

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: 2/25/17

Auditor Information			
Auditor name: Dorothy Xanos			
Address: 914 Gasparilla Dr. NE, St. Petersburg, Florida 33702			
Email: dorothy.xanos@us.g4s.com			
Telephone number: (813) 918-1088			
Date of facility visit: January 17-18, 2017			
Facility Information			
Facility name: Caswell Correctional Center			
Facility physical address: 444 County Home Road, Blanch, NC 27212			
Facility mailing address: (if different from above) Click here to enter text.			
Facility telephone number: (336) 694-1583			
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Mark Carver			
Number of staff assigned to the facility in the last 12 months: 176			
Designed facility capacity: 484			
Current population of facility: 470			
Facility security levels/inmate custody levels: Medium Custody			
Age range of the population: 20+			
Name of PREA Compliance Manager: Joseph Hoover		Title: Assistant Superintendent of Custody/Operations	
Email address: joseph.hoover@ncdps.gov		Telephone number: (336) 694-4531	
Agency Information			
Name of agency: North Carolina Department of Public Safety			
Governing authority or parent agency: (if applicable) Click here to enter text.			
Physical address: 512 N. Salisbury St., Raleigh, North Carolina 27604			
Mailing address: (if different from above) 4201 Mail Service Center, Raleigh, NC 27699-4201			
Telephone number: (919) 825-2754			
Agency Chief Executive Officer			
Name: Erik A. Hooks		Title: Secretary, NCDPS	
Email address: erik.hooks@ncdps.gov		Telephone number: (919) 733-2126	
Agency-Wide PREA Coordinator			
Name: Charlotte Jordan-Williams		Title: PREA Director	
Email address: charlotte.williams@ncdps.gov		Telephone number: (919) 825-2739	

AUDIT FINDINGS

NARRATIVE

Caswell Correctional Center (Caswell CC) is a medium security adult male prison with a designed capacity of 484 inmate beds and governed by the North Carolina Department of Public Safety (NCDPS). The facility was one of sixty-one field unit prisons renovated or built during the late 1930's to house inmates who worked on building roads and had a farm to supply the prison kitchen. In 1974, Caswell CC was converted into a medium security prison housing 118 inmates. Since that time, additional inmate dormitories were added to the facility. The mission of the North Carolina Prison Administration is to protect the public by providing a safe, secure, and humane environment and offering services that prepare inmates for transition into society. There were four hundred and seventy (470) inmates at the facility at the time of the on-site visit and no youthful inmates.

Caswell CC is staffed with one hundred and seventy-six (176) full-time and part-time employees including medical, mental health staff, and seventy-two (72) volunteers providing religious services to inmates. The staff consisted of: Correctional Facility Superintendent II; Correctional Assistant Superintendent II; Correctional Programs Director I; (3) Correctional Programs Supervisor; (5) Correctional Lieutenant; (10) Correctional Sergeant II; (6) Lead Correctional Officer II; (101) Correctional Officer II; (4) Correctional Case Manager; Correction Enterprise Supervisor II; (9) other staff (accounting, administrative, food service, maintenance and technology) and staff vacancies. Additionally, there is a psychological program manager that provides mental health services to the inmates at the facility.

The medical staff full-time and part-time providing services at the facility consisted of: Registered Nurse Supervisor, five (5) Professional Nurses, a Licensed Practical Nurse and two (2) other support staff (health assistant and medical records), licensed nurses providing nursing services on-site sixteen (16) hours a day, five (5) days a week and an on-call physician. All inmates are seen by a physician upon arrival to the facility. Additionally, all nurses are supervised by an on-site registered nurse supervisor who is responsible for coordination of the medical services. The medical staff provides medical care to include: completing the initial intake assessment, routine and additional lab work as ordered, STD testing and treatment as indicated, updating immunization records, seasonal flu vaccinations, routine eye exams (optical lab), dietary services and referrals, administration of medications/treatments as prescribed, assessments of inmate injuries and treatment as required, medical assessments and monitoring with any restraint or segregation, assessments of somatic health complaints with treatment as indicated, develop treatment plans and provide medical discharge plans. The dental staff consisted of a dentist and a dental assistant who provides dental services located in a separate building that has two dental chairs and dental equipment. Dental services are provided Monday through Friday consisting of dental care, cleaning, education, and treatment fillings to extractions. All inmates at this facility are seen by the dental staff three (3) days a week. Another facility transports inmates for the other two (2) days to be seen by the dental staff. All inmates are seen by the dentist at least annually for a wellness check. Emergency services and forensic examinations are conducted at Annie Penn Hospital.

Piedmont Community College's staff works with the facility to provide vocational courses including welding, HVAC technology, horticulture and industrial maintenance technology. The inmates are given an opportunity to learn a trade while at the facility. Additionally, inmates with less than a high school education may participate in GED preparatory classes or remedial education. In 1997, Piedmont Community College began to provide instruction in electrical and pneumatic tool repair. The inmates who complete this program are provided an opportunity to work in a small tool repair program, repairing tools for the Department of Transportation and other public agencies. Another opportunity given to the inmates is to participate in bible study and worship services.

DESCRIPTION OF FACILITY CHARACTERISTICS

Caswell Correctional Center (Caswell CC) is a medium security adult male prison located in a rural area of Caswell County in Blanch, North Carolina. This facility was one of fifty-one county prisons for which the state assumed responsibility with the passage of the Conner Bill in 1931. The facility was one of sixty-one field unit prisons renovated or built during the late 1930's to house inmates who worked on building roads and had a farm to supply the prison kitchen. In the 1950s, a new dining hall was built at the facility. Inmates initially were housed as misdemeanants until 1968, when medium and minimum custody inmates were housed all together. In 1974, the facility was converted into a medium security prison housing one hundred and eighteen (118) inmates with an additional triple-bunking, the population rose to one hundred and sixty-eight (168). In the 1970s, inmates were supervised by correction engineers and built a recreation building and a segregation unit with twenty-four (24) single cells. In January 1989, an addition was funded by the legislature as part of the Emergency Prison Facilities Development program to build a one hundred and four (104) bed inmate dormitory and support buildings including a programs building with classroom space and a recreation building. In July 1990, a prison construction program was approved to build two (2) one hundred and four (104) bed inmate dormitories, an administration building, operations center and dining hall. Once the gatehouse and motion detection system was installed, the security towers were removed. Upon completion of these additions, the staff increased to one hundred and fifty-four (154) and the inmate population increased to a maximum of four hundred and eighty-four (484).

The prison is comprised of thirteen (13) buildings surrounded by perimeter security fence. The administrative building has six (6) offices and break room area; K house is the master control and sally port; visitation/orientation and inmate receiving building and in the back of the building are two (2) offices, sewing room, and storage area with inmate shoes and a large area with an office and inmate clothing; recreation building with two (2) offices and multipurpose room (church services); dental building with two (2) dental chairs and dental equipment; vocational building with electrical, small tools, scanner, welding area with twelve (12) welding booths, and an air conditioning classroom; food service building with one (1) office, kitchen, dining and storage area and medical building. There are three (3) housing buildings with fourteen (14) housing units containing a day room, open bay area with bunk beds and shower/bathroom area. Also, there is a restrictive housing unit with twenty-four (24) single cells.

SUMMARY OF AUDIT FINDINGS

The notification of the on-site audit was posted by December 6, 2016, six weeks prior to the date of the on-site audit. The posting of the notices was verified during the tour and verified by photographs received on the USB flash drive from the NCDPS PREA Coordinator. The photographs indicated notices were posted in various locations throughout the facility including the administration area, master control/sally port, operations center, dining area, medical and units/dormitories. This auditor did not receive any communications from the staff or the inmates as a result of the posted notices. The Pre-Audit Questionnaire, policies, procedures, and supporting documentation were received by December 20, 2016. The documentation was uploaded to a USB flash drive that was organized and easy to navigate. The initial review revealed the need for additional information in regard to the Pre-Audit Questionnaire and supporting documentation which did not sufficiently address a number of the standards. After a discussion with the Correctional Assistant Superintendent II and providing a list of noted concerns, the Correctional Assistant Superintendent II sent some documentation prior to arrival to the facility. Also a number of supporting documents were provided during the on-site visit. Specific corrective actions during the on-site visit taken to address some of the deficiencies are summarized in this report under the related standards.

The on-site audit was conducted on January 17-18, 2017. An entrance briefing was conducted with the Correctional Facility Superintendent II and Correctional Assistant Superintendent II. During the briefing, it was explained the audit process and a tentative schedule for two (2) days to include conducting interviews with the staff and inmates and reviewing the documentation. A complete guided tour of the entire facility was conducted including the administrative area, master control/sally port, operations center, medical area, kitchen/dining area, units/dormitories, program/support offices, recreation and education building, vocational building, and restrictive housing. During the tour, inmates were observed to be under constant supervision of the staff while involved in various activities. The facility was clean and well maintained in most areas of the buildings. Notification of the PREA audit was posted in all locations throughout the facility as well as postings informing inmates of the telephone numbers to call against sexual abuse and harassment and to call the victim advocate. Cameras and video surveillance system enhance their capabilities to assist in monitoring blind spots and the review of incidents. There were no cameras installed in the inmates's rooms or shower/toilet area so inmates are not seen on the surveillance system while showering or toileting, but can be viewed by same sex staff as they supervise the shower area. During the tour, it was observed the shower/toilet areas in the male unit/dorm areas did allow for privacy including the restrictive/segregated area.

During the two (2) day on-site visit, there were a total of four hundred and seventy (470) inmates in the facility. There are fifteen (15) living unit/dorms including a restrictive housing unit and twenty-two (22) inmates were randomly selected for the interview process. Inmates were well informed of their right to be free from sexual abuse and harassment and how to report sexual abuse and harassment using several ways of communication such as trusted staff, administrative staff, the hot line, and the grievance process. The community victims' advocacy service and telephone number is available to the inmates. There is evidence of Caswell CC's Correctional Facility Superintendent II obtaining a Memorandum of Understanding with Crossroads to provide confidential emotional support to inmates who are victims of sexual abuse and forensic exams. Twenty-eight (28) staff including those from both shifts, administrative and supervisory staff, medical and mental health/substance abuse staff, case management/support staff, contracted staff (teachers), Correctional Facility Superintendent II, Correctional Assistant Superintendent II/PREA Compliance Manager were interviewed. Also this auditor spoke with two (2) staff asking various questions during the facility tour. A total of thirty (30) staff were formally and informally interviewed on both days of the audit. Overall, the interviews revealed the staff is knowledgeable of the PREA standards and were able to articulate their responsibilities and their mandated duty to report.

At the end of the second day, an exit briefing with a summary of the findings was conducted with the Correctional Facility Superintendent II and Correctional Assistant Superintendent II. At the exit debriefing, it was discussed additional documentation was required for five (5) standards and it was determined this information would be sent to this auditor within the next two (2) weeks to be in compliance with all the PREA standards. The requested information was sent to this auditor by the Correctional Assistant Superintendent II. This auditor reviewed all requested information and this facility is in full compliance with the PREA Standards.

Number of standards exceeded: 0

Number of standards met: 39

Number of standards not met: 0

Number of standards not applicable: 4

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 and approved by the Director of Prisons; Policy A.0200 (Conduct of Employees) and NC General Statute 14-27.7 (Intercourse and sexual offenses with certain victims; consent no defense) outlines how each facility implements its approach to preventing, detecting and responding to all approaches of sexual abuse and harassment, including the definitions of prohibited behaviors as well as sanctions for staff, contractors, volunteers and inmates who had violated those prohibitions. Additionally, the policy provided comprehensive guidelines and a training foundation for implementing each facility's approach to include the zero tolerance towards reducing and preventing sexual abuse and harassment of inmates. It is evident, the executive administration has taken the PREA Standards to another level and it is reflected in their commitment to protecting the inmates in their care throughout the State of North Carolina.

NC Department of Public Safety Prisons has a designated PREA Coordinator who works statewide to implement the PREA Standards and who indicated she has sufficient time and authority to develop, implement and oversee compliance efforts of one-hundred & forty (140) facilities. The Correctional Assistant Superintendent II is designated as their PREA Compliance Manager who also indicated that he has sufficient time to oversee the facility's PREA compliance efforts and perform other duties as assigned. It was evident during the staff interviews, staff had been trained and were knowledgeable of NCDPS Agency's Zero Tolerance Policy including all aspects of sexual abuse, sexual harassment and sexual misconduct in accordance with the requirements.

Standard 115.12 Contracting with other entities for the confinement of inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The documentation reviewed indicated that the North Carolina Department of Public Safety (NCDPS) does not contract for the confinement of inmates with private entities or other entities, including other government agencies, therefore this standard is not applicable to this facility.

Standard 115.13 Supervision and monitoring

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy F.1600 (Management of Security Posts) and NC General Statute 143B -709 (Security Staffing) contained the required information identifying the facility to develop a staffing plan to provide for departmental adequate staffing levels to ensure the safety and custody of inmates, physical plant, video monitoring, and federal standards. Additionally, the policies contained information identifying the facility shall comply with staffing requirements including exigent circumstances and supervisory staff conducting unannounced rounds on a daily basis during all shifts documenting the information on unit log books and daily shift narratives that contains observations of all areas of the facility. The Office of PREA Administration's staff complete a yearly staffing plan for all facilities statewide. Caswell CC's staffing plan is updated on a monthly basis and the facility does not have any deviations from the staffing plan, their critical positions are always filled, it is a mandate. Caswell CC is a secure facility and utilizes constant video and staff monitoring to protect the inmates from sexual abuse and harassment. The Correctional Facility Superintendent II's interview, documentation and staff interviews confirmed the process takes place in the facility. The Correctional Facility Superintendent II had reviewed and approved of the process for all supervisory staff conducting unannounced rounds on all shifts and in all areas of the facility to monitor and deter staff sexual abuse and harassment. During the facility tour, there were two (2) areas (kitchen and clothing/laundry) identified as having blind spots. A procedure will need to be implemented as to how these areas will be supervised or utilizing some form of enhanced supervision. Since the initial review and on-site visit, the documentation was received prior to the submission of this report and the facility is in compliance with this standard.

Standard 115.14 Youthful inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 contained the elements of the standard, however, Caswell CC does not house youthful inmates. Therefore, this standard is not applicable to this standard.

Standard 115.15 Limits to cross-gender viewing and searches

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy F.0100 (Operational Searches); Policy F.1600 (Management of Security Posts) and Health Services Policy and Procedure TX 1-13 (Evaluation and Management of Disorders of Gender Dysphoria) revealed policy and procedures prohibit any cross-gender strip search or visual body cavity searches or cross-gender pat down searches to same gender staff absent exigent circumstances, shower procedures, female staff announcing when entering housing area, and prohibiting the search of a transgender or intersex inmate solely for the purpose of determining the inmate's genital status. Also, the policy indicated any cross-gender searches are required to be documented. The Office of PREA Administration in its "Campaign of Awareness" sent a memorandum dated April 22, 2013 to all Directors and Managers on the development of a Cross Gender bulletin board document and announcement to be displayed and shared to all staff. There is a requirement for all staff to sign and date the "Cross Gender Announcement and Acknowledgment" form acknowledging their completion of the orientation and limitations to cross gender viewing and searches. There were no cross-gender strip searches or pat-down searches conducted during the past 12 months. Staff and inmate interviews indicated that female staff entering the housing area most of the time announce themselves. In addition, "Female in the Unit" is announced over the PA system and documented in the logbook when females enter the dorm/unit areas.

Staff and inmate interviews confirmed inmates are able to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing them. During the facility tour, it was evident many of the bathroom and shower/toilet areas in the male unit/dorm areas and other areas did allow for privacy. A review of the training documentation and staff interviews confirmed training on pat down searches, cross-gender pat searches and searches of transgender and intersex inmates are conducted in a respectful and professional manner and prohibiting cross-gender strip or cross-gender visual body cavity searches of inmates from being conducted. All staff interviews were able to describe what an exigent circumstance would be and were knowledgeable of the procedures for securing authorization to conduct such a search as well as the requirements for justifying and documenting those searches.

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

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy E.1800 (Non English Speaking Inmate Program) and Policy E.2600 (Reasonable Accommodations for Inmate with Disabilities) contained procedures to be taken to ensure inmates with disabilities or who are limited English proficient are provided meaningful access to all aspects of the facility's efforts to prevent, protect and respond to sexual abuse and harassment. Additionally, the policy states the facility will not rely on inmate interpreters, inmate readers or any kind of inmate assistants except when a delay in obtaining interpreters services could jeopardize an inmates' safety. NCDPS has established a contract with Telephonic Interpreting for statewide services to provide residents with disabilities and residents who are limited English proficient with various interpreter services on an as needed basis. There are postings throughout the facility in English and Spanish and the intake staff have access to interpreter services. Staff training documentation, pamphlet and inmate PREA orientation packet contained information on providing appropriate explanations regarding PREA to inmates based upon their individual needs. Most staff interviews confirmed there is an outside agency to provide services and they do not allow for the use of inmate assistants in relation to reporting allegations of sexual abuse or sexual harassment. In the past 12 months, the facility did not have any instances of inmate interpreters or readers being used for reporting allegations of sexual abuse or sexual harassment. Inmate interviews with LEP inmates indicated the facility staff will provide information in Spanish upon request but there has been no need since they were able to understand the information provided and it is posted on the bulletin boards in their housing area.

Standard 115.17 Hiring and promotion decisions

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the

relevant review period)

- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 and the Addendum to the Administrative Memorandum 10-2013 from the Office of PREA Administration contained all the elements required by this standard and all background checks are conducted initially on new employees, current and promotion decisions of employees and contractors. NCDPS has extensive initial background screening requirements that include the screening for criminal record checks (AOC & NCDL), possible checks on criminal convictions and pending criminal charges, access to local, state and federal criminal databases to conduct background checks, psychological, driving records check, child abuse registry checks, domestic violence check, Diana screening - sex offender registry checks, and best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse and any resignation during a pending investigation or an allegation of sexual abuse. The agency conducts 5-year background checks for all employees and contractors. There is an affirmative duty to disclose any arrests or previous misconduct. Material omissions by an employee is subject to termination. A sampled review of staff's and contractor's HR files had documentation on staff completing varied forms containing the questions regarding past misconduct (Applicant Verification form, Professional Reference Check, DPS Employment Statements and the PREA Notice and Information Collection for Current Employees) that are completed during the hiring process. The HR staff send the criminal background information to their central office and receive an email on whether an individual is approved or disqualified. Once an individual is approved for hire, the new employee begins the LMS training and orientation process. The Administrative Officer I's interview confirmed the staff hired had documented criminal background checks and the questions regarding past conduct were asked and responded to during the hiring process. The agency provides information to requests from institutional employers where an employee has applied to work.

Standard 115.18 Upgrades to facilities and technologies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

Caswell CC has not been newly designed or had a substantial expansion or modification since August 20, 2012. There was no installation or updating of a video monitoring system, electronic surveillance system, or other monitoring technology at this facility. During the tour, the video surveillance system in the master control was observed. This will enhance their capabilities to assist in monitoring blind spots and the review of incidents. Additionally, this enables the staff to monitor inmates more efficiently throughout the physical plant of the facility.

Standard 115.21 Evidence protocol and forensic medical examinations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 contained the elements of the standard and identified that all allegations of sexual abuse and sexual harassment be referred to the appropriate investigative agency based upon the victim's age. Additionally, it requires protocols for informed consent, confidentiality, reporting to law enforcement, and reporting to investigative agencies. Documentation and an interview with the Correctional Assistant Superintendent II confirmed Caswell County Sheriff's Department (CCSD) conducts the criminal investigations of allegations of sexual abuse and sexual harassment.

There is evidence of Caswell CC's Correctional Facility Superintendent II obtaining a Memorandum of Understanding with Crossroads to provide confidential emotional support to inmates who are victims of sexual abuse and forensic exams. Annie Penn Hospital provides the emergency and forensic medical examinations at no financial cost to the victim. Documentation was provided that the medical examiners at Annie Penn Hospital are SANE certified. Additionally, the Office of PREA Administration sent a directive to all facilities to establish a standardized role of the PREA Support Person (PSP) that will serve as an advocate to link services (community based advocates or mental health professionals) and support to inmates who report sexual abuse and sexual harassment by another inmate, staff member, contractor or volunteer. The Caswell CC's Correctional Facility Superintendent II has designated two (2) staff for this role and completed the required form (OPA-A18). These individuals are screened for appropriateness to serve as a victim advocate and receive specialized training (PREA Support Person Training). Staff interviews and training documentation confirmed the role of the PSP individuals in the facility.

Standard 115.22 Policies to ensure referrals of allegations for investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 requires an administrative and/or criminal investigation for all allegations of sexual abuse or sexual harassment. All staff are required to report all allegations, knowledge and suspicions of sexual abuse, sexual harassment, retaliation, staff neglect and/or violations of responsibilities that may have contributed to an incident or retaliation. All staff are required to refer all alleged incidents of sexual abuse and sexual harassment for investigation to the Caswell County Sheriff's Department (CCSD) for the determination of criminal charges. CCSD provides services on a 24 hour basis that will include the responsibility of investigating allegations of sexual abuse by qualified staff who have received training concerning sexual abuse and forensic examination issues.

Staff refer all allegations of sexual abuse and harassment to the Central Office and the Office of PREA Administration for completion of an administrative investigation. The appropriate information will be entered into their internal OPUS system. The PREA policy can be found at the North Carolina state's website and information can be found in their PREA pamphlet (Sexual Abuse Awareness for the Inmate) that is available in English and Spanish. Caswell CC had received one (1) allegation of sexual abuse and sexual harassment resulting in a criminal investigation and/or an administrative investigation. All staff interviews reflected and confirmed their knowledge on the reporting, referral process and policy's requirements but did not know the agency who conducts the administrative and criminal investigation in response to an allegation of sexual abuse and sexual harassment. After the on-site visit, all staff were re-trained on who conducts the administrative and criminal investigations in response to an allegation of sexual abuse and sexual harassment. The Correctional Assistant Superintendent II sent the documentation to this auditor. The information was reviewed by this auditor and the facility is in full compliance with this standard.

Standard 115.31 Employee training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 requires an indepth PREA Training upon initially becoming an employee (entry level training) as well as refresher training annually. All the PREA training provided to employees statewide contains all ten (10) topics consistent with this standard's requirements and is tailored to all facilities with the gender of their inmate populations. The staff training documentation including a powerpoint presentation and staff interviews confirmed staff receives PREA training during initial training and during refresher training. All employees are trained as new hires regardless of their previous experience. All new employees receive the NCDPS Employee brochure on prevention strategies to maintain a professional atmosphere and sign the PREA Acknowledgement Form indicating they received the training and understand their responsibilities for all the different training modules and tested upon completion of the initial PREA training. A review of all staff and training education forms as well as staff interviews confirmed that staff are receiving their required PREA training. Staff interviews confirmed their comprehension of the PREA training and their obligation to report any allegation of the sexual abuse and/or sexual harassment. Employee training records are maintained electronically and certain training documents (NCDPS Human Resources On Boarding Checklist form and PREA Acknowledgement Form) are maintained in their personnel file. Additionally, the new employees are provided a "Breaking the Code of Silence" Correctional Officer's Handbook and a palm card identifying specific PREA information i.e. first responder protocol.

Standard 115.32 Volunteer and contractor training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 and Policy F .0604 (Community Volunteer Program) requires volunteers and contractors who have contact with inmates to receive indepth PREA training. All volunteers and contractors receive the PREA training, PREA Volunteer brochure and sign the PREA Acknowledgement Form upon completion of the PREA training they received. The training consists of a power point presentation that includes: policies, PREA definitions, reporting requirements and other required procedures. Additionally, the brochure provided to all volunteers and contractors is a guide to prevention and undue familiarity and sexual abuse with offenders/inmates. A review of the documentation confirmed they are aware of the facility's requirement for confidentiality and their duty to report any incidents of sexual abuse and/or sexual harassment. Interviews with two (2) volunteers confirmed their knowledge of the PREA training.

Standard 115.33 Inmate education

- Exceeds Standard (substantially exceeds requirement of standard)

- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015; Diagnostic Center Procedures Manual (DCPM) Policy 201 (Orientation) and Policy 418 (Substance Abuse Screening) requires inmates to receive appropriate education information regarding safety, their rights to be free from sexual abuse, sexual harassment, retaliation, reporting and the agency's response to allegations within 15 days upon arrival. However, the case management staff provides the inmates with this information immediately upon arrival during their initial intake and orientation process. This information is reviewed verbally with the inmate and a pamphlet is provided to them for future reference. After the review with the inmate he is asked to sign various forms which include: Offender PREA Education Acknowledgment Form, to name a few verifying receipt for all information regarding orientation to the facility. All inmates are provided a NCDPS Sexual Abuse Awareness for the Inmate pamphlet which includes information on prevention/intervention, self-protection, reporting and treatment/counseling and is available in Spanish. Documentation of inmate's signatures were reviewed and confirmed during inmate interviews. Most inmates interviewed stated they received this information the same day they arrived at the facility and identified the receipt of the pamphlet. PREA postings were observed throughout the facility tour and inmates identified the postings as another source of information for them.

Standard 115.34 Specialized training: Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 requires an investigation for all allegations of sexual abuse or sexual harassment to the Caswell County Sheriff's Department (CCSD) for criminal investigations and the Office of PREA Administration for administrative investigations. All investigators under go an extensive training developed by the NCDPS Office of Staff Development and Training prior to conducting criminal and administrative investigations which includes the NCDPS PREA Specialized Investigations: Sexual Abuse and Sexual Harassment. The facility does not conduct administrative or criminal investigations, however, assigned personnel conduct fact finding investigations. There are four (4) staff at the facility who have completed the NCDPS PREA Specialized Investigations: Sexual Abuse and Sexual Harassment and other required investigative training. Documentation was reviewed and in compliance with the PREA requirements for specialized training for investigators who investigate allegations of sexual abuse and sexual harassment in confinement.

Standard 115.35 Specialized training: Medical and mental health care

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 requires PREA training and specialized training for medical and mental health staff. It was evident through the medical and mental health staff interviews they had received the basic PREA training provided to all staff and the specialized training offered by NCDPS [Sexual Abuse and Sexual Harassment Medical and Mental Health Response (Prisons-Health Services)]. All medical and mental health staff sign the "Medical & Mental Health Care PREA Training Acknowledgement" form to acknowledge they received the training and understand their responsibilities in the event of an incident. The medical staff do not conduct forensic examinations. Interviews with three (3) medical and mental health staff confirmed their understanding of the requirement to complete the specialized training and verified completing the course.

Standard 115.41 Screening for risk of victimization and abusiveness

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 and the Diagnostic Procedures Manual requires prior to placement as part of the screening process each inmate is screened upon admission with an objective screening instrument for risk of victimization and sexual abusiveness with the OPUS Mental Health Screening Inventory and within 72 hours a mental health practitioner will conduct an initial Mental Health Assessment. Most inmates are screened within seventy-two (72) hours upon arrival at the facility to determine placement and their special needs. Those inmates who score vulnerable to victim or sexually aggressive are included into the alert system, as well as receiving further assessments, as identified. This intake screening is used in combination with information about personal history, medical and mental health screenings, conversations, classification assessments as well as reviewed court records and case files. Inmates are reassessed at a minimum of every thirty (30) days and throughout their stay at the facility. The facility's policies limits staff access to this information on a "need to know basis". Most inmate interviews and the documentation revealed that risk screenings are being conducted on the same day as the admission. Staff interviews confirmed a screening is completed on each inmate upon admission to the program. Inmates reporting prior victimization, according to staff, are referred immediately for a follow-up with medical or mental health staff. Although there have been no transgender or intersex residents admitted to the facility within the past year, staff were aware of giving consideration for the inmate's on views of their safety in placement and programming assignments.

Standard 115.42 Use of screening information

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015, OPUS Online, and Health Services Policy and Procedure TX 1-13 (Evaluation and Management of Disorders of Gender Dysphoria) precludes gay, bi-sexual, transgender and intersex inmates being placed in a particular housing unit, beds or other assignments based solely on their identification or status. In addition, the policy describes the screening and assessment process and how that information, along with information derived from medical and mental health screening and assessments, records reviews, database checks, conversations and observations, is used to determine an inmate's appropriate placement, housing and bed assignments, as well as work, education, and program assignments with the goal of keeping all inmates safe and free from sexual abuse. The case management staff utilize various forms and any other pertinent information during the inmate's admission process. Staff interviews described how information is derived from the forms as indicated above and the initial health assessment and mental health/substance abuse screening forms to determine placement and risk level. There are three (3) housing buildings with fourteen (14) housing units containing a day room, open bay area with bunk beds and shower/bathroom area. Also, there is a restrictive housing unit with twenty-four (24) single cells. Isolation is not utilized at the facility as a means of protective custody.

Standard 115.43 Protective custody

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 prohibits the use of involuntary restrictive housing unless there is no other option for keeping an inmate who is vulnerable to victimization separate from aggressive inmates. Also, the policy requires a review every thirty (30) days for continued restriction/placement. The inmates participation in programs, privileges, education and work opportunities may be restricted due to facility security issues, however all efforts will be made to provide certain programing within the restricted housing. Any placement of an inmate in involuntary restrictive housing and any type of restrictions are documented.

Standard 115.51 Inmate reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 and Policy D .0300 (Inmate Use of the Mail) provides multiple internal ways for inmates to report sexual abuse and harassment retaliation, staff neglect or violation of responsibilities that may have contributed to such incidents. Inmates are informed verbally and in writing on how to report sexual abuse and sexual harassment. These various ways of reporting include advising an

administrator, a staff member, external reporting, placing a written complaint in the grievance box, and third party. While touring the entire facility, it was observed in the living areas postings of the PREA information (posters). The victim advocate information postings were limited. Reporting procedures are provided to inmates through the Inmate/PREA Orientation, brochure, postings (Caswell Family Services) and Inmate Rule Booklet. Most inmate interviews along with the orientation and supporting documentation verified compliance with this standard. Most staff interviews were not as knowledgeable on how an inmate can report PREA allegations. There was a discussion to re-train staff on the PREA reporting process for inmates. Since the initial review and on-site visit, the Correctional Assistant Superintendent II sent the documentation to this auditor. The information was reviewed by this auditor and the facility is in compliance with this standard.

Standard 115.52 Exhaustion of administrative remedies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy G .0300 (Administrative Remedy Procedure) describes the orientation inmates receive explaining how to use the grievance process to report allegations of abuse and has administrative procedures/appeal process for dealing with inmate's grievances regarding sexual abuse or harassment. Inmates may place a written complaint in the grievance box located in various locations (dining area, living areas) throughout the facility. The facility has a multi-layered grievance process enabling timely response and layers of review. The policies and procedures describe an unimpeded process and allow for other individuals to assist an inmate in filing a grievance or to file grievances themselves on behalf of inmate. Inmates are not required to utilize an informal process for reporting allegations of sexual abuse or sexual harassment nor are they required to submit it to the staff member involved in the allegation. Grievances are to be resolved with a written response no later than twenty (20) days. Also, the facility has an emergency grievance procedure requiring an initial response within 24 hours. Inmate interviews, reviews of the Inmate Rule Booklet and documentation (one grievance) confirmed the grievance process relating to sexual abuse or sexual harassment complaints.

Standard 115.53 Inmate access to outside confidential support services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 ensures that inmates are provided access to outside confidential support services, PREA Support Persons and legal counsel. NCDPS continues to collaborate with NCCASA (North Carolina Coalition Against Sexual Abuse) to establish advocacy services, education and training statewide. There is evidence of Caswell CC's Correctional Facility Superintendent II obtaining a Memorandum of Understanding with Crossroads to provide confidential emotional support to inmates who are victims of sexual abuse and forensic exams. There have been no calls from inmates to outside services in the past 12 months. Inmate interviews confirmed they have reasonable and confidential access to their attorneys through visitation, correspondence or by telephone. The Inmate/PREA Orientation contained information of outside services. Inmates interviews revealed limited knowledge of how to access outside services. Since the

initial review and on-site visit, the facility's bulletin boards located in their housing units and visitation area were updated to clearly post the victim advocate services and the telephone number. The Correctional Assistant Superintendent II sent the documentation to this auditor. The information was reviewed by this auditor and the facility is in full compliance with this standard.

Standard 115.54 Third-party reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 identifies the Department's third party reporting process and instruct staff to accept third party reports. NCDPS website provides the public with information regarding third-party reporting of sexual abuse or sexual harassment on behalf of a inmate. In addition, the Department has established a confidential webpage for employees to report allegations fraud, waste, abuse, misconduct or mismanagement in the department and these concerns may be reported anonymously. There are two separate reporting options for the receipt of third-party reports of sexual abuse or sexual harassment. They may write to the State-wide PREA Director or send an email through the link provided. This information is reported directly to the State-wide PREA Coordinator who will inform the Correctional Facility Administrator. These reports will be investigated. All inmate interviews confirmed their awareness of reporting sexual abuse or harassment to others outside of the facility including access to their attorney. All staff interviews were able to describe how reports may be made by third parties.

Standard 115.61 Staff and agency reporting duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 identified the reporting process for all facility staff to immediately report any knowledge, suspicion or information they receive regarding sexual abuse and harassment, retaliation against inmates or staff who report any incidents or any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. All facility staff are mandated reporters and some random staff interviews confirmed the program's compliance with this standard. Additionally, the facility staff receive information on clear steps on how to report sexual abuse and to maintain confidentiality through the facility's protocol and/or training. The staff would complete an incident report with the details of any incidents that would occur in the facility in compliance with this standard. Interviews with medical and mental health staff confirmed their responsibility to inform inmates under the age of 18 their duty to report and limitations of confidentiality. After the on-site visit, all staff were re-trained on the NCDPS policy and procedure for reporting any information related to an inmate sexual abuse. The Correctional Assistant Superintendent II sent the documentation to this auditor. The information was reviewed by this auditor and the facility is in full compliance with this standard.

Standard 115.62 Agency protection duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 requires that immediate action to be taken upon learning that an inmate is subject to a substantial risk of imminent sexual abuse. There were no inmates determined to be subject to substantial risk of imminent sexual abuse in the past 12 months. Documentation and interviews with the Correctional Facility Superintendent II and other random selected staff were able to articulate, without hesitation, the expectations and requirements of NCDPS Policies and PREA Standards, upon becoming aware that an inmate may be subject to a substantial risk of imminent sexual abuse. Staff interviews indicated if an inmate was in danger of sexual abuse or at substantial risk of imminent sexual abuse, they would act immediately to ensure the safety of the inmate, separate from the alleged perpetrator and contact their immediate supervisor. Additionally, the inmate would be referred for mental health services.

Standard 115.63 Reporting to other confinement facilities

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 requires the Correctional Facility Administrator, upon receiving an allegation that an inmate was sexually abused while confined at another facility, to notify the Facility Correctional Administrator where the alleged abuse occurred and to report it in accordance with NCDPS policy and procedures. Also according to policy and procedure the Facility Correctional Administrator is to immediately report the incident for investigation and complete an incident report. The Correctional Facility Superintendent II had received no allegations that an inmate was abused while confined at another facility during the past 12 months.

Standard 115.64 Staff first responder duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 and training documentation requires staff to take specific steps to respond to a report of sexual abuse including; separating the alleged victim from the abuser; preserving any crime scene within a period that still allows for the collection of physical evidence; request that the alleged victim not take any action that could destroy physical evidence; and ensure that the alleged abuser does not take any action to destroy physical evidence, if the abuse took place within a time period that still allows for the collection of physical evidence. There had been one (1) allegation of sexual abuse during the past 12 months. One (1) of which first security staff responded to the report separating the alleged victim and abuser. Random staff and first responder interviews validated their technical knowledge of actions to be taken upon learning that an inmate was sexually abused. Also, every interviewed staff, without hesitation, described actions they would take immediately and these steps were all consistent with NCDPS policies and procedures. It was evident that staff have been trained in their responsibilities as first responders. The staff had palm cards containing the policy on the first responder's specific steps to respond to a report of sexual abuse.

Standard 115.65 Coordinated response

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015, Caswell CC's SOP (Sexual Abuse or Sexual Harassment Elimination Policy) and Caswell CC's "PREA Sexual Abuse Institutional Response Plan" provides a written coordinated response system to coordinate actions taken in response to an incident of sexual assault among staff first responders, administration, executive staff and contacting medical and mental health outside sources. Caswell CC's staff have a system in place providing the staff with clear actions to be taken by each discipline for accessing, contacting administrative staff, medical and mental health staff, contacting law enforcement, victim advocate services, and a number of other individuals. Interviews with the Correctional Facility Superintendent II and other staff validated their technical knowledgeable of their duties in response to a sexual assault.

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

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

North Carolina Department of Public Safety (NCDPS) does not engage in the collective bargaining process regarding any violation of departmental policy regarding PREA, therefore this standard is not applicable.

Standard 115.67 Agency protection against retaliation

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 requires the protection and monitoring of inmates and staff who have reported sexual abuse and sexual harassment or who have cooperated in a sexual abuse or harassment investigation. NCDPS policy prohibits retaliation against any staff or inmate for making a report of sexual abuse as well as retaliation against a victim who has suffered from abuse. The monitoring at a minimum will take place for a period of 90 days or longer, as needed. This monitoring would include inmate disciplinary reports, housing and program changes, negative performance reports as well as reassignments of staff. The Correctional Assistant Superintendent II is responsible with overseeing the monitoring of the conduct or treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to determine if changes that may suggest possible retaliation exist. He is responsible for assigning a PREA Support Person (PSP) that will serve as an advocate to link services (community based advocates or mental health professionals) and support to inmates who report sexual abuse and sexual harassment by another inmate, staff member, contractor or volunteer. The Correctional Facility Superintendent II has designated several staff for this role and completed the required form (OPA-A18). These individuals are screened for appropriateness to serve as a victim advocate and receive specialized training. Staff interviews and training documentation confirmed the role of the PSP individuals in the facility. If a retaliation should occur, the assigned PSP individual would complete several forms depending on whether it is a staff or inmate retaliation monitoring. Upon completion of the investigation, a PSP individual will complete a "PREA Sexual Abuse and Harassment Retaliation Report" form [Staff (OPA-I22) or Offender (OPA-I24)]. There were no incidents of retaliation in the past 12 months.

Standard 115.68 Post-allegation protective custody

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 contained information on post-allegation protective custody or guidelines for moving an inmate to another housing area (Administrative Restrictive Housing – Protective Custody) or another facility as a last measure to keep inmates who alleged sexual abuse safe and only until an alternative means for keeping the inmate safe can be arranged. If an inmate is placed in the restrictive housing, the inmate is seen every seven (7) days by a mental health staff who documents the status. No inmates who have alleged sexual abuse in the past 12 months were secluded or isolated from the other inmates.

Standard 115.71 Criminal and administrative agency investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 and NCDPS Sexual Abuse & Harassment Coordinated Response Overview require all staff to refer all alleged incidents of sexual abuse or harassment to local law enforcement [Caswell County Sheriff's Department (CCSD)] for criminal investigations and the facility to conduct their own administrative investigations. Additionally, staff refer all allegations of sexual abuse and harassment to the Central Office and the Office of PREA Administration. There has been one (1) reported investigation of alleged staff's or inmates inappropriate sexual behavior that occurred in this facility in the past 12 months. All four (4) facility investigators have received the specialized training as required by the standards. It was evident the staff reported incidents as required and reports are maintained for as long as the alleged abuser is incarcerated or employed by the department. Evidence is collected and prior reports involving the same perpetrator or victim are required to be reviewed. Any investigations where it appears to be criminal activity is referred to prosecution and no interviews are conducted without the approval of the Office of Special Investigations and Compliance.

Standard 115.72 Evidentiary standard for administrative investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 investigates the allegation and indicates a standard of a preponderance of the evidence or a lower standard of proof for determining if allegations are substantiated. An interview with one of the investigators indicated that they conduct fact finding investigations and do not make conclusions following their investigations (which are administrative in nature) therefore the Correctional Facility Superintendent II in consultation with legal and his supervisory staff and Human Resources would make a determination regarding disciplinary actions to be imposed and the standard they would use is the preponderance of evidence.

Standard 115.73 Reporting to inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 requires that any inmate who makes an allegation that he or she suffered sexual abuse is informed in writing contains the process for notifying inmates whether the allegation proves substantiated, unsubstantiated or unfounded following an investigation. This policy further requires that following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the facility informs the inmate unless the allegations are "unfounded" whenever the staff member is no longer posted within the inmate's unit; the staff member is no longer employed at the facility; NCDPS learns that the staff member has been indicted or convicted on a charge related to sexual abuse within the facility. With regard to investigations involving inmate-on-inmate allegations of sexual abuse, the facility will inform the inmate whenever the facility learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. There has been one (1) reported investigation of alleged staff or inmate's inappropriate sexual behavior that occurred in this facility in the past 12 months that was completed by the agency/facility. The Correctional Facility Superintendent II validated his technical knowledge of the reporting process during his interview.

Standard 115.76 Disciplinary sanctions for staff

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 and Policy A .0200 (Conduct of Employees) requires staff disciplinary sanctions up to and including termination for violating facility's sexual abuse or harassment policies. Also, the policy mandates that the violation be reported to the Office of PREA Administration and law enforcement. The policy also mandates that the violation be reported to law enforcement. All disciplinary sanctions are maintained in the employees HR file in accordance with NCDPS policy and procedures. Termination is the presumptive sanction for staff who have engaged in sexual abuse. Additionally staff may not escape sanctions by resigning. Staff who resign because they would have been terminated, are reported to the local law enforcement, unless the activities were not clearly criminal. There has been one (1) employee disciplined in the past 12 months for violation of the facility's sexual abuse or harassment policies. The Correctional Facility Superintendent II interview validated his technical knowledge of the reporting process was consistent with NCDPS policies and procedures.

Standard 115.77 Corrective action for contractors and volunteers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 and Policy F .0604 (Community Volunteer Program) requires that volunteers and contractors in violation of the facility's policies and procedures regarding sexual abuse and harassment of inmates will be reported to Office of PREA Administration and local law enforcement unless the activity was clearly not criminal and to relevant licensing bodies. Additionally, the policies requires the facility staff to take remedial measures and prohibit future contact with inmates in the case of any violation of the facility's sexual abuse and harassment policies by contractors or volunteers. All volunteers and contractors must sign the PREA Acknowledgement Form upon completion of the PREA training they received. This was verified with the documentation review and during an interview with the Correctional Facility Superintendent II. There have been no volunteers or contractors reported in the past 12 months for engaging in sexual abuse or harassment of an inmate.

Standard 115.78 Disciplinary sanctions for inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 and Policy B .0200 (Inmate Disciplinary Procedures) found to have violated any of the agency's sexual abuse or sexual harassment policies will be subject to sanctions. Caswell CC's staff provides each inmate with an Inmate/PREA Orientation and Inmate Rule Book that includes their rights and responsibilities, a disciplinary list of violations, disciplinary procedures and transfers. Inmates will be offered therapy counseling or other interventions designed to address and correct the underlining reasons for their conduct. There were no administrative findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility in the past 12 months. The Correctional Facility Superintendent II indicated that inmates may also be referred for prosecution if the allegations were criminal.

Standard 115.81 Medical and mental health screenings; history of sexual abuse

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015; Diagnostic Procedures Manual Policy 305.03 (Psychological and Psychiatric Referral) Revision; Health Services Policy and Procedure CP 18 (Clinical Practice Guidelines); Memo 10-2013 (Diagnostic Policy Update) and Memo 11-2013 (Case Manager PREA Requirement) require medical and mental health evaluations and as appropriate, treatment is offered to all inmates victimized by sexual abuse and ensure confidentiality of information. Inmates who report prior sexual victimization or who disclose prior incidents of perpetrating sexual abuse, either in an institution or in the community, are required to be offered a follow-up with a medical or a mental health practitioner within 14 days of admission/screening. Medical staff complete various admission screening forms electronically

and mental health staff complete various forms (i.e. Mental Health Assessment and Treatment Plan) during the initial intake process including informed consent disclosures (General Consent form). There were no inmates who disclosed prior victimization during their initial screening process. During the interviews with the medical and mental health staff confirmed that although there were no disclosures, all inmates were offered follow-up meetings with medical and mental health providers.

Standard 115.82 Access to emergency medical and mental health services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 and the Health Services Policy and Procedure CP 18 (Clinical Practice Guidelines) requires inmate victims of sexual abuse are offered timely information about and timely access to emergency contraception and sexually transmitted disease prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate and unimpeded access to emergency medical treatment and crisis intervention services. The medical staff have a protocol in place to assist in expediting an inmate to the emergency room with specific documentation (Appointment Trip Ticket) for the staff. Additionally, documentation provided confirmed treatment services are provided to every victim without financial cost. Annie Penn Hospital provides the emergency services and forensic examinations and Crossroads as the victim advocate services for this facility. Interviews with the medical and mental health staff confirmed that inmates have immediate access to emergency medical and mental health services.

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

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015; Health Services Policy and Procedure CP 18 (Clinical Practice Guidelines) and CC 8 (Aftercare Planning for Inmates in Healthcare Services) requires ongoing medical and mental health care for sexual abuse victims and abusers. Additionally, the policy requires the facility to offer medical and mental health evaluations and appropriate follow-up treatment. Victims of sexual abuse will be transported to the Annie Penn Hospital where they will receive treatment and where physical evidence can be gathered by a certified SANE medical examiner. There is a process in place to ensure staff track on-going medical and mental health services for victims who may have been sexually abused. There have been no investigations of alleged inmate's inappropriate sexual behavior that occurred in this facility in the past 12 months. The medical and mental health staff have a protocol in place to assist inmates upon discharge from the facility to continue services if needed.

Standard 115.86 Sexual abuse incident reviews

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 and NCDPS Sexual Abuse & Harassment Coordinated Response Overview requires a PREA Post Incident Review (OPA-I10) of every sexual abuse allegation at the conclusion of all investigations, except those determined to be unfounded within seven (7) days. Caswell CC's Sexual Abuse Incident Review Team consists of the Correctional Facility Superintendent II, Correctional Assistant Superintendent II, Nurse Manager, and assigned PSP. There has been one (1) investigation of alleged staff or inmate's inappropriate sexual behavior that occurred in this facility in the past 12 months. One (1) of which was a substantiated incident. Staff interviews confirmed they would document their review on their PREA Post Incident Review (PIR) form that captures all aspects of an incident.

Standard 115.87 Data collection

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 requires the collection of accurate, uniform data for every allegation of sexual assault. The Correctional Facility Superintendent II inputs information into the OPUS system and the NCDPS PREA Coordinator obtains the data from this system relating to PREA. The NCDPS PREA Coordinator implemented a data collection protocol and collects all data relating to PREA from the OPUS system. NCDPS has a data collection instrument to answer all questions for the U.S. Department of Justice Survey of Sexual Abuse Violence. A review of the annual report revealed it was completed according to this standard.

Standard 115.88 Data review for corrective action

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 requires the review of data for corrective action to improve the effectiveness of its prevention, protection and response policies, practices and training. A review of the 2015 Annual Report indicated compliance with the standard and included all of the required elements. The NCDPS 2015 Annual Report is posted on the NCDPS Website for public review. The Correctional Assistant Superintendent II monitors collected data to determine and assess the need for any corrective actions. The 2015 annual report was readily available on the North Carolina Department of Public Safety (NCDPS) website.

Standard 115.89 Data storage, publication, and destruction

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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.

The initial review of the North Carolina Department of Public Safety Prisons (NCDPS) Policy .3400 (Inmate Sexual Abuse and Sexual Harassment) revised 8/24/2015 requires that data is collected and securely retained for 10 years. The aggregated sexual abuse data was reviewed and all personal identifiers are removed.

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Dorothy Xanos

3/03/17

Auditor Signature

Date