviews with a random sample of staff
- Interview with PREA coordinator

Reasoning and analysis:

115.221(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 Robeson County Sheriff's Department is responsible for conducting criminal sexual abuse investigations (including offender-on-offender sexual abuse or staff sexual misconduct).
  - NCDAC investigators follow a uniform evidence protocol when conducting a sexual abuse investigation.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - A determination shall be made, based upon the amount of time that has passed since the alleged incident and other factors, whether there is a possibility of evidence still existing at the crime scene. If it is determined that evidence may still exist, when possible, the crime scene shall be secured, and any potential evidence shall remain in place for law enforcement examination and investigation. If the crime scene cannot be secured, the crime scene shall be photographed and/or videotaped, and the evidence, if any, collected, and placed in an evidence bag with an evidence form attached.
- NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations*:
  - A sexual abuse and sexual harassment (SAH) investigator is a DAC employee who has been assigned or designated to administratively investigate a report of alleged offender sexual abuse and/or sexual harassment; and has received specialized training in conducting such investigations in confinement settings.
  - Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence.
  - Alleged offender victims of sexual abuse will be examined by DAC medical staff and transported to the local emergency department when appropriate for forensic evidence collection, sexually transmitted disease testing, counseling, and treatment.
  - In preparation for transporting the offender to the hospital's emergency room, medical protocol shall be followed in order to preserve any possible evidence with an appropriate chain of evidence form attached.
- NCDAC *Internal Investigation PREA Investigator Guidelines - Facility*:
  - Gather relevant documentation and evidence, such as:
    - OPUS screens;
    - written statements by staff and/or offenders if already provided;
    - photos;
    - videos telephone transcripts;
    - letters or other materials collected from offender's personal belongings; and
    - history of prior complaints and reports of sexual abuse involving the suspected perpetrator.
- *Letter of Understanding of Assistance between Robeson County Sheriff's Department – Lumberton, N.C. and Robeson CRV Modification Center (N.C. Department of Adult Correction – Division of Prisons*:
  - Robeson CRV requested the assistance the Robeson County Sheriff's

Department in the event of a major disaster or other emergency.

- Interview with a random sample of staff:
  - Indicated all evidence at scene and on alleged victim and alleged abuser is to be preserved.

115.221(b)

- Facility response:
  - N/A. No youth offenders.
  - The protocol was not adapted from the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Examinations, Adults/ Adolescents." (*The auditor confirmed with the director, and through documentation review, that the protocol complies with the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Examinations, Adults/Adolescents.*)
- Robeson CRVC Memorandum *Re: Standard 115.221(b)-1*:
  - Stated: "Robeson CRV does not house youth offenders."

115.221(c)

- Facility response:
  - The facility offers all offenders who experience sexual abuse access to forensic medical examinations performed at an outside medical facility, UNC Southeastern Hospital.
  - Forensic medical examinations are offered without financial cost to the victim.
  - Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs).
  - When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations.
  - The facility documents efforts to provide SANEs or SAFEs.
  - Zero forensic medical exams have been conducted by a SAFE/SANE or other qualified medical practitioner during the past 12 months.
- NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*:
  - All care for sexual abuse will be provided at no cost.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Medical Services will follow medical protocol, which includes provisions for examination, documentation, and transport to the local emergency department when appropriate, where the following will occur, collection of forensic evidence, testing for sexually transmitted diseases, counseling, and prophylactic treatment.
- *https://www.uncmedicalcenter.org/uncmc/care-treatment/emergency-care/sexual-assault-nurse-examiner*:
  - Documentation of SANE program at UNC system hospitals.

115.221(d)

- Facility response:
  - The facility attempts to make a victim advocate from a rape crisis center available to the victim, either in person or by other means.
  - These efforts are documented.
  - If and when a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff member from a community-based organization or a qualified agency staff member.

- *Memorandum of Understanding PREA Victim Support Partnership Between the North Carolina Department of Adult Correction Robeson CRV Center and Robeson County Rape Crisis Center*:
    - Robeson County Rape Crisis Center agreed to, if requested by the offender, provide a victim advocate to accompany and support the victim through investigatory interviews and provide emotional support, crisis intervention, information, and referrals.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - The PREA Support Person (PSP) shall be made available to provide victim advocate services.
- Interview with PREA coordinator:
    - Indicated if requested by the offender, a PREA support person (PSP) would accompany the offender to the hospital for the forensic exam and would be available during any investigation interview.
    - Indicated a victim advocate from the local rape crisis center is available by phone to provide emotional support and to meet with the offender at the facility.

115.221(e)

- Facility response:
    - If requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - As requested by the victim, the PREA support person, of the same gender, shall accompany and support the victim through the forensic medical examination process.
    - As requested by the victim, the PREA support person shall accompany and support the victim through the investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.
- NCDAC Form OPA-I30 *Support Services for Persons in Confinement*:
    - Described the role of the PSP and allowed the offender to accept or decline support services.
    - OPA-I30S - Spanish language form.
- Interview with PREA coordinator:
    - Indicated Robeson Rape Crisis Center (RCRCC) is the local entity with the mission of providing advocacy services to the community. A Memorandum of Understanding between RCRVC and RCRCC was developed and outlines the responsibilities of each party.

115.221(f)

- Facility response:
    - The agency has requested that the local law enforcement agency responsible for criminal investigations, follow the requirements of paragraphs §115.21 (a) through (e) of the PREA Standards.
- *NCDAC Memorandum Re: Compliance with PREA Investigations Standards:*
    - NCDAC requested local law enforcement follow the requirements of §115.21 (a)-(e). (*The auditor confirmed with the director that this memorandum has been shared with the Robeson County Sheriff's Department*.)

115.221(g)

Auditor is not required to audit this provision.

115.221(h)

- NCDAC Course Completion Certificate *PREA Support Person Training*:
  - Documentation of specialized training for the facility staff designated as the PREA support person (PSP).
- NCDAC Course *PREA Support Person (PSP) Training*:
  - Video based training modules covering:
    - Victim centered response to sexual abuse in confinement;
    - Understanding PREA Standards and victim services;
    - Understanding sexual abuse and trauma;
    - Reporting sexual abuse and sexual harassment;
    - First responder duties;
    - Sexual assault response teams (SART); and
    - Understanding your role as a PREA support person.
  - 20 question quiz at the end of each module.
- Documentation review:
  - PREA support person is a staff person with appropriate experience and training for the role.

Determination:

The facility meets the standard.

115.222	Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- RCRVC PAQ
  - Facility response
  - NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations*, *dated 06.16.2026*
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
- Supplemental documentation
  - *https://public.powerdms.com/NCDAC, accessed 08.22.2026*
  - *NCDAC Incident Report, 01.21.2026*
  - NCDAC Policy and Procedure DAC-OIA-100 *OIA Authority to Conduct Investigations*, *dated 01.01.2023*
- Documentation review
- Interview with agency head designee
- Interview with investigative staff

Reasoning and analysis:

115.222(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).
  - One allegation of sexual abuse received in the past 12 months.
  - One allegation 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.
- Documentation review:
  - The auditor reviewed the one investigation incident report resulting from an allegation of sexual abuse received during the 12-month review period.
- Interview with agency head designee:
  - Indicated an investigation is initiated for every allegation received.
  - Indicated facility notifies local law enforcement for criminal cases and documents law enforcement's response.
  - Indicated preliminary reviews determine who the allegation involves, what the allegation entails, and does the allegation meet the definition for offender-on-offender or staff-on-offender, contractor- or volunteer-on-offender sexual abuse and or sexual harassment.

115.222(b)

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

	sexual harassment, as defined by DAC-PREA-300 *PREA Investigations* policy: and ■ If law enforcement must be called. • Interview with investigative staff: ◦ Indicated agency policy requires allegations involving potentially criminal behavior be referred to the Robeson County Sheriff's Department. **115.222(c)** • *https://public.powerdms.com/NCDAC*: ◦ Included NCDAC Policy and Procedure PREA-300 which describes the responsibilities of both the agency and the investigating entity. **115.222(d)** Auditor is not required to audit this provision. **115.222(e)** Auditor is not required to audit this provision. **Determination**: The facility meets the standard.

115.231	**Employee training**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC 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 06.16.2026* ◦ NCDAC OSDT 001 Training Course Record *PREA SAH 101, various dates* ◦ NCDPS Poster *Red Flags – Are We Paying Attention to Staff, dated 12.2000* ◦ NCDAC Form OPA-T10 *PREA Staff Training Acknowledgement of Understanding, dated 11.07.2023* • Supplemental documentation ◦ NCDAC Course DAC-556, *PREA: Sexual Abuse and Sexual Harassment 101, dated 07.01.2025*

- NCDAC Course DAC-448, *PREA: Sexual Abuse and Sexual Harassment 201, dated 07.01.2025*
- Documentation review
- Interviews with a random sample of staff

Reasoning and analysis:

115.231(a)

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

be free from sexual abuse and sexual harassment, and from retaliation for reporting.
        - Identify relevant laws.
        - Define employee responsibilities when responding to sexual abuse and sexual harassment.
        - Define the unique attributes of working with females in confinement/under supervision.
        - Define the unique attributes of working with males in confinement/under supervision.
        - Define the vulnerabilities of people in confinement/under supervision.
        - Identify the dynamics of sexual abuse and sexual harassment of people in confinement and under supervision.
        - Identify how to detect signs of threatened and actual sexual abuse of people in confinement and under supervision.
        - Identify the common reactions to sexual abuse and sexual harassment.
        - Identify methods of avoiding inappropriate relationships with people in confinement and under supervision.
        - Identify techniques for communicating effectively and professionally with people in confinement and under supervision including lesbian, gay, bisexual, transgender, intersex (LGBTI) and gender nonconforming populations.
- Interviews with a random sample of staff:
    - Indicated received training on the 10 elements of the provision during initial basic training and annual in-service trainings.

115.231(b)

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

115.231(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 refresher training on the PREA requirement. Periodic reading of PREA related documentation is conducted during shift briefing.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Annual Refresher Training and Information:
    - All staff shall receive SAH 101 refresher training every two years;
    - All staff shall receive SAH 201 refresher information during the alternate years;
    - Emphasizing zero-tolerance, duty to report, and current sexual abuse and sexual harassment policies and procedures.
- NCDAC Course DAC-448, *PREA: Sexual Abuse and Sexual Harassment 201*:
  - Training objectives include:
    - Identify the Prison Rape Elimination Act (PREA) and prevention strategies.
    - Define sexual abuse and sexual harassment of people in confinement and under supervision.
    - Define relevant North Carolina General Statutes.
    - Identify the NCDAC policies on sexual abuse and sexual harassment.
    - Identify ways to report sexual abuse and sexual harassment.
    - Define first responder duties.
    - Identify disciplinary sanctions.
  - NCDAC Form OPA-T10 *PREA Staff Training Acknowledgement of Understanding*:
    - Zero-tolerance;
    - Professional boundaries;
    - PREA definitions of sexual abuse and sexual harassment;
    - North Carolina General Statute 14-27.31 - custodial victimization; and
    - Staff reporting methods.
  - NCDPS Poster *Red Flags – Are We Paying Attention to Staff?*
    - Listed behaviors most often associated with undue familiarity between staff and offenders.

115.231(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.

- 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.
- NCDAC OSDT 001 Training Course Record *PREA SAH 101:*
  - Documentation of course completion for *PREA: Sexual Abuse and Sexual Harassment 101.*
- Documentation review:
  - 16 of 16 files reviewed by the auditor, for staff hired in the past 12 months, contained completed PREA 101 and/or OPA T10 trainings.

Determination:

The facility meets the standard.

115.232	**Volunteer and contractor training**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

- RCRVC PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - NCDAC OSDT 001 Training Course Record *PREA SAH 101, various dates*
  - NCDAC OSDT 001 Training Course Record *PREA SAH 201, dated 08.21.2026*
  - NCDAC Form OPA-T10 *PREA Staff Training Acknowledgement of Understanding, revised 11.07.2023*
- Supplemental documentation
  - NCDAC Course DAC-556, *PREA: Sexual Abuse and Sexual Harassment 101, dated 07.01.2025*
  - NCDAC Pamphlet *A Guide To Prevention And Reporting Of Undue Familiarity, And Sexual Abuse And Sexual Harassment With Offenders And Residents, 04.04.2024*
- Documentation review
- Interviews with contractors who has contact with offenders

Reasoning and analysis:

115.232(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.
    - 61 volunteers and contractors have received this training.
- Interviews with contractors who has contact with offenders:
    - Indicated PREA training was conducted before contact with offenders.

115.232(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:*
    - Volunteers, custodial agents, and contractors shall receive the Sexual Abuse and Harassment 101 training.
    - Will verify understanding of training by signing the PREA Acknowledgement Form.
- NCDAC Course DAC-556, *PREA: Sexual Abuse and Sexual Harassment 101*:
    - Training objectives include:
        - Identify the “Prison Rape Elimination Act (PREA) of 2003” and the agency’s zero-tolerance policy of sexual abuse and sexual harassment for offenders/persons under supervision.
        - Define sexual abuse and sexual harassment.
        - Define people in confinement and under supervision right to be free from sexual abuse and sexual harassment, and from retaliation for reporting.
        - Identify relevant laws.
        - Define employee responsibilities when responding to sexual abuse and sexual harassment.
        - Define the unique attributes of working with females in confinement/under supervision.
        - Define the unique attributes of working with males in confinement/under supervision.
        - Define the vulnerabilities of people in confinement/under supervision.
        - Identify the dynamics of sexual abuse and sexual harassment of people in confinement and under supervision.
        - Identify how to detect signs of threatened and actual sexual abuse of people in confinement and under supervision.
        - Identify the common reactions to sexual abuse and sexual harassment.
        - Identify methods of avoiding inappropriate relationships with people in confinement and under supervision.
        - Identify techniques for communicating effectively and professionally with people in confinement and under supervision including lesbian, gay, bisexual, transgender, intersex (LGBTI) and gender nonconforming populations.
    - NCDAC Pamphlet *A Guide To Prevention And Reporting Of Undue Familiarity, And Sexual Abuse And Sexual Harassment With Offenders And Residents*:

	■ Contained behaviors associated with undue familiarity, options for reporting, zero-tolerance standard, N.C. general statute for custodial sexual abuse, and sexual abuse and sexual harassment definitions. • Interviews with contractors 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. **115.232(c)** • Facility response: ◦ The agency maintains documentation confirming that volunteers and contractors understand the training they have received. • NCDAC Form OPA-T10 *PREA Staff Training Acknowledgement of Understanding*: ◦ Zero-tolerance; ◦ Professional boundaries; ◦ PREA definitions of sexual abuse and sexual harassment; ◦ North Carolina General Statute 14-27.31 - custodial victimization; and ◦ Staff reporting methods. • NCDAC OSDT 001 Training Course Record *PREA SAH 101*: ◦ Documentation of PREA training for facility volunteers. • NCDAC OSDT 001 Training Course Record *PREA SAH 201*: ◦ Documentation of PREA training for facility contractors. • Document review: ◦ 20 of 20 contractor or volunteer records, reviewed by the auditor, contained completion of NCDAC Course DAC-556, *PREA: Sexual Abuse and Sexual Harassment* 101 and/or NCDAC Course DAC-448, *PREA: Sexual Abuse and Sexual Harassment 201* and/or OPA-T10 PREA *Staff Training Acknowledgement of Understanding*. **Determination**: The facility meets the standard.

115.233	**Resident education**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Policy and Procedure DAC-PREA-100 *PREA Prevention Planning & Screening, dated 06.16.2026* ◦ NCDAC Form OPA-T100 *Person in Confinement or Under Supervision Education Acknowledgement, revised 10.18.2024* ◦ NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA)*

Reporting, Help Prevent Prison Sexual Violence, dated 03.24.2023
    - NCDAC Poster OPA-T102S *Ley y para la Eliinacion de la Violacion en las Prisiones (PREA) Reportelo Ayude A Prevenir La Violencia Sexual En Las Prisones, revised 03.24.2023*
    - NCDAC Policy and Procedure E.2600 *Reasonable Accommodations for Offenders with Disabilities, dated 02.25.2025*
    - NCDAC Policy and Procedure E.3900 *Developmental Disabilities, dated 08.06.2024*
- Supplemental documentation:
    - NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement, dated 08.24.2025*
    - NCDAC Pamphlet *End the Silence: Zero Tolerance for Sexual Abuse and Sexual Harassment, dated 01.2026*
    - *Rompa el Silencio: Tolerancia cero con el abuso sexual y el acoso sexual: Ley para la Eliminación de las Violaciones en la Cárcel (PREA), undated*
    - Acolad *Interpretation & Translation Services "Access Contact Sheet", dated 03.2026*
    - NCDOC Health Services Policy TX VII-2 *Care and Treatment of Patient – Disabilities, dated 08.2009*
    - NCDAC OPUS Information - *Case Management Notes, various dates*
- Site review
- Documentation review
- Interview with intake staff
- Interviews with offenders

Reasoning and analysis:

115.233(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.
    - 1164 offenders admitted during the past 12 months were given this information at intake.
- NCDAC Policy and Procedure DAC-PREA-100 *PREA Prevention Planning & Screening*:
    - All offenders shall receive, during reception, information explaining the agency’s zero tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse and sexual harassment, prevention/intervention, self-protection, treatment, and counseling.
- NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement*:
    - Right to be free from sexual abuse and sexual harassment;
    - Ways to report an allegation;
    - Agency and facility response to an allegation; and
    - Access to outside confidential support services.
- Site review:
    - RCRVC staff explained to the auditor that staff review with each offender the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment, internal and external methods for report incidents or suspicions of sexual abuse or sexual harassment, and the facility’s response to an allegation.
    - Included reading NCDAC Factsheet OPA-T101 *Facilitator Talking Points* and other documents aloud to make accommodations for

offenders with low vision or limited reading skills.
    - Staff had access to interpretation services including American Sign Language (ASL) through *Acolad Interpretation & Translation Services "Access Contact Sheet".*
    - Staff has offender sign OPA-T100 form after reviewing material.
- Interview with intake staff:
    - Indicated zero-tolerance policy and how to report incidents of sexual abuse or sexual harassment are reviewed with each offender.
    - Indicated all offenders, upon entry to the facility, are presented with required sexual safety information.
- Interviews with offenders:
    - Indicated that information about sexual abuse and sexual harassment was reviewed upon arrival to the facility.

115.233(b)

- Facility response:
    - The facility provides offenders who are transferred from a different community confinement facility with refresher information.
    - Zero offenders transferred from a different community confinement facility during the past 12 months.
- NCDAC OPUS Information - *Case Management Notes*:
    - Listed all case management screenings for an offender.
    - Case management screenings included:
        - Required offender PREA initial and comprehensive education sessions; and
        - Required offender PREA information sessions at all other facilities, if applicable.
- Interview with intake staff:
    - Indicated staff review the required sexual abuse and sexual harassment information verbally to ensure offenders understand the information presented.
- Interview with offenders:
    - Indicated received information about how to report and the right to be free from sexual abuse, sexual harassment, and retaliation for reporting on the day of arrival or the next day.

115.233(c)

- Facility response:
    - Offender PREA education is available in formats accessible to all offenders, including:
        - Those who are limited English proficient;
        - Those who are deaf;
        - Those who are visually impaired;
        - Those who are otherwise disabled; and
        - Those who are limited in their reading skills.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Appropriate provisions shall be made as necessary for offenders not fluent in English, persons with disabilities, and those with low literacy levels.
- NCDOC Health Services Policy TX VII-2 *Care and Treatment of Patient – Disabilities*:
    - Described use of specialized equipment, and/or services for offenders with disabilities to participate in and benefit from facility programs, services, and activities.
- NCDAC Policy and Procedure E.3900 *Developmental Disabilities*:

- Described specialized case management services for developmentally disabled offenders.

- NCDAC Policy and Procedure E.2600 *Reasonable Accommodations for Offenders with Disabilities*:
  - Described accommodation process for qualified offenders with a disability to access jobs, programs, activities, or services offered by DAC.
- Site review:
  - Auditor observed Spanish language copies of offender education materials available:
    - Section II of NCDAC Form OPA-T100 *Prison Rape Elimination Act (PREA) Person in Confinement or Under Supervision Education Acknowledgement*.
    - NCDAC Poster OPA-T102S *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence*:
    - Rompa el Silencio: Tolerancia cero con el abuso sexual y el acoso sexual: Ley para la Eliminación de las Violaciones en la Cárcel (PREA):
      - Spanish language version of NCDAC pamphlet *End the Silence*.
  - Staff had access to the *Acolad Interpretation & Translation Services* "*Access Contact Sheet*" which included American Sign Language (ASL).
  - Staff use NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement* to read required PREA information to offenders.
  - Intake and programing staff read forms to new offenders including those who had low vision, limited reading skills and/or a cognitive disability.

115.233(d)

- Facility response:
  - The agency maintains documentation of offender participation in PREA education sessions.
- NCDAC Form OPA-T100 *Person in Confinement or Under Supervision Education Acknowledgement*:
  - Offenders sign acknowledgement form after completing PREA-related education and rescreen process.
    - Zero-tolerance for sexual abuse and sexual harassment of offenders;
    - Right to be free from sexual abuse, sexual harassment, and retaliation for reporting; and
    - Encouraged to report threats or allegations to staff.
- Documentation review:
  - 19 of 19 offender’s documentation, reviewed by the auditor, contained an acknowledgment of sexual safety education information received upon arrival to RCRVC by reviewing and signing NCDAC OPA-T100 *Persons in Confinement or Under Supervision Education Acknowledgement*.

115.233(e)

- Facility response:
  - The agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats.

	◦ NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence*: ■ Described ways for offenders to report sexual abuse, sexual harassment, and retaliation. ■ Included telephone number, mailing address, and email address. ■ Stated that the agency accepts anonymous and third-party reports. ■ OPA-T102(S) – Spanish language version. ◦ NCDAC Pamphlet *End the Silence: Zero Tolerance for Sexual Abuse and Sexual Harassment* in English and Spanish: ■ Zero tolerance policy; ■ Right to report; ■ Internal, external, and third-party reporting methods; ■ Rape crisis center phone number; ■ Steps to take after sexual abuse; ■ Definitions of sexual abuse, sexual harassment, and staff voyeurism; and ■ Tips for avoiding sexual abuse and harassment. ■ *Rompa El Silencio* – Spanish language version of *End the Silence* pamphlet. • Site review: ◦ The auditor observed key information posted in housing units, receiving, chow hall, and other high traffic areas of the facility for offenders. **Determination**: The facility meets standard.

115.234	**Specialized training: Investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Course *PREA: Investigating Sexual Abuse in a Confinement Setting, dated 05.31.2023* ◦ NCDAC Course Completion Certificate – *PREA: Investigating Sexual Abuse in a Confinement Setting, dated 09.14.2023* • Interview with investigative staff **Reasoning and analysis**: **115.234(a)** • Facility response: ◦ Agency policy requires that investigators are trained in conducting

sexual abuse investigations in confinement settings.

- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Shall receive training on conducting sexual abuse and harassment investigations in a confinement setting. Such training shall include:
    - Techniques for interviewing sexual abuse victims;
    - Proper use of Miranda and Garrity Warnings;
    - Sexual abuse evidence collection in a confinement setting; and
    - Criteria and evidence required to substantiate a case for administrative action or prosecution referral.
- Interview with investigative staff:
  - Indicated investigator training included steps for conducting an investigation, interview techniques, evidence preservation and collection, determining the investigation outcome based on the preponderance of the evidence, and report writing.

115.234(b)

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

115.234(c)

- Facility response:
  - The agency maintains documentation showing that investigators have completed the required training.
  - Zero investigators currently employed at RCRVC who have completed the required training. (*The facility director confirmed an investigator from another facility completed the one investigation during the 12-month review period.*)
- NCDAC Course Completion Certificate – *PREA: Investigating Sexual Abuse in a Confinement Setting*:
  - Specialized investigator training completed by the one designated investigator.

115.234(d)

Auditor is not required to audit this provision.

Determination:

The facility meets the standard.

115.235	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ RCRVC Memorandum *Re: Standard 115.235(b)-1, dated 08.19.2026* ◦ NCDAC Course Completion Certificate *PREA – for Health Services, multiple dates* ◦ NCDAC Course Completion Certificate *PREA 101 -Sexual Abuse and Sexual Harassment (In-Service), multiple dates* • Supplemental documentation ◦ *Transcript Report, multiple dates* ◦ NCDAC Form OPA-T10 *PREA Staff Training Acknowledgement of Understanding, multiple dates* • Document review • Interview with medical staff **Reasoning and analysis**: **115.235 (a)** • Facility response: ◦ The agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. ◦ Three medical and mental health care practitioners who work regularly at this facility received the training required by agency policy. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ All full- and part-time medical and mental health care practitioners who work regularly in its facilities shall be trained in: ■ Detecting and assessing signs of sexual abuse and sexual harassment. ■ Preserving physical evidence of sexual abuse. ■ Responding effectively and professionally to victims of sexual abuse and sexual harassment. ■ How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. • Interview with medical staff: ◦ Indicated completion of *PREA - for Health Services* course which included responding effectively and professionally to victims, assessing for signs of sexual abuse, and preserving evidence, by requesting the offender does not complete any hygiene tasks. Evidence would be collected during the forensic exam at the hospital. ◦ Indicated reporting allegations or suspicions of sexual abuse to the OIC and the associate warden as soon as practical. **115.235(b)**

- Facility response:
  - Medical staff at this facility do not conduct forensic medical exams.
- RCRVC Memorandum *Re: Standard 115.235(b)-1*:
  - Stated: “Robeson CRV does not conduct forensic medical exams on site.”
- Interview with medical staff:
  - Indicated offenders who allege sexual abuse and meet the medical criteria are sent to UNC Southeastern Regional Medical Center, where a forensic medical exam would be conducted.

115.235(c)

- Facility response:
  - The agency maintains documentation showing that medical and mental health practitioners have completed the required training.
- NCDAC Course Completion Certificate *PREA – for Health Services*:
  - Documentation of completed specialized PREA training for one facility health care staff.
- *Transcript Report*:
  - Included specialized PREA training for two facility health care staff.
- Documentation review:
  - Health care staff training documentation included the specialized training course *PREA for Health Services*.

115.235(d)

- Documentation review:
  - Health care staff training documentation included training mandated for employees under § 115.31 or contractors under § 115.32 including:
    - NCDAC Form OPA-T10 *PREA Staff Training Acknowledgement of Understanding, and/or*
    - PREA 101-*Sexual Abuse and Sexual Harassment, and/or*
    - PREA 201-*Sexual Abuse and Sexual Harassment*.

Determination:

The facility meets the standard.

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

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

Reasoning and analysis:

115.241(a)

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

115.241(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.
  - 1164 offenders entering the facility (either through intake or transfer) within the past 12 months, whose length of stay in the facility was for 72 hours or more, were screened for risk of sexual victimization or risk of sexually abusing other offenders within 72 hours of their entry into the facility.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - All offenders and safekeepers shall receive a screening inventory, administered via the web-based OPUS intake system, within 24 hours after admission to DOI. Diagnostic Services staff shall conduct screening to determine an offender's risk of being sexually abused by other offenders or their risk of being sexually abusive towards other offenders.
  - Upon transfer to another facility, within 24 hours, the PCM and/or OIC shall review an offender's risk of victimization and abusiveness by reviewing the dashboard and acknowledging housing placement is appropriate.
- Documentation review:

- 19 of 19 offender’s documentation, reviewed by the auditor, contained screening dates within 72 hours of arrival to RCRVC.
- An offender may occasionally miss the 72-hour deadline for screening due to a court date in another county, hospital stay, or other circumstance beyond the control of the facility.

- Interview with staff responsible for risk screening:
  - Indicated offenders are ordinarily screened within 72 hours of arrival at the facility.
- Interviews with offenders:
  - Indicated screening questions included being asked about prior sexual abuse, sexual orientation, and perceived safety.

115.241(c)

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

115.241(d) and (e)

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

115.241(f)

- Facility response:
  - The policy requires that the facility reassess each offenders' risk of victimization or abusiveness within a set time period, not to exceed 30 days after the offenders' arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening.
  - 1164 offenders, who entered the facility within the past 12 months and whose length of stay in the facility was over 30 days or more, were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Within a set time period, not to exceed 30 days from the offender’s arrival at the facility, the facility will reassess the offender’s risk of

victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

- Documentation review:
  - Rescreening at RCRVC consisted of asking offender three questions to update the initial screening.
  - Nine of nine applicable offender's documentation, reviewed by the auditor, contained a rescreening date within 30 days of arrival date.
  - An offender may occasionally miss the 30-day deadline for rescreening due to a court date in another county, hospital stay, or other circumstance beyond the control of the facility.
- Interview with staff responsible for risk screening:
  - Indicated offenders are ordinarily rescreened within 30 days after arrival to the facility.
- Interviews with offenders:
  - Indicated offenders were asked similar questions during a follow-up meeting with staff.

115.241(g)

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

115.241(h)

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

115.241(i)

- Site review:
  - Auditor observed electronic files access was profile based.
  - Auditor observed physical file storage access was restricted by locks.
- Interview with PREA coordinator:

	◦ Indicated access to offender risk assessments are based on staff roles and profiles to protect sensitive information. The director, PREA compliance staff, and screening staff have access to this information. • Interview with staff responsible for risk screening: ◦ Indicated only the admissions staff assigned to the offender has the ability to see that offender's screening information. **Determination**: The facility meets the standard.

115.242	**Use of screening information**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* • Supplemental documentation ◦ NCDAC OPA-S010 *Screening for Risk, dated 10.22.2024* ◦ *PREA Report – High Risk for Victimization, undated* • Documentation review • Interview with PREA coordinator • Interview with staff responsible for risk screening **Reasoning and analysis:** **115.242(a)** • Facility response: ◦ The agency/facility uses information from the risk screening required by §115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ Restated the language of the provision. • NCDAC OPA-S010 *Screening for Risk*: ◦ Included determination for high risk for victimization (HRV) and/or abusiveness (HRA). • *PREA Report - High Risk for Victimization*: ◦ Listed name, bed assignment, and primary assignment for each HRV offender. • Interview with PREA coordinator: ◦ Indicated HRV and HRA lists are reviewed by facility staff to keep HRV and HRA offenders separated. Individual determinations for housing, programming, and job assignment are made for each HRV or HRA offender.

	115.242(b) • Facility response: ◦ The agency/facility makes individualized determinations about how to ensure the safety of each offender. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ The facility shall make individualized determination for bed assignments, based on facility housing designs, to ensure the safety of each offender. ◦ Facilities will consider such factors as the amount of staff supervision in the area, the presence or absence of surveillance equipment, and whether the job is in an isolated area prior to making assignments for high-risk abusers. ◦ Facilities shall take appropriate action to ensure all program assignments are appropriate for high-risk abusers. • NCDAC OPA-S010 *Screening for Risk*: ◦ Displayed HRA and HRV offender lists to facilitate individualized housing, work, programing, and education assignments. • Documentation review: ◦ HRV offenders were assigned to different housing units. • Interview with staff responsible for risk screening: ◦ Indicated risk screening information is used to determine HRA and HRV designations. Facility staff use these designations to keep HRA and HRV offenders separated in housing, programing, and job assignments. **115.242(c)** Auditor no longer audits this provision. **115.242(d)** Auditor no longer audits this provision. **115.242(e)** Auditor no longer audits this provision. **115.242(f)** Auditor no longer audits this provision. **115.242(g)** Auditor no longer audits this provision. **Determination**: The facility meets the standard.

115.251	**Resident reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

- RCRVC PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence, dated 03.24.2023*
  - NCDAC Poster OPA-T102S *Ley y para la Eliinacion de la Violacion en las Prisiones (PREA) Reportelo Ayude A Prevenir La Violencia Sexual En Las Prisones, revised 03.24.2023*
- Supplemental documentation
  - NCDAC Policy PREA 200 - *PREA Reporting, dated 09.04.2025*
  - NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement, dated 08.24.2026*
  - NCDAC Pamphlet *End the Silence: Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act, dated 03.24.2023*
  - *Rompa el Silencio: Tolerancia cero con el abuso sexual y el acoso sexual: Ley para la Eliminación de las Violaciones en la Cárcel (PREA), undated*
  - 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*
- Site review
- Interview with PREA coordinator
- Interviews with a random sample of staff
- Interviews with offenders

Reasoning and analysis:

115.251(a)

- Facility response:
  - The agency has established procedures allowing for multiple internal ways for offenders to report privately to agency officials about: sexual abuse or sexual harassment; retaliation by other offenders or staff for reporting sexual abuse and sexual harassment; and staff neglect or violation of responsibilities that may have contributed to such incidents.
- NCDAC Policy PREA-200 *PREA Reporting*:
  - Offenders may report sexual abuse or sexual harassment allegations via the following methods:
    - Notifying any DAC employee;
    - Administrative remedy process;
    - PREA/grievance locked box located at each DAC confinement or treatment facility; or
    - Contacting the DAC PREA Office by email at *PREA@NCDAC.gov*.
- NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement*:
  - Report to any departmental employee; or
  - Write to the PREA Office at MSC 4201.
- NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence*:

- Included internal ways for offenders to report sexual abuse, sexual harassment, or retaliation:
  - To any departmental employee; or
  - Through the administrative remedy process (grievance).
- Stated employees have a responsibility to do whatever is reasonable and necessary to reduce incidents of sexual abuse, sexual harassment, and to respond appropriately when they do occur.
- OPA-T102S – Spanish language poster.

- NCDAC Pamphlet *End the Silence - Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act*:
  - Internal reporting includes:
    - Reporting to any staff, volunteer, contractor, medical, or mental health staff;
    - Submitting a grievance or sick call slip;
    - Reporting to the PREA coordinator or PREA compliance manager;
    - Submitting a third-party report on behalf of another offender; or
    - By writing to the PREA Office at MSC 4201, Raleigh, NC.
- *Rompa el Silencio: Tolerancia cero con el abuso sexual y el acoso sexual: Ley para la Eliminación de las Violaciones en la Cárcel (PREA)*:
  - Spanish language version of NCDAC Pamphlet *End the Silence.*
- Site review:
  - Auditor observed:
    - Posters OPA-T102, OPA-T102S, and/or *End the Silence* (English and Spanish) displayed in housing units, receiving, and chow hall.
    - Signage was clear with appropriately sized text, and placed at a suitable height.
    - Locked boxes for request forms and mail were available for offenders to drop letters into.
  - Offenders and staff indicated, during informal conversations with the auditor, offenders could report sexual abuse or harassment to officers, supervisors, administrators, medical staff, or through the town hall or grievance process.
- Interviews with a random sample of staff:
  - Indicated offenders can report privately to any staff person or through the grievance process.
- Interviews with offenders:
  - Indicated reports could be made to officers, supervisors, medical staff, administrators, or by submitting a grievance.

115.251(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.
- NCDAC Policy PREA-200 *PREA Reporting*:
  - Offenders may report sexual abuse or sexual harassment allegations via the following methods:
    - Contacting the external organization at (972) 535-3499 which is only accessible by offender phones.
    - Contacting the anonymous DAC Fraud, Waste, Abuse and Misconduct Hotline at (844) 208-4018.
    - Contacting a community-based organization that provides services to victims of sexual abuse or sexual harassment. A signed consent form is required before reporting on behalf of an offender.

- NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence*:
    - Included external options for offenders to report sexual abuse, sexual harassment, or retaliation:
        - By calling the external hotline for people in confinement. Dial 972-535-3499;
        - To the local rape crisis center (requires offender consent before facility can be informed)
- NCDAC P*amphlet End the Silence - Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act*:
    - By calling the Offender Reporting Sexual Abuse and Sexual Harassment Hotline at 972-535-3499.
- Site review:
    - Auditor tested the external hotline for people in confinement and was able to make a test call.
    - Phone call did not require use of a pin number and was toll-free.
    - Calls to the hotline are routed to the external reporting entity, the North Carolina Department of Public Safety, and forwarded to the NCDAC PREA Office, who then notifies the facility director.
    - The auditor was informed the facility does not detain offenders solely for civil immigration purposes.
    - Locked mail and request form boxes are available to offenders and can only be opened by designated staff.
- Interviews with offenders:
    - Indicated phone numbers to make a report are posted on the bulletin boards in housing units and other areas of the facility.
- Interview with PREA coordinator:
    - Indicated offenders can make a report through the external reporting hotline by calling the hotline number which is posted on bulletin boards throughout the facility and by the offender phones.
    - Indicated offenders can remain anonymous when reporting through the external reporting hotline.
    - Indicated external reports through the hotline are forwarded from the external entity (NCDPS) to the NCDAC PREA Office, who then notifies the facility so an investigation can be completed.

115.251(c)

- Facility response:
    - The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties.
    - Staff are required to immediately document verbal reports.
- NCDAC Policy PREA-200 *PREA Reporting*:
    - Offenders may report sexual abuse or sexual harassment allegations via the following methods:
        - Notifying any DAC employee;
        - Administrative remedy process;
        - PREA/grievance locked box located at each DAC confinement or treatment facility;
        - Contacting the anonymous DAC Fraud, Waste, Abuse, and Misconduct Hotline at (844)208-4018.
    - Employees, volunteers, contractors, custodial agents, and third parties may report sexual abuse or sexual harassment allegations privately. Ways to report include but are not limited to the following methods:
        - DAC PREA Office at PREA@NCDAC.gov or (919)825-2754;
        - Anonymously to the DAC PREA Office; or
        - Local law enforcement agency.

- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy:*
    - All reports of sexual abuse and sexual harassment, however made, are to be reported to the warden and the DAC PREA Office.
- NCDAC Pamphlet *End the Silence - Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act:*
    - Third-party reporting for offenders:
        - Tell a family member, friend, legal counsel, or anyone else outside the facility.
        - They can report on your behalf by calling (844) 208-4018.
- Interviews with a random sample of staff:
    - Indicated offenders can make reports verbally, in writing, through third parties; and can remain anonymous when reporting.
    - Indicated reports are documented as soon as safe to do so and practical.
- Interviews with offenders:
    - Indicated reports can be made verbally to staff, by phone including anonymously, in writing, and through a third party.

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

Determination:

The facility meets the standard.

115.252	**Exhaustion of administrative remedies**

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- RCRVC PAQ
  - Facility response
  - NCDAC Policy G.0300 *Administrative Remedy Procedures, dated 01.26.2026*

Reasoning and analysis:

115.252(a)

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

115.252(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 requires an offender to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse. (*The facility director confirmed the formal grievance process is used for allegations of sexual abuse.)*
- NCDAC Policy G.0300 *Administrative Remedy Procedures*:
  - No offender grievance alleging sexual abuse or harassment shall be rejected.
  - No employee who appears to be involved in a grievance shall participate in any capacity in the resolution process, except as a witness where necessary.

115.252(c)

- Facility response:
  - The agency's policy and procedure allow an offender to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint.
  - The agency's policy and procedure require that an offender grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint.
- NCDAC Policy G.0300 *Administrative Remedy Procedures*:
  - Any aggrieved offender in the custody of DAC may submit a paper grievance Form DC-410 at their housing facility. Paper forms may be submitted to custody staff, through facility mail, or in designated drop-box locations.

- In addition, no employee who appears to be involved in an offender sexual abuse or harassment allegation shall accept a grievance which suggests such personal involvement or shall participate in any capacity in the response to the grievance.

115.252 (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.
  - Zero grievances filed in the past 12 months, that alleged sexual abuse.
  - 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.

115.252(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.

115.252(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. **115.252(g)** • Facility response: ◦ The agency has a written policy that limits its ability to discipline an offender for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the offender filed the grievance in bad faith. ◦ In the past 12 months, zero offender grievances alleging sexual abuse that resulted in disciplinary action by the agency against the offender for having filed the grievance in bad faith. • NCDAC Policy G.0300 *Administrative Remedy Procedures*: ◦ No reprisals shall be taken against any offender or staff member for a good faith use of or participation in the grievance procedure. **Determination**: The facility meets the standard.

115.253	**Resident access to outside confidential support services**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ *Memorandum of Understanding PREA Victim Support Partnership*

Between The North Carolina Department of Adult Correction Robeson CRV Center and Robeson County Rape Crisis Center, dated 01.23.2026

- Supplemental documentation
  - NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement, revised 08.24.2026*
  - Pamphlet - *Rape Crisis Center of Robeson County, undated.*
- Interviews with offenders

Reasoning and analysis:

115.253(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 offenders with access to such services by enabling reasonable communication between offenders and these organizations in as confidential a manner as possible.
- NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement*:
  - Included instructions for contacting the local rape crisis center for confidential support services by dialing *63 from any offender phone.
- Pamphlet - *Rape Crisis Center of Robeson County*:
  - Contained mailing address for contacting the local rape crisis center.
  - Posted on bulletin boards in housing units and other areas of the facility.
- Site review:
  - Auditor observed the address of the Rape Crisis Center of Robeson County, for accessing emotional support services, posted on bulletin boards throughout the facility.
  - Auditor completed a test call using the *63 number to reach an outside victim advocate organization.
  - Auditor verified that the facility does not detain persons solely for civil immigration purposes.
- Interviews with offenders:
  - Indicated information for emotional support services is posted on housing unit bulletin boards.
  - Indicated have not needed to contact this organization.

115.253(b)

- Facility response:
  - The facility informs offenders, prior to giving them access to outside support services:
    - The extent to which such communications will be monitored.
    - The mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:

	◦ Restated the language of the provision. • Site review: ◦ Initial announcement when placing any phone call: "This call will be monitored and recorded." • Interviews with offenders: ◦ Indicated that there is an announcement on the phones about being recorded. **115.253(c)** • Facility response: ◦ The facility maintains memorandum of understanding (MOU) or other agreements with community service providers that are able to provide offenders with emotional support services related to sexual abuse. ◦ The facility maintains a copy of the MOU. • *Memorandum of Understanding PREA Victim Support Partnership Between The North Carolina Department of Adult Correction Robeson CRV Center and Robeson County Rape Crisis Center:* ◦ Robeson County Rape Crisis Center agreed to provide victim support services to related to sexual violence including investigatory interviews, referrals, and follow-up crisis counseling via phone and/or mail. **Determination**: The facility meets the standard.

115.254	**Third party reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility responses ◦ 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* • Supplemental documentation ◦ *www.dac.nc.gov/information-and-services/prea-office, accessed 08.22.2026* ◦ NCDAC Poster *END THE SILENCE Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act, dated 01.2026* ◦ NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement, revised 08.24.2026* • Site review **Reasoning and analysis**:

	115.254(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. • *www.dac.nc.gov/information-and-services/prea-office*: ◦ Contained reporting methods including email and telephone contacts for the NCDAC PREA Administration Office. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ Third-party reporting can be made via email, phone or letter. • NCDAC Factsheet OPA-T101 *Facilitator Talking Points: Offender Sexual Abuse & Sexual Harassment Intake and Orientation Upon Transfer for People in Confinement*: ◦ Third-party reporting to include family members, friends, or outside organization. ◦ OPA-T101 Facility Talking Points was read to offenders during their orientation process. • NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence*: ◦ Family members and friends of offenders can report by email to SVC_dac.prea@dac.nc.gov. • NCDAC Poster *END THE SILENCE Zero Tolerance for Sexual Abuse and Sexual Harassment: Prison Rape Elimination Act*: ◦ Third-party reporting by telling a family member, friend, legal counsel, or anyone else outside the facility. They can report on offender's behalf by calling (844) 208-4018. • Site review: ◦ NCDAC Posters OPA-T102 and *END THE SILENCE* in English and Spanish were posted in offender housing areas, receiving, and in the chow hall. Posters contain third-party reporting options. ◦ NCDAC Factsheet OPA-T101 is read by staff during the orientation of new offenders and included third-party reporting options. ◦ Auditor submitted a third-party report which the facility confirmed was received. **Determination**: The facility meets the standard.

115.261	**Staff and agency reporting duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy PREA-200 *PREA Reporting, dated 06.16.2026* ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and*

Sexual Harassment Policy, dated 06.09.2022

- Supplemental documentation
  - NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence, dated 01.07.2026*
- Documentation review
- Site review
- Interviews with a random sample of staff
- Interview with medical staff
- Interview with director

Reasoning and analysis:

115.261(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.
- NCDAC Poster OPA-T102 *Prison Rape Elimination Act (PREA) Reporting, Help Prevent Prison Sexual Violence*:
  - Stated all NCDAC employees have a responsibility to act to reduce incidents of sexual abuse and sexual harassment, respond appropriately when they do occur, and report any and all violations of the agency's zero-tolerance policy towards sexual abuse or harassment of offenders.
- Interviews with a random sample of staff:
  - Indicated all staff are required to report any knowledge or suspicion about incidents of sexual abuse or sexual harassment, retaliation, or staff neglect that led to an incident.
- Site review:
  - Staff discussed with the auditor that a verbal report to the OIC is the most immediate way to begin the facility response to an allegation, retaliation, or staff neglect.

115.261(b)

- Facility response:

	◦ Apart from reporting to designated supervisors or officials and designated state or local services agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ The facility investigator and all others involved in the PREA process, to the extent possible, will ensure the confidentiality of PREA complaints as well as all data collected through the investigation of those complaints except as required in the following circumstances: ■ To cooperate with law enforcement in any investigation and prosecution of the incidents alleged in such complaints. ■ To take and enforce disciplinary action against any staff member as a result of the incidents alleged in the complaints. ■ To defend against claims brought by the offender for violation of the offender's rights for having been subjected to sexual abuse. ■ To otherwise comply with the law. • Interviews with a random sample of staff: ◦ Indicated report information is on a need-to-know basis and only shared with staff involved in the response to an allegation including the OIC, investigator, and director. **115.261(c)** • Interview with medical staff: ◦ Indicated limitations of confidentiality and mandatory reporting duties are disclosed to the offender prior to providing services. ◦ Indicated duty to report all information about sexual victimization to the OIC. ◦ Indicated has been made aware of an incident of sexual abuse and reported it immediately to the OIC. **115.261(d)** • Interview with director: ◦ Indicated Robeson CRVC does not house youthful offenders. ◦ Indicated the Department of Social Services and local law enforcement would be notified if there were an allegation made by or about an offender considered a vulnerable adult. **115.261(e)** • Interview with director: ◦ Indicated all allegations of sexual abuse and sexual harassment are reported to an investigator regardless of reporting method, including those made anonymously or by a third party. **Determination**: The facility meets the standard.

115.262	**Agency protection duties**

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- RCRVC PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - RCRVC Memorandum *Re: Standard 115.262(a)-4, dated 08.19.2026*
- Interview with agency head designee
- Interview with director
- Interviews with a random sample of staff

Reasoning and analysis:

115.262(a)

- Facility response:
  - When the agency or facility learns that an offender is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the offender (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay).
  - Zero times the agency or facility determined that an offender was subject to a substantial risk of imminent sexual abuse in the past 12 months.
- NCDAC Policy and Procedure F.3400 Offender Sexual Abuse and Sexual Harassment Policy:
  - When an employee, volunteer, contractor, or custodial agent learns that an offender is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the offender.
- RCRVC Memorandum *Re: Standard 115.262(a)-4*:
  - Stated: “At this time Robeson CRV there were no offenders that were subject to a substantial risk of imminent sexual abuse.”
- 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 director:
  - Indicated the offender would be separated from any imminent threat through change of assignment or bed location. Would initiate an investigation and ensure the offender does not have further contact with anyone threatening him. Would transfer any offender who threatened another offender.
- Interviews with a random sample of staff:
  - Indicated immediate separation of offender from any threat, notify the OIC, continue to monitor the offender, and document the incident.

Determination:

The facility meets the standard.

115.263	Reporting to other confinement facilities

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- RCRVC PAQ
  - Facility response
  - NCDAC Policy PREA-200 *PREA Reporting, dated 06.16.2026*
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - RCRVC Memorandum *Re: Standard 115.263(a)-3, dated 08.19.2026*
  - RCRVC Memorandum *Re: Standard 115.263(d)-2, dated 08.19.2026*
- Interview with agency head designee
- Interview with director

Reasoning and analysis:

115.263(a)

- Facility response:
  - The agency has a policy requiring that, upon receiving an allegation that an offender was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred.
  - In the past 12 months, the facility has received zero allegations that an offender was abused while confined at another facility.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.
- RCRVC Memorandum *Re: Standard 115.263(a)-3*:
  - Stated: “At this time Robeson CRV there have been no allegations of abuse while confined at another facility.”

115.263(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.

115.263(c)

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

Report within 72 hours of receiving the report.

115.263(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 has received zero allegations of sexual abuse from other facilities in 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.
- RCRVC Memorandum *Re: Standard 115.263(d)-2*:
  - Stated: “There have been no allegations of abuse from other facilities."
- Interview with agency head designee:
  - Indicated the NCDAC PREA Office is the designated point of contact as well as notifying the warden of the facility where the allegation occurred.
  - Indicated the NCDAC PREA Office ensures the facility completes an investigation of the allegation. No such notifications were made to the NCDAC PREA office in the past 12 months.
- Interview with director:
  - Indicated the facility would investigate the allegation promptly. The facility investigator would work with the other facility to complete an investigation. The other facility’s PREA support people would provide assistance to the offender.

Determination:

The facility meets the standard.

115.264	**Staff first responder duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

- RCRVC PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
- Documentation review
- Interviews with a random sample of staff

Reasoning and analysis:

115.264(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.
    - One allegation of offender sexual abuse was reported in the past 12 months.
    - Zero allegations of offender sexual abuse where it was applicable for the first security staff member to respond to the report to separate the alleged victim and abuser.
    - Zero allegations of offender sexual abuse where staff were notified within a time period allowing for physical evidence collection.
    - Zero allegations of offender sexual abuse where it was applicable for the first security staff member to respond to the report to preserve and protect any crime scene until appropriate steps could be taken to collect any evidence.
    - Zero allegations of offender sexual abuse where it was applicable for the first security staff member to respond to the report to request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
    - Zero allegations of offender sexual abuse where it was applicable for the first security staff member to respond to the report to ensure that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Ensure alleged victim is safe by separation from an alleged abuser.
    - Preserve and protect the crime scene until appropriate steps can be taken to collect any evidence.
    - Request the alleged victim not take any action which may destroy physical evidence.
    - Ensure alleged abuser does not take any action which may destroy physical evidence.
- Documentation review:
    - The auditor reviewed one investigation conducted after an allegation of sexual abuse, during the 12-month review period.
        - The alleged victim stated he could not remember calling the hotline, refused to write a statement, and stated did not want to move forward with an investigation.
- Interviews with a random sample of staff:

	◦ Indicated first responder duties include separation of alleged victim from abuser, notify the OIC, monitor the alleged victim, secured scene to preserve any evidence, ensure offenders involved do not destroy evidence on their person, have victim assessed by medical, and completed a statement of all actions taken. **115.264(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. ◦ Zero allegations of sexual abuse where a non-security staff member was the first responder. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy:* ◦ Restated the language of the provision. • Documentation review: ◦ The auditor observed zero investigations during the selected 12-month period where a non-security staff member was the first responder to an allegation of sexual abuse. **Determination**: The facility meets the standard.

115.265	**Coordinated response**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ *Robeson CRV Standard Operating Procedures A.1410 PREA Sexual Abuse Facility Response Plan, dated 01.26.2026* • Supplemental documentation ◦ NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse, dated 04.26.2024* • Interview with director **Reasoning and analysis**: **115.265(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. • Robeson CRV Standard Operating Procedures A.1410 *PREA Sexual Abuse Facility Response Plan*: ◦ Provided guidelines for offender safety, evidence preservation, reporting, notifications, and investigation of offender-on-offender and staff-on-offender sexual abuse and sexual harassment at RCRVC. ◦ Identified staff who serve in specific response roles. ◦ Outlined response duties of RCRVC staff including: ■ First responder; ■ Officer in Charge (OIC); ■ Medical and mental health practitioners; ■ Investigator; ■ PREA compliance manager (PCM); ■ PREA support person (PSP); ■ Sexual Abuse Response Team (SART); and ■ Center Director. • NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*: ◦ Provided guidelines for initial assessment, evidence collection and preservation, required notifications, and follow-up care. • Interview with director: ◦ Indicated the coordinated response includes the first responder, OIC, investigator, medical and mental health staff, PSP, SART, and facility leadership. **Determination**: The facility meets the standard.

115.266	**Preservation of ability to protect residents from contact with abusers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response • Interview with agency head designee **Reasoning and analysis:** **115.266(a)** • Facility response: ◦ The agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has not entered into or renewed any collective bargaining agreement or other agreement since the last PREA audit. • Interview with agency head designee: ◦ Indicated North Carolina is not a collective bargaining state.

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

115.267	**Agency protection against retaliation**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Form OPA-I22 *Prison Rape Elimination Act (PREA) Retaliation Monitoring – Staff, revised 01.01.2023* ◦ NCDAC Form OPA-I24 *Prison Rape Elimination Act (PREA) Retaliation Monitoring – Persons in Confinement, revised 01.01.2023* ◦ Robeson CRV Standard Operating Procedures A.1410 *PREA Sexual Abuse Facility Response Plan, dated 01.26.2026* • Documentation review • Interview with agency head designee • Interview with director • Interview with staff member charged with monitoring **Reasoning and analysis:** **115.267(a)** • Facility response: ◦ The agency has a policy to protect all offenders and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other offenders or staff. ◦ The agency designates staff member(s) or charges department(s) with monitoring for possible retaliation. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*: ◦ The PSP shall monitor retaliation against the victim and the offender who either report allegations, or cooperate with investigations, of sexual abuse or sexual harassment. ◦ The PCM shall monitor for retaliation against staff that either report or cooperate with investigations, of sexual abuse or sexual harassment. • Robeson CRV Standard Operating Procedures A.1410 *PREA Sexual Abuse Facility Response Plan*: ◦ Included program supervisor designated as a PREA support person (PSP).

115.267(b)

- Interview with agency head designee:
  - Indicated PSP is tasked with monitoring any offender who alleges to be a victim, who reported, or who participates in the investigation. The PCM is tasked with monitoring retaliation for a staff member who may have reported and or been involved in that investigative process.
- Interview with director:
  - Indicated the alleged victim is assigned a PSP who monitors for retaliation for 90 days or more. Adjustments to assignments or bed location would be made if the PSP observes or suspects retaliation.
- Interview with staff member charged with monitoring retaliation:
  - Indicated role as the PSP who is responsible for retaliation monitoring for an offender who reports sexual abuse or cooperates with an investigation.

115.267(c)

- Facility response:
  - The agency/facility monitors the conduct or treatment of offenders or staff who reported sexual abuse and of offenders who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by offenders or staff.
  - The agency/facility monitors for 90 days.
  - The agency/facility acts promptly to remedy any such retaliation.
  - The agency/facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need.
  - Zero incidents of retaliation occurred in the past 12 months.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Continue monitoring for a minimum of 90 days or beyond 90 days if the initial monitoring indicates a continuing need.
- Documentation review:
  - Zero allegations during the 12-month review period where retaliation monitoring was applicable.
- Interview with director:
  - Any retaliation detected or suspected by the PSP would lead to an investigation. Offender who retaliated against another offender would be transferred if there was evidence of retaliation.
- Interview with staff member charged with monitoring retaliation:
  - Indicated monitors offender documentation for signs of retaliation and meets periodically with offender for a status check. PSP reviews all documentation to see if the offender, another offender, or a staff person has been moved and the reason for the move.
  - Indicated would meet weekly initially with the offender and then monthly while monitoring the offender for at least 90 days.

115.267(d)

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

retaliation monitoring of staff by the facility compliance specialist.

115.267(e)

- Interview with director:
  - Indicated any offender or staff who expressed a fear of retaliation after being part of an investigation would be monitored.
  - Indicated PSP would monitor an offender who alleged sexual abuse for 90 days, or longer if necessary. PSP would review documentation for any issues as well as speaking with the offender periodically.

115.267(f)

Auditor is not required to audit this provision.

Determination:

The facility meets the standard.

115.271	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

- RCRVC 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 06.16.2026*
- Supplemental documentation
  - NCDPS Course DPS-571 *PREA: Sexual Abuse and Sexual Harassment Investigations, for the Office of Special Investigations, dated 07.01.2017*
  - *NCDAC Incident Report, 01.21.2026*
  - NCDAC Course Completion Certificate – *PREA: Investigating Sexual Abuse in a Confinement Setting, dated 09.14.2023*
- Documentation review
- Interview with investigative staff
- Interview with director
- Interview with PREA coordinator

Reasoning and analysis:

115.271(a)

- Facility response:
  - The agency/facility has a policy related to criminal and administrative agency investigations.
- NCDAC Policy and Procedure PREA-300 *PREA Official Response and*

Investigations:
    - If an alleged act of sexual abuse or sexual harassment is reported or discovered, an immediate preliminary review shall be conducted by a SAH investigator to determine if the incident meets the standards of PREA.
    - DAC confinement or treatment facilities shall cooperate with non-DAC law enforcement agencies investigating sexual abuse, providing information upon request, unless prohibited by law. Facilities shall endeavor to remain informed about the progress of the investigation.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
    - Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data including video and/or audio recordings; shall interview alleged victims, suspected perpetrators, and witnesses.
    - In order to preserve the integrity of the investigation, one person, or a specific team, shall be designated to investigate an incident, and only that person (or team) shall be involved in the collection of evidence and interviewing of potential witnesses. A thorough investigation is necessary to ensure the potential for prosecution if it is determined that a crime has been committed.
- Documentation review:
    - *NCDAC Incident Report*:
        - The auditor reviewed the one investigation that was a result of a sexual abuse allegation that occurred during the12-month review period.
- Interview with investigative staff:
    - Indicated an investigation begins as soon as possible after the investigator receives the allegation.
    - Indicated an investigation is completed for all allegations including third-party and anonymous reports.

115.271(b)

- NCDAC Course Completion Certificate – *PREA: Investigating Sexual Abuse in a Confinement Setting*:
    - Specialized investigator training completed by the one designated investigator.
- NCDPS Course DPS-571 *PREA: Sexual Abuse and Sexual Harassment Investigations, for the Office of Special Investigations*:
    - Specialized training for the Office of Special Investigations - Sexual Abuse and Sexual Harassment Investigators.
- Interview with investigative staff:
    - Indicated investigator training included steps for conducting an investigation, interview techniques, evidence preservation and collection, determining the investigation outcome based on the preponderance of the evidence, and report writing.
    - Indicated Miranda and Garrity warnings were reviewed.

115.271(c)

- Documentation review:
    - The auditor reviewed documentation for the one investigation that occurred in the 12-month review period.
        - The alleged victim stated he could not remember calling the hotline, refused to write a statement, and stated did not want to move forward with an investigation.

- Interview with investigative staff:
  - Indicated the first step of the investigation is to gather all the facts and evidence collected by responding staff.
  - Indicated additional steps include reviewing video footage, interviewing and obtaining statements from the alleged victim, alleged abuser, any witnesses, and staff involved; collecting any additional physical evidence, and evaluating all evidence collected to determine the investigation outcome.

115.271(d)

- Interview with investigative staff:
  - Indicated the Robeson County Sheriff's Department would conduct all criminal investigation interviews.

115.271(e)

- Interview with investigative staff:
  - Indicated credibility assessment is based on how the individual's statement aligns with other statements and all other evidence collected. The assessment is not based on their status as offender or staff.
  - Indicated a polygraph examination of the alleged victim is never a condition of proceeding with an investigation.

115.271(f)

- Interview with investigative staff:
  - Indicated that staff actions or inactions (if relevant) are included in the investigation report.
  - Indicated the investigation report includes the allegation, staff responses; testimonial, video, and physical evidence, investigator actions, medical assessment, if the offender was sent to the hospital for a forensic exam; if outside law enforcement was contacted when appropriate, and the reasoning for outcome determination based on the *preponderance of the evidence*.

115.271(g)

- Interview with investigative staff:
  - Indicated criminal reports would be documented by the Robeson County Sheriff's Department.

115.271(h)

- Facility response:
  - Substantiated allegations of conduct that appear to be criminal are referred for prosecution.
  - Zero substantiated allegations, that appeared to be criminal, were referred for prosecution since the last PREA audit.
- NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations*:
  - Restated the language of the provision.
- Documentation review:
  - The facility had zero substantiated sexual abuse investigations

	where it was applicable to contact outside law enforcement. • Interview with investigative staff: ◦ Indicated if the allegation includes possible criminal acts it is referred to Robeson County Sheriff's Department. **115.271(i)** • Facility response: ◦ The agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. • NCDAC Policy and Procedure PREA-300 *PREA Official Response and Investigations*: ◦ All written PREA related reports shall be retained in the Offender Population Unified System (OPUS) for as long as the alleged abuser is incarcerated or employed by DAC, plus five years. **115.271(j)** • Interview with investigative staff: ◦ Indicated the investigation is completed even when an alleged abuser, whether offender or staff, is no longer at the facility. **115.271(k)** Auditor is not required to audit this provision. **115.271(l)** • Interview with investigative staff: ◦ Indicated the facility administration would contact the Robeson County Sheriff's Department for investigation updates. • Interview with director: ◦ Indicated would contact the Robeson County Sheriff's Department for criminal investigation updates. • Interview with PREA coordinator: ◦ Indicated facility director and the office of internal affairs investigator would liaise with the criminal investigators to stay updated on case status. **Determination**: The facility meets the standard.

115.272	**Evidentiary standard for administrative investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

- RCRVC 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:

115.272(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.
- Interview with investigative staff:
  - Indicated the *preponderance of the evidence* was the standard used to substantiate allegations of sexual abuse or sexual harassment.

Determination:

The facility meets the standard.

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

- RCRVC 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 06.16.2026*
  - NCDAC Form OPA-I30 *Prison Rape Elimination Act (PREA) Support Services for Persons in Confinement, revised 01.01.2023*
- Supplemental documentation
  - NCDAC Form OPA-I31 *Prison Rape Elimination Act (PREA) Support Services – Status Notification for Persons in Confinement, revised 01.01.2023*
  - *NCDAC Incident Report, dated 01.21.2026*
- Supplemental documentation
- Documentation review
- Interview with investigative staff
- Interview with director

Reasoning and analysis:

115.273(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.
  - Zero administrative investigations of alleged offender sexual abuse that were completed by the agency/facility in the past 12 months. (*The auditor confirmed with the investigator and director there was one investigation completed after an allegation of sexual abuse.*)
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Following an investigation into an offender's allegation that he or she suffered sexual abuse in a facility, the PSP shall inform the offender as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.
  - Notification shall be documented on Form OPA-I30 Support Services.
  - If the DAC did not conduct the investigation, the PSP shall request, through the chain of command, the relevant information from the investigative agency in order to inform the offender.
- NCDAC Form OPA-I30 *Prison Rape Elimination Act (PREA) Support Services for Persons in Confinement*:
  - Asked alleged victim to accept or decline support services.
  - Informed alleged victim of investigation outcome.
- Documentation review:
  - The auditor reviewed documentation for the one investigation after an allegation of sexual abuse.
    - The alleged victim stated he could not remember calling the hotline, refused to write a statement, and stated did not want to move forward with an investigation.
    - Investigator confirmed the offender was told the allegation would be unfounded based on the lack of a statement, cooperation, or any other evidence.
- Interview with investigative staff:
  - Indicated the investigation outcome notification would generally be provided by the PSP to the alleged victim.
- Interview with director:
  - Indicated the investigation outcome notification would usually be provided to the alleged victim and documented by the PSP.

115.273(b)

- Facility response:
  - N/A for "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." (*The auditor confirmed the agency and facility would request relevant information from the Robeson County Sheriff's Department to inform the offender of the outcome of any external investigation.*)
  - Zero investigations of alleged offender sexual abuse in the facility that were completed by an outside agency in the past 12 months.
- Documentation review:
  - The auditor reviewed zero administrative investigations after a sexual abuse allegation where it was applicable for the facility to contact outside law enforcement.

115.273(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 zero substantiated or unsubstantiated complaints (i.e., not unfounded) of sexual abuse against staff in an agency facility in the previous 12 months.
- NCDAC Form OPA-I31 *Prison Rape Elimination Act (PREA) Support Services – Status Notification for Persons in Confinement*:
  - Listed the required staff status notifications made to an offender victim if applicable.
- Documentation review:
  - Zero investigations, conducted during the 12-month review period, where a staff status notification to the alleged victim was applicable.

115.273(d)

- Facility response:
  - Following an offender's allegation that he or she has been sexually abused by another offender in an agency facility, the agency subsequently informs the alleged victim whenever:
    - The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or
    - The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.
- NCDAC Form OPA-I31 *Prison Rape Elimination Act (PREA) Support Services – Status Notification for Persons in Confinement*:
  - Listed the required alleged abuser status notifications made to the offender victim, if applicable.
- Documentation review:
  - Zero investigations, conducted during the 12-month review period, where offender status notifications for an indictment or conviction were relevant.

115.273(e)

- Facility response:
  - The agency has a policy that all notifications to offenders described under this standard are documented.
  - In the past 12 months, zero notifications to offenders that were provided pursuant to this standard. *(The investigator confirmed the offender was told the allegation would be unfounded based on the lack of a statement, cooperation, or any other evidence.*)
  - In the past 12 months, zero notifications to offenders that were documented. (The i*nvestigator documented offender's lack of cooperation and refusal to move forward with the investigation.)*
- NCDAC Policy and Procedure PREA-300 *PREA Official Response and*

Investigations:
- All such notifications or attempted notifications shall be documented.

115.273(f)

Auditor is not required to audit this provision.

Determination:

The facility meets the standard.

115.276	Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- RCRVC PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - NCDAC Policy and Procedure J.0100 *Conduct of Employees, dated 06.03.2024*
- Supplemental documentation
  - State Human Resources Manual – *Disciplinary Action Policy, dated 10.17.2024*

Reasoning and analysis:

115.276(a)

- Facility response:
  - Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.
- NCDAC Policy and Procedure J.0100 *Conduct of Employees*:
  - An employee who engages in sexual misconduct or harassment with an offender will be subject to disciplinary action up to and including dismissal.

115.276(b)

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

- State Human Resources Manual – *Disciplinary Action Policy*:
  - Stated an employee may be dismissed for causes relating to any form of unacceptable personal conduct.

115.276(c)

- Facility response:
  - The disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.
  - In the past 12 months, zero staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse).
- NCDAC Policy and Procedure Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.

115.276(d)

- Facility response:
  - All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies.
  - In the past 12 months, zero staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.

Determination:

The facility meets the standard.

115.277	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*

- RCRVC Memorandum *Re: Standard 115.227(a)-3, dated 08.19.2026*
- RCRVC Memorandum *Re: Standard 115.227(b)-1, dated 08.19.2026*

- Documentation review
- Interview with director

Reasoning and analysis:

115.277(a)

- Facility response:
  - Agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies.
  - Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with offenders.
  - In the past 12 months, zero incidents where contractors or volunteers engaged in sexual abuse of offenders.
  - Zero incidents were law enforcement needed to be contacted.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.
- RCRVC Memorandum *Re: Standard 115.227(a)-3*
  - Stated: “Robeson CRV has had no contractors or volunteers that have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of residents.”
- Documentation review:
  - The auditor observed zero allegations of sexual abuse by a facility contractor or volunteer during the previous 12 months.

115.277(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.
- RCRVC Memorandum *Re: Standard 115.227(b)-1*:
  - Stated: “Robeson CRV would take appropriate remedial measures and would consider whether to prohibit further contact with residents in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.”
- Interview with director:
  - Indicated immediate removal of volunteer or contract person from the facility. An investigation would be initiated and the Robeson County Sheriff’s Department would be contacted if the incident appeared criminal in nature.

Determination:

The facility meets the standard.

115.278	Disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC 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 01.14.2026* ◦ Robeson CRV Standard Operating Procedure A.4200 *Sanctions/Non-Compliance, dated 01.26.2026* • Supplemental documentation ◦ NCDAC Policy and Procedure S.8800 *Sexual Offense Accountability and Responsibility, dated 09.18.2023* ◦ NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse, dated 04.2024* • Documentation review • Interview with director • Interview with medical staff **Reasoning and analysis**: **115.278(a)** • Facility response: ◦ Offenders are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that an offender engaged in offender-on-offender sexual abuse. ◦ Offenders are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for offender-on-offender sexual abuse. ◦ In the past 12 months, zero administrative findings of offender-on-offender sexual abuse that have occurred at the facility. ◦ In the past 12 months, zero criminal findings of guilt for offender-on-offender sexual abuse that have occurred at the facility. • NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy:* ◦ Restated the language of the provision. **115.278(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 director: ◦ Indicated a substantiated investigation outcome would lead to the transfer of the abuser to a prison and any subsequent disciplinary process.

115.278(c)

- Interview with director:
  - Indicated not applicable to the CRV facility. Any disciplinary process would be held at the prison where the abuser was transferred.

115.278(d)

- Facility response:
  - The facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse.
  - The facility considers whether to require the offending offender to participate in such interventions as a condition of access to programming or other benefits.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - A mental health evaluation shall be conducted after a substantiated incident and the offender shall be offered treatment when deemed appropriate by mental health practitioners. If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending offender to participate in such interventions as a condition of access to programming or other benefits.
- NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*:
  - Once an investigation has been completed and an inmate has been determined to be an inmate-on-inmate abuser, within 60 days, a mental health clinician will attempt to conduct an evaluation and offer treatment when deemed appropriate.
- NCDAC Policy and Procedure S.8800 *Sexual Offense Accountability and Responsibility:*
  - Treatment program to address inappropriate and deviant sexual behavior.
- Interview with medical staff:
  - Indicated counseling and treatment program would be offered to an abusing offender at the prison he was transferred to.

115.278(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 observed zero instances, during the 12-month review period, where an offender disciplinary action was applicable for sexual contact with staff.

115.278(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.

115.278(g)

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

Determination:

The facility meets the standard.

115.282	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse, dated 04.26.2024*

- Interview with medical staff
- Interview with a random selection of staff

Reasoning and analysis:

115.282(a)

- Facility response:
  - Offender victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services.
  - The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - If an alleged act of sexual abuse has occurred and there may be forensic medical evidence, the offender may need medical assistance, or other circumstances dictate, arrangements shall be promptly made to have the alleged offender-victim examined by medical services.
- NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*:
  - It is the policy of the Division of Adult Correction to provide to all offenders who allege sexual abuse a prompt medical evaluation and to offer a referral to Mental Health Services.
  - This protocol is not intended to be applicable to every clinical situation which practitioners may encounter and is not meant as a substitute for individual judgment and professional expertise.
- Interview with medical staff:
  - Indicated offender victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services. Medical staff completes an initial assessment, triages any life-threatening injuries, and preserves evidence on offender. Nursing protocols for sexual abuse are followed, and where appropriate, the offender is sent to the hospital for the forensic evaluation as quickly as custody staff or an ambulance can transport the offender.
  - Indicated treatment provided is determined according to medical policies and the medical staff's professional judgement, training, and experience.

115.282(b)

- Interview with a random selection of staff:
  - Indicated separating the victim from all other offenders. Securing the scene to protect evidence. Requesting victim not to destroy any evidence on their person. Notified the OIC. Have the victim assessed in medical. Completed a statement of events and actions taken which is then submitted to the OIC.

115.282(c)

- Facility response:
  - Offender victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

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

115.282(d)

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

Determination:

The facility meets the standard.

115.283	**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: • RCRVC PAQ ◦ Facility response ◦ NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022* ◦ NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse, dated 04.26.2024* ◦ RCRVC Memorandum *Re: Standard 115.283(d)-1, dated 08.19.2026* • Documentation review • Interview with medical staff **Reasoning and analysis**: **115.283(a)** • Facility response ◦ The facility offers medical and mental health evaluation and, as

appropriate, treatment to all offenders who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.

- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Medical Services will follow medical protocol, which includes provisions for examination, documentation, and transport to the local emergency department when appropriate, where the following will occur, collection of forensic evidence, testing for sexually transmitted diseases, counseling, and prophylactic treatment. Medical Services will ensure that the offender receives medical follow-up and is offered a referral for mental health services.
- NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*:
  - NCDAC will provide all offenders who allege sexual abuse a prompt medical evaluation and to offer a referral to mental health services.

115.283(b)

- Interview with medical staff:
  - Indicated victimized offenders receive an initial assessment and treatment for any life-threatening injuries by facility medical staff. Medical staff document visible injuries and preserve evidence on the offender. The offender is sent to the hospital for a forensic exam if medical protocol criteria are met. A mental health referral is made and follow-up care is provided based on provider orders and hospital discharge summary, if applicable.

115.283(c)

- Interview with medical staff:
  - Indicated that medical services provided are consistent with the community level of care.

115.283(d)

- N/A. (*Facility does not house female offenders*.)
- RCRVC Memorandum *Re: Standard 115.283(d)-1*:
  - Stated: “Robeson CRV does not house female offenders.”
- Documentation review:
  - Auditor noted zero transgender men from facility information received.

115.283(e)

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

115.283(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. **115.283(g)** • Facility response: ◦ Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. • NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*: ◦ All care for sexual abuse will be provided at no cost. **115.283(h)** • Facility response: ◦ The facility attempts to conduct a mental health evaluation of all known offender-on-offender abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners. • NCDAC Clinical Practice Guideline CPG-18 *Sexual Abuse*: ◦ Once an investigation has been completed and an offender has been determined to be an abuser, within 60 days, a mental health provider will attempt to conduct an evaluation and offer treatment when deemed appropriate. • Interview with medical staff: ◦ A mental health referral would be made for known offender-on-offender abusers. **Determination**: The facility meets the standard.

115.286	**Sexual abuse incident reviews**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC 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* ◦ RCRVC Memorandum *Re: Standard 115.286(a)-1, dated 08.19.2026* • Documentation review • Interview with director • Interview with incident review team member

Reasoning and analysis:

115.286(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, zero 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).
- RCRVC Memorandum *Re: Standard 115.286(a)-1*:
  - Stated: “At this time there are no completed investigations requiring a post incident review.”

115.286(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, zero criminal and/or administrative investigations where a subsequent sexual abuse incident review within 30 days was applicable.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - The PIR shall be completed by the facility within 30 days of the conclusion of the sexual abuse investigation.
- Documentation review:
  - The auditor reviewed documentation for the investigation conducted after the one unfounded allegation of sexual abuse during the 12-month review period.
  - There were zero investigations, during the 12-month review period, where a subsequent sexual abuse incident review was applicable.

115.286(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 director:
  - Indicated the incident review team would include administrative staff, the facility compliance specialist, and the investigator. Other facility staff would be included based on the location of the incident.

115.286(d)

- Facility response:
  - The facility prepares a report of its findings from sexual abuse incident reviews including, but not necessarily limited to, determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section and any recommendations for improvement, and submits such report to the facility head and PREA compliance manager.
- NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Restated the language of the provision.
- Form OPA-I10 *Post Incident Review (PIR)*:
  - Form to document consideration of all six requirements of the provision.
- Interview with director:
  - Indicated the PIR team would consider if the allegation or incident was motivated by group dynamics or gang affiliation.
  - Indicated the PIR team considers any factors that led to the incident, staff locations and responses, and any blind spots or isolated areas that were relevant.
- Interview with incident review team member:
  - Indicated the PIR team considers if the incident was motivated by group dynamics or gang affiliation, staffing levels and placement, any blind spots, and if monitoring technologies need to be adjusted.

115.286(e)

- Facility response:
  - The facility implements the recommendations for improvement or documents its reasons for not doing so.
- Form OPA-I10 *Post Incident Review (PIR)*:
  - Contained section for actions taken and/or additional comments.

Determination:

The facility meets the standard.

115.287	**Data collection**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • RCRVC 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 2023-2024 rev2, undated* ◦ NCDAC Manual *OPUS: Incident Management System (Web based), undated* ◦ The Center for Women *PREA Facility Audit Report: Final, dated 07.21.2025*

Reasoning and analysis:

115.287(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.

115.287(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 2023-2024 rev2*:
  - 2024 aggregated data by incident type and investigation outcome.
  - 2023 aggregated data by incident type and investigation outcome.
  - Comparison charts for 2022, 2023, and 2024 for:
    - Total allegations;
    - Number of substantiated cases; and
    - Substantiation rate.

115.287(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 F.3400 *Offender Sexual Abuse and Sexual Harassment Policy*:
  - Accurate, uniform data for every allegation of sexual abuse shall be documented in OPUS by all facilities.
- NCDAC Manual *OPUS: Incident Management System (Web based)*:
  - Instructions for capturing accurate, uniform data for allegations of sexual abuse and sexual harassment.

115.287(d)

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

115.287(e)

- Facility response:
  - The agency obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its offenders.
  - The data from private facilities complies with SSV reporting regarding content.
- 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.

115.287(f)

- Facility response:
  - The agency provided the Department of Justice (DOJ) with data from the previous calendar year upon request.

Determination:

The facility meets the standard.

115.288	Data review for corrective action

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- RCRVC PAQ
  - Facility response
- Supplemental documentation:
  - 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 08.22.2026*
  - *NCDAC Prison Rape Elimination Act (PREA) of 2003, Sexual Abuse Annual Report 2023-2024 rev2, undated*
- Interview with agency head designee
- Interview with PREA coordinator

Reasoning and analysis:

115.288(a)

- Facility response:
  - 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 2023-2024 rev2:*
  - Described corrective actions taken at each facility that had a substantiated sexual abuse allegation in 2023 and 2024.
- 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.

115.288(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 2023-2024 rev2*:
  - Included a comparison of data and corrective actions from current year and previous year.
  - Described departmental accomplishments in prevention, response, training and education.

115.288(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 North Carolina Department of Adult Correction approves annual reports.

115.288(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.

115.289	Data storage, publication, and destruction

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

- RCRVC PAQ
  - Facility response
  - NCDAC Policy and Procedure F.3400 *Offender Sexual Abuse and Sexual Harassment Policy, dated 06.09.2022*
  - NCDAC *Prison Rape Elimination Act (PREA) of 2003, Sexual Abuse Annual Report 2023-2024, undated*
- Supplement documentation
  - *www.dac.nc.gov/information-and-services/prea-office, accessed 08.22.2026*
- Site review
- Interview with PREA coordinator

Reasoning and analysis:

115.289(a)

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

115.289(b)

- Facility response:

	◦ Agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website. • *www.dac.nc.gov/information-and-services/prea-office* ◦ Contained links to annual reports with aggregated sexual abuse data from its facilities. ◦ Contained links to facility PREA audit final reports. **115.289(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 2023-2024*: ◦ Aggregated sexual abuse data did not contain personal identifiers. **115.289(d)** • *www.dac.nc.gov/information-and-services/prea-office*: ◦ Sexual abuse annual reports for 2015-2024; and ◦ Facility PREA audit reports for 2014-2026. **Determination**: The facility meets the standard.

115.401	**Frequency and scope of audits**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • *www.dac.nc.gov/information-and-services/prea-office, accessed 08.22.2026* • Document review • Site review **Reasoning and analysis**: **115.401(a)**

- *www.dac.nc.gov/information-and-services/prea-office*
    - Contained links to facility PREA audit reports for 2014-2026.
    - Facilities were audited once every three-year cycle.
    - The agency met this standard during cycle IV.

115.401(b)

- *www.dac.nc.gov/information-and-services/prea-office*
    - The agency met this provision in the prior year.
    - During audit cycle IV:
        - 17 facilities were audited in year 1.
        - 20 facilities were audited in year 2.
        - 22 facilities were audited in year 3.

115.401(h)

- The auditor was provided with full access to all areas of the audited facility.

115.401(i)

- The auditor requested and received copies of all relevant documents and information.

115.401(m)

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

115.401(n)

- Document review:
    - The facility posted the Notice of Audit in English and Spanish throughout the facility which the auditor observed during the onsite portion of the audit.
    - Notice of Audit included:
        - Dates for the onsite portion of the facility’s PREA audit;
        - A confidentiality statement;
        - Auditor’s name; and
        - Auditor's mailing address.
- Site review:
    - The auditor verified that Notices of Audit were posted in housing units and other high traffic areas for offenders and staff.
    - Through conversations with the auditor, offenders indicated that the Notice of Audit had been posted for several weeks.
    - Offenders stated they had access to locked mail boxes to send mail so letters did not have to be given to staff.

Determination:

The facility meets the standard.

115.403	Audit contents and findings

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: • *www.dac.nc.gov/information-and-services/prea-office, accessed 08.22.2026* **Reasoning and analysis**: **115.403(f)** • *www.dac.nc.gov/information-and-services/prea-office* ◦ During audit cycle IV: ■ Final reports were posted for 17 facilities audited in Year 1. ■ Final reports were posted for 20 facilities audited in Year 2. ■ Final reports were posted for 22 facilities audited in Year 3. **Determination**: The facility meets the standard.

Appendix: Provision Findings		
115.211 (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
115.211 (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 community confinement facilities?	yes
115.212 (a)	**Contracting with other entities for the confinement of residents**	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and 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 residents.)	yes
115.212 (b)	**Contracting with other entities for the confinement of residents**	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure 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 residents.)	yes
115.212 (c)	**Contracting with other entities for the confinement of residents**	
	If the agency has entered into a contract with an entity that fails to comply with the PREA standards, did the agency do so only in	na

	emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	
	In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	na
115.213 (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 residents against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The physical layout of each facility?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the resident population?	yes
	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
115.213 (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? (NA if no deviations from staffing plan.)	na
115.213 (c)	**Supervision and monitoring**	
	In the past 12 months, has the facility 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 assessed, determined, and documented whether adjustments are needed to prevailing	yes

	staffing patterns?	
	In the past 12 months, has the facility 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 assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels?	yes
115.215 (a)	**Limits to cross-gender viewing and searches**	
	Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.215 (b)	**Limits to cross-gender viewing and searches**	
	Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.215 (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 residents?	yes
115.215 (d)	**Limits to cross-gender viewing and searches**	
	Does the facility have policies that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enable residents to shower,	yes

	perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	
	Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?	yes
115.215 (e)	**Limits to cross-gender viewing and searches**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.215 (f)	**Limits to cross-gender viewing and searches**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.216 (a)	**Residents with disabilities and residents who are limited English proficient**	
	Does the agency take appropriate steps to ensure that residents 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: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents	yes

	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: Residents who have speech disabilities?	
	Does the agency take appropriate steps to ensure that residents 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 residents 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 residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes
115.216 (b)	**Residents with disabilities and residents 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 residents 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
115.216 (c)	**Residents with disabilities and residents who are limited English proficient**	
	Does the agency always refrain from relying on resident	yes

	interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations?	
115.217 (a)	**Hiring and promotion decisions**	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents 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 residents 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 residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents 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 the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
115.217 (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	yes

	contact with residents?	
	Does the agency consider any incidents of sexual harassment in determining to enlist the services of any contractor who may have contact with residents?	yes
115.217 (c)	**Hiring and promotion decisions**	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, 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
115.217 (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 residents?	yes
115.217 (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 residents or have in place a system for otherwise capturing such information for current employees?	yes
115.217 (f)	**Hiring and promotion decisions**	
	Does the agency ask all applicants and employees who may have contact with residents 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 residents 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
115.217 (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
115.217 (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
115.218 (a)	**Upgrades to facilities and technology**	
	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 residents 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
115.218 (b)	**Upgrades to facilities and technology**	
	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 residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)	na
115.221 (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	yes

	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.)	
115.221 (b)	**Evidence protocol and forensic medical examinations**	
	Is this protocol developmentally appropriate for youth where applicable? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (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
115.221 (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	yes

	services a qualified staff member from a community-based organization, or a qualified agency staff member?	
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.221 (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
115.221 (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
115.221 (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 attempts to make a victim advocate from a rape crisis center available to victims per 115.221(d) above).	yes
115.222 (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
115.222	**Policies to ensure referrals of allegations for investigations**	

(b)		
	Does the agency have a policy 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
115.222 (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 conducting criminal investigations. See 115.221(a).)	na
115.231 (a)	**Employee training**	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents 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 residents on: Residents’ right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The right of residents 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 residents on: The dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?	yes

	Does the agency train all employees who may have contact with residents 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 residents on: How to avoid inappropriate relationships with residents?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.231 (b)	**Employee training**	
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.231 (c)	**Employee training**	
	Have all current employees who may have contact with residents 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
115.231 (d)	**Employee training**	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.232 (a)	**Volunteer and contractor training**	

	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.232 (b)	**Volunteer and contractor training**	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.232 (c)	**Volunteer and contractor training**	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.233 (a)	**Resident education**	
	During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?	yes
	During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?	yes
115.233 (b)	**Resident education**	
	Does the agency provide refresher information whenever a resident is transferred to a different facility?	yes
115.233	**Resident education**	

(c)		
	Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills?	yes
115.233 (d)	**Resident education**	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.233 (e)	**Resident education**	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.234 (a)	**Specialized training: Investigations**	
	In addition to the general training provided to all employees pursuant to §115.231, 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 criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
115.234 (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 criminal or administrative sexual abuse investigations. See 115.221(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 criminal or administrative sexual abuse investigations. See 115.221(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 criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
115.234 (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 criminal or administrative sexual abuse investigations. See 115.221(a).)	yes
115.235 (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
115.235 (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 does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.)	na
115.235 (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
115.235 (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 §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	yes
115.241 (a)	**Screening for risk of victimization and abusiveness**	
	Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
	Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes

115.241 (b)	**Screening for risk of victimization and abusiveness**	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.241 (c)	**Screening for risk of victimization and abusiveness**	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.241 (d)	**Screening for risk of victimization and abusiveness**	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident 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 residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following	yes

	criteria to assess residents for risk of sexual victimization: The resident’s own perception of vulnerability?	
115.241 (e)	**Screening for risk of victimization and abusiveness**	
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes
115.241 (f)	**Screening for risk of victimization and abusiveness**	
	Within a set time period not more than 30 days from the resident’s arrival at the facility, does the facility reassess the resident’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.241 (g)	**Screening for risk of victimization and abusiveness**	
	Does the facility reassess a resident’s risk level when warranted due to a: Referral?	yes
	Does the facility reassess a resident’s risk level when warranted due to a: Request?	yes
	Does the facility reassess a resident’s risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess a resident’s risk level when warranted due to a: Receipt of additional information that bears on the resident’s risk of sexual victimization or abusiveness?	yes
115.241 (h)	**Screening for risk of victimization and abusiveness**	
	Is it the case that residents 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

115.241 (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 resident’s detriment by staff or other residents?	yes
115.242 (a)	**Use of screening information**	
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.242 (b)	**Use of screening information**	
	Does the agency make individualized determinations about how to ensure the safety of each resident?	yes
115.242 (c)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.242	**Use of screening information**	

(d)		
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.242 (e)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.242 (f)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.251 (a)	**Resident reporting**	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.251 (b)	**Resident reporting**	
	Does the agency also provide at least one way for residents 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 resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
115.251 (c)	**Resident reporting**	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from	yes

	third parties?	
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.251 (d)	**Resident reporting**	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.252 (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 resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.252 (b)	**Exhaustion of administrative remedies**	
	Does the agency permit residents 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 a resident 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
115.252 (c)	**Exhaustion of administrative remedies**	
	Does the agency ensure that: a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.252	**Exhaustion of administrative remedies**	

(d)		
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident 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 resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.252 (e)	**Exhaustion of administrative remedies**	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents 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 residents? (If a third party files such a request on behalf of a resident, 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 resident declines to have the request processed on his or her behalf, does the agency document the resident’s decision? (N/A if agency is exempt from this standard.)	yes
115.252 (f)	**Exhaustion of administrative remedies**	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is	yes

	exempt from this standard.)	
	After receiving an emergency grievance alleging a resident 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 resident 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
115.252 (g)	**Exhaustion of administrative remedies**	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.253 (a)	**Resident access to outside confidential support services**	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents 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 enable reasonable communication between residents and these organizations, in as confidential a manner as possible?	yes

115.253 (b)	**Resident access to outside confidential support services**	
	Does the facility inform residents, 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
115.253 (c)	**Resident 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 residents 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
115.254 (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 a resident?	yes
115.261 (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 residents 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
115.261 (b)	**Staff and agency reporting duties**	

	Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.261 (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 residents of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.261 (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
115.261 (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
115.262 (a)	**Agency protection duties**	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.263 (a)	**Reporting to other confinement facilities**	
	Upon receiving an allegation that a resident 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
115.263 (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
115.263 (c)	**Reporting to other confinement facilities**	
	Does the agency document that it has provided such notification?	yes
115.263 (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
115.264 (a)	**Staff first responder duties**	
	Upon learning of an allegation that a resident 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 a resident 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 a resident 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 a resident 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
115.264 (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	yes

	actions that could destroy physical evidence, and then notify security staff?	
115.265 (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
115.266 (a)	**Preservation of ability to protect residents from contact with abusers**	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.267 (a)	**Agency protection against retaliation**	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.267 (b)	**Agency protection against retaliation**	
	Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.267 (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	yes

	of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	
	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 residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency:4. Monitor resident 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 resident 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 reassignment of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.267 (d)	**Agency protection against retaliation**	
	In the case of residents, does such monitoring also include periodic status checks?	yes

115.267 (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
115.271 (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 115.221(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/ facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
115.271 (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 115.234?	yes
115.271 (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
115.271 (d)	**Criminal and administrative agency investigations**	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.271 (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 resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.271 (f)	**Criminal and administrative agency investigations**	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.271 (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
115.271 (h)	**Criminal and administrative agency investigations**	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.271 (i)	**Criminal and administrative agency investigations**	
	Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.271 (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 facility or agency does not provide a basis for terminating an investigation?	yes

115.271 (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 any form of administrative or criminal sexual abuse investigations. See 115.221(a).)	yes
115.272 (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
115.273 (a)	**Reporting to residents**	
	Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.273 (b)	**Reporting to residents**	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.273 (c)	**Reporting to residents**	
	Following a resident'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 posted within the resident's unit?	yes
	Following a resident'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	yes

	resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.273 (d)	**Reporting to residents**	
	Following a resident's allegation that he or she has been sexually abused by another resident, 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 a resident's allegation that he or she has been sexually abused by another resident, 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
115.273 (e)	**Reporting to residents**	
	Does the agency document all such notifications or attempted notifications?	yes
115.276 (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
115.276	**Disciplinary sanctions for staff**	

(b)		
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.276 (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
115.276 (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
115.277 (a)	**Corrective action for contractors and volunteers**	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	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
115.277 (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 residents?	yes

115.278 (a)	**Disciplinary sanctions for residents**	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, are residents subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.278 (b)	**Disciplinary sanctions for residents**	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
115.278 (c)	**Disciplinary sanctions for residents**	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.278 (d)	**Disciplinary sanctions for residents**	
	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 resident to participate in such interventions as a condition of access to programming and other benefits?	yes
115.278 (e)	**Disciplinary sanctions for residents**	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.278 (f)	**Disciplinary sanctions for residents**	
	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

115.278 (g)	**Disciplinary sanctions for residents**	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.282 (a)	**Access to emergency medical and mental health services**	
	Do resident 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
115.282 (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 § 115.262?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.282 (c)	**Access to emergency medical and mental health services**	
	Are resident 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
115.282 (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
115.283 (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 residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile	yes

	facility?	
115.283 (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
115.283 (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
115.283 (d)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are resident 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 residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.283 (e)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If pregnancy results from the conduct described in paragraph § 115.283(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 residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.283 (f)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.283 (g)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are treatment services provided to the victim without financial	yes

	cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	
115.283 (h)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.286 (a)	**Sexual abuse incident reviews**	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.286 (b)	**Sexual abuse incident reviews**	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.286 (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
115.286 (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	yes

	should be deployed or augmented to supplement supervision by staff?	
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.286 (e)	**Sexual abuse incident reviews**	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.287 (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
115.287 (b)	**Data collection**	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.287 (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
115.287 (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
115.287 (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 residents? (N/A if agency does not contract for the confinement of its residents.)	yes

115.287 (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
115.288 (a)	**Data review for corrective action**	
	Does the agency review data collected and aggregated pursuant to § 115.287 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 § 115.287 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 § 115.287 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
115.288 (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
115.288 (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
115.288 (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	yes

	and security of a facility?	
115.289 (a)	**Data storage, publication, and destruction**	
	Does the agency ensure that data collected pursuant to § 115.287 are securely retained?	yes
115.289 (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
115.289 (c)	**Data storage, publication, and destruction**	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.289 (d)	**Data storage, publication, and destruction**	
	Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	**Frequency and scope of audits**	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	**Frequency and scope of audits**	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	no
	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.)	yes

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