

PREA Facility Audit Report: Final

Name of Facility: Pender Correctional Institution

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 05/30/2021

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Trish Brockman-Bernhards	Date of Signature: 05/30/2021

AUDITOR INFORMATION	
Auditor name:	Brockman-Bernhards, Trish
Email:	trish.brockman@nebraska.gov
Start Date of On-Site Audit:	04/12/2021
End Date of On-Site Audit:	04/14/2021

FACILITY INFORMATION	
Facility name:	Pender Correctional Institution
Facility physical address:	906 Penderlea Highway, Burgaw, North Carolina - 28425
Facility Phone	
Facility mailing address:	P.O. Box 1058, Burgaw, North Carolina - 28425

Primary Contact	
Name:	Bryan K. Wells
Email Address:	bryan.wells@ncdps.gov
Telephone Number:	910-663-3000

Warden/Jail Administrator/Sheriff/Director	
Name:	Vacant
Email Address:	vacant
Telephone Number:	910-663-3000

Facility PREA Compliance Manager	
Name:	Robert Norvell
Email Address:	robert.norvell@ncdps.gov
Telephone Number:	O: (910) 604-1429

Facility Health Service Administrator On-site	
Name:	Bruce Nelson
Email Address:	bruce.nelson@ncdps.gov
Telephone Number:	910-663-3172

Facility Characteristics	
Designed facility capacity:	768
Current population of facility:	705
Average daily population for the past 12 months:	664
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	21 and up
Facility security levels/inmate custody levels:	Medium/minimum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	246
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	4
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	93

AGENCY INFORMATION	
Name of agency:	North Carolina Department of Public Safety
Governing authority or parent agency (if applicable):	
Physical Address:	512 North Salisbury Street, Raleigh, North Carolina - 27604
Mailing Address:	
Telephone number:	919-733-2126

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

Agency-Wide PREA Coordinator Information			
Name:	Charlotte Williams	Email Address:	charlotte.williams@ncdps.gov

AUDIT FINDINGS

Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

The North Carolina Department of Public Safety contracted with DX Consultants, LLC, 701 77th Avenue N, (P.O. Box 55372), St. Petersburg, FL 33732 for PREA Auditing Services of the Pender Correctional Institution. The purpose of the audit was to determine the Pender Correctional Institution's level of compliance with the standards of the Prison Rape Elimination Act of 2003. The PREA audit of the Pender Correctional Institution (Pender CI) was conducted on April 12-14, 2021 by Trish Brockman-Bernhards, US DOJ Certified PREA Auditor. The facility is a North Carolina Department of Public Safety-Prisons facility located at 906 Penderlea Hwy, Burgaw, North Carolina 28425. This was the facility's third PREA audit. The most recent PREA audit was on March 13, 2017.

Pre-Onsite Audit Phase

The audit process began on February 25, 2021, when an informational email was sent to the Regional PREA Program Analyst. The e-mail contained information regarding who the assigned auditor was, the date the pre-audit notices were to be posted, when the Pre-Audit Questionnaire was due and the actual date of the onsite audit. The email also addressed the posting of the attached bilingual PREA Audit Notices containing the address offenders could write to and confidentially contact the auditor prior to the auditor's arrival at the facility. The auditor received no correspondence from any offenders prior to the onsite portion of the audit. While onsite, there were no special requests from the offender population to speak with the auditor either.

Facility staff were instructed in the informational email as to what areas of the facility the audit notices should be posted to and to take photos of the notices when posted, dated if possible and identify the location of where the notices were posted. The auditor received correspondence in the form of email and photos that the notices were posted were loaded on the Online Audit System on March 9, 2021. The bilingual audit notices were verified during the onsite tour in various locations throughout the facility including the main gatehouse, main administrative building, receiving and intake area, Clothes House, Central Canteen storage, Maintenance, Operations building, Kitchen, Medical, ACDP Program building, Programs building, Restrictive Housing, East Yard, White House office area, Chapel, housing units A, B, C, D, E, F, Canteen, Library and the gymnasium that was being used as quarantine and isolation for Covid-19 positive offenders.

The auditor received notification that the PAQ was updated and submitted to the Online Audit System (OAS) on March 16, 2021. The audit was originally scheduled for December 2020 but had to be postponed due to Covid 19. The pre-audit review of the updated documentation commenced. The auditor completed a documentation review using the Pre-Audit Questionnaire. The Pender CI PREA Compliance Manager uploaded information, that included policies, procedures, training records, internet research, and supporting documentation for all forty-five (45) standards. The documentation uploaded to the OAS for each standard contained the supporting documentation in-regards to the Pre-Audit Questionnaire; however, the information did not sufficiently address each standard and additional information had to be requested. Additional supporting documentation was provided to the auditor during

the on-site and after the facility's on-site visit. The supporting documentation was uploaded to the OAS under the supplemental files.

A conference call was scheduled for April 9, 2021, with the PREA Compliance Manager (PCM) to review the schedule for the on-site visit, discuss the auditor's results of the Pre-Audit Questionnaire and supporting documentation provided on the OAS and review information to be sent to the auditor prior to the on-site visit to the facility. The information requested was to include the following:

- Interview Preparation Sheet
- Hours of each security shift
- Employees assigned to the facility (name, title, working hours/shift)
- Physical location of records
 - Employee training
 - Employee human resources records
 - Criminal background checks (employee & contractor)
 - Volunteer and contractor PREA training records
 - Offender medical
 - Offender mental health
 - Offender grievances
 - Offender PREA Intake screenings/reassessments
 - Offender PREA Education (intake/comprehensive within 30 days)
 - Sexual abuse, sexual harassment and retaliation investigations-administrative (staff-on-offender and offender-on-offender)
 - Sexual abuse, sexual harassment and retaliation investigations-criminal (staff-on-offender and offender-on-offender)
- Specialized Staff
- List of staff with shift/days off needed to appropriately conduct PREA interviews:
 - Security and non-security staff who have acted as first responders
 - Medical staff
 - Mental health staff
 - Staff who performs screening for risk of victimization and abusiveness
 - Staff who supervise offenders in segregated housing
 - Intermediate/higher-level facility staff
 - Intake staff
 - Non-medical staff involved in cross-gender strip or visual searches
 - Volunteers who have contact with offenders
 - Contractors who have contact with offenders
 - Administrative investigators
 - Criminal investigators
- Offender roster with age/housing unit assignments and list(s) of identified categories of the following inmates:
 - Physically disabled, cognitively disabled, blind, deaf or hard of hearing, and limited English proficient offenders
 - Transgender and Intersex offenders, Gay and Bisexual offenders
 - Offenders in segregated housing (for risk of sexual victimization)
 - Offenders who reported sexual abuse
 - Offenders who disclosed sexual victimization during risk screening
- PREA Investigations Request (from prior 12-months)

- Staff-on-offender allegations of sexual abuse and sexual harassment
- Offender-on-offender allegations of sexual abuse and sexual harassment
- Overview of administrative and criminal cases and dispositions:
 - Pending cases
 - Closed cases
 - Substantiated cases
 - Unsubstantiated cases
 - Unfounded cases
 - Criminal cases referred to prosecutor
 - Prosecutor refused cases
 - Indictment
 - Conviction
 - Acquittal
- Total Number of Hotline calls
- Offender Grievances-Allegations of sexual abuse and sexual harassment

The PCM sent the documentation (staff roster, staff schedule for random and specialized staff etc.) to the auditor prior to arrival at the facility. Also, additional supporting documents were provided during the on-site visit to address the deficiencies.

Research

During the pre-onsite audit phase, the auditor conducted internet searches on the facility and agency and reviewed the North Carolina Department of Public Safety's website (www.ncdps.gov). The website includes the NCDPS zero-tolerance policy, investigative information, previous PREA audit reports, PREA reporting information, brochures, posters, handouts and annual reports. The prior PREA report was also reviewed. The general public can access the PREA policy on the website.

The Rape Crisis Center of Coastal Horizon Center, Inc. has a current Memorandum of Understanding with the Pender CI for emotional support services for offender victims of sexual abuse. The MOU was reviewed and the auditor was able to make telephone contact with a victim advocate from the Rape Crisis Center of Coastal Horizon Center, Inc. Details of the telephone interview are provided in the applicable sections of this report. Just Detention International and RAINN (the Rape, Abuse & Incest National Network) were contacted to determine if the agency had reported any complaints from the facility in the past twelve (12) months. Both organizations reported they did not have any contact from offenders of Pender CI.

Contact was also made with a Sexual Assault Nurse Examiner (SANE) with the Pender Memorial Hospital by telephone. The auditor and the SANE discussed the forensic services offered to offender victims of sexual abuse. During the call, the SANE was able to explain that community level of care is offered to all patients, even offender victims of sexual abuse. Details of the telephone interview are provided in the applicable section of this report.

Onsite Review

Pender Correctional Institution (Pender CI) is located in Pender County North Carolina. The address is 906 Penderlea Highway, Burgaw, North Carolina 28425. The facility's design capacity is (768) with an average daily population of (664). The offender count on the first day of the audit was (729).

The on-site audit was conducted on April 12-14, 2021. The auditor arrived at the Pender Correctional Institution the morning of April 12, 2021. An entrance briefing was conducted with the Acting Warden

(Associate Warden/PREA Compliance Manager) and two Lieutenants that were going to be the new PREA Compliance Manager and PREA Compliance Manager back-up. During the entrance briefing, the audit process was explained and a tentative schedule for three (3) days to include facility tour, conducting interviews with the staff and offenders and reviewing the documentation. A brief discussion was held regarding current facility operations due to Covid-19 impacting the offender population. The discussion involved how interviews could be conducted safely and proper sanitizing between interviews could be maintained.

A complete guided tour of the entire facility was conducted by the Acting Warden/PCM and two Lieutenants. The tour included visiting the main gatehouse, main administrative building, receiving and intake area, Clothes House, Central Canteen storage, Maintenance, Operations building, Kitchen, Medical, ACDP Program building, Programs area, Restrictive Housing, East Yard, White House office area, Chapel, housing units A, B, C, D, E, F, Canteen, Library, and the gymnasium that was being used as quarantine and isolation for Covid-19 positive offenders. The tour ended after approximately two and a half (2.5) hours.

During the tour, the auditor was allowed unimpeded access to any area of the facility. While touring, the auditor was seeking to find blind spots, listening for opposite gender announcements, observing staff and offender interactions as well as searches conducted by staff and locating camera and security mirror placements. Offenders were observed to be under constant supervision of the staff while involved in various activities. The auditor also reviewed the facility schematics. Pender CI has eighty-two (82) cameras. Camera placement was internal and external included stationary and PTZ cameras. The cameras are monitored in the Operations Room and have an approximate 30-day recording capability.

Informal and formal conversations with employees and offenders were conducted. Notifications of the PREA audit was posted in all locations throughout the facility as well as postings informing offenders of the telephone numbers to call and report sexual abuse and sexual harassment and to call the victim advocate for emotional support services. The auditor reviewed the "Daily Narrative" forms containing PREA related documentation (unannounced rounds, PREA related discussions held at shift briefings & cross gender announcements). During the tour, it was observed that shower and bathroom areas throughout the facility (A, B, C, D, E & F Dorms) provided adequate privacy to use the bathroom, change clothing and shower without staff of the opposite gender observing the offender naked. In the Receiving Area there were two holding cells with toilets that did not have any sort of barrier to allow for any level of privacy for offenders placed in them. Work orders were submitted the same day and construction of barriers began immediately and were completed within a short period of time after the onsite portion of the audit ended. The facility provided the auditor photos of curtain barriers that were installed in front of the toilets in the two holding cells. The barriers that were constructed allowed privacy for offenders to use the toilets.

Staff Interviews

The PREA Auditor handbook requires auditors to interview at least twelve (12) random sample of staff. The auditor conducted eighteen (18) random sample of staff interviews. The auditor interviewed a variety of staff from a diverse cross-section of work assignments, supervisors and line staff, males and females and staff of various races. There were two security shifts. The hours for each shift were 0600-1800 hours and 1800-0600 hours. Hours for Administrative staff were 0800-1630 hours. The facility reported two hundred forty-six (246) staff were employed at the facility. Private interviews with staff were conducted in the Associate Warden of Custody's Office while practicing social distancing. There were twenty-nine (29) specialized interviews conducted with nineteen (19) staff as some staff were interviewed for multiple categories. Specialized individuals were selected based upon their subject matter expertise

in the various areas. The facility does not house youthful offenders, therefore, interviews for line staff who supervise youthful offenders and education and program staff who work with youthful offenders were not conducted. Additionally, there were no non-medical staff involved in cross gender strip searches or staff who supervise segregated housing. The facility personnel were found to be cooperative and professional. Staff morale appeared to be very good and the observed staff/offender relationships were determined to be professional.

The facility reported in its PAQ that ninety-three (93) volunteers have been trained in agency policies and procedures regarding sexual abuse and sexual harassment prevention, detection and response policies and procedures. Due to restrictions in place at the facility because of the coronavirus, outside volunteers not employed by the facility have not been allowed to enter the facility. Interviews with volunteers were conducted over the telephone. Telephonic interviews with three (3) Religious volunteers and one (1) Music volunteer confirmed they completed the Sexual Abuse and Harassment 101 training and their knowledge obtained about NCDPS zero tolerance and their duty to report sexual abuse and harassment.

There is evidence of Pender CI's Acting Warden obtaining an updated Memorandum of Understanding with the Rape Crisis Center of Coastal Horizon Center, Inc. on 4/12/2021 to provide free confidential crisis intervention and emotional support services related to sexual abuse offenders. Any offender seeking services can call the telephone number at no additional cost to the offender. The auditor contacted a representative from the Rape Crisis Center of Coastal Horizon Center, Inc. and she explained the services the Rape Crisis Center of Coastal Horizon Center, Inc. offers. She reported there were no calls made to the Rape Crisis Center of Coastal Horizon Center, Inc. in the past twelve (12) months from Pender CI. Pender Memorial Hospital provides the emergency services and the forensic medical examinations at no financial cost to the victim. In an interview with the SANE nurse, no Pender CI offenders had been provided forensic exams at the Pender Memorial Hospital.

Additionally, interviews were conducted at a previous time by certified auditor Dorothy Xanos with the NCDPS Secretary's representative (PREA Director), NCDPS Contract Administrator and one (1) of the NCDPS PREA Program analysts prior to the on-site visit. A summary of these interviews was provided to the auditor and were adequate.

All staff interviews were conducted with the guidance of the national PREA Resource Center, PREA Compliance Audit Instruments-Interview Guide. The Interview Preparation Sheet and employee rosters received when arriving onsite assisted the auditor with the selection process for the random and targeted staff. A detailed list and quantity of staff interviewed are noted below.

Staff Categories	Number of Interviews Conducted
Random sample of staff	18
Agency and PREA staff:	
Agency Head or designee	1
Warden	1
PREA Coordinator	1
PREA Compliance Manager	1

Specialized Staff:	
Agency Contract Administrator	1
Intermediate or higher level staff	4
Medical staff	2
Mental health staff	2
Non-medical staff involved in cross-gender strip or visual search searches-NA	0
Administrative (HR) staff	1
SAFE/SANE Nurse-Pender Memorial Hospital	1
Volunteers	4
Contractor staff	1
Investigative staff	3
Staff who perform screening for risk of victimization and abusiveness	4
Staff who supervise offenders in segregation unit	4
Staff on the SIR team	3
Staff designated fto monitor retaliation	2
First responders (security)	1
First responders (non-security)	0
Intake staff	4
Staff trained as advocates	1
Advocacy center staff	1
Total random staff interviewed	18

Total agency and unit PREA staff	4
Total specialized staff interviews	39
Total staff interviewed	61

Offender Interviews

During the three (3) day on-site visit, there were seven hundred twenty-nine (729) male offenders in the facility. The PREA Auditor Handbook requires auditors to interview at least ten (10) random sample of offenders. The auditor conducted twenty-one (21) random sample of offender interviews. The PCM provided the auditor with an offender list provided for the interview process. The random offenders were selected from all six (6) dormitory style units. Each unit included four (4) wings. The interviewed offenders were of various ages, nationalities and ethnic backgrounds.

The PREA Auditor handbook requires auditors to interview at least ten (10) targeted offenders. There were sixteen (16) targeted offender interviews conducted. The facility reported they did not have the following targeted offender categories housed at the facility during the onsite review. As a result, additional random offender interviews were conducted. These categories of offenders were not interviewed:

- Youthful Offenders
- Offenders who were blind, deaf or hard of hearing
- Offenders in Restrictive Housing for high Risk of Sexual Victimization
- Offenders who Reported Sexual Victimization During Risk Screening

There were zero (0) offenders who met multiple identified categories from the required list of targeted offender interviews. Although the PREA Auditor Handbook requires a minimum of ten (10) targeted offender interviews, there were no offenders among the population that met four categories. During staff interviews, questions were asked to ascertain if offenders in these three categories were known among the population. Additional random offenders were interviewed.

All offender interviews indicated they were well informed of their right to be free from sexual abuse and sexual harassment and how to report sexual abuse and sexual harassment using several ways of communication such as trusted staff, administrative staff, knowledge on external reporting telephone number (Offender Reporting Sexual Abuse/Forgiven Ministry) and the Rape Crisis Center of Coastal Horizon Center, Inc. for crisis intervention and victim advocate services. There were some minor inconsistencies regarding the PREA Opposite Gender Announcements being made in the Living Units.

Some offenders reported that the announcements are made differently by each shift (some made each time a female staff entered a dorm and some made only at the beginning of a shift). Sometimes the announcements were heard and sometimes they were not heard. Overall, the offenders interviewed demonstrated an understanding of the PREA compliance program, the intake screening process, the prevention and protection process and reporting mechanisms Pender CI had in place. Offenders interviewed further stated that staff members were responsive to their needs and reported that they felt safe at this facility.

All offender interviews were conducted with the guidance of the National PREA Resource Center, PREA

Compliance Audit Instruments-Interview Guide. The Interview Preparation Sheet and offender rosters received when arriving onsite assisted the auditor with the selection process for the random and targeted offenders. Private interviews were conducted in the Associate Warden of Custody's Office and the Visiting Room where social distancing was maintained. A detailed list and quantity of offenders interviewed are noted below.

Offender Categories	Number of Interviews Conducted
Random sample of offenders:	21
Targeted offenders:	16
<ul style="list-style-type: none"> • Youthful Offenders 	0
<ul style="list-style-type: none"> • Offenders with physical disability 	3
<ul style="list-style-type: none"> • Offenders who are blind, deaf or hard of hearing 	0
<ul style="list-style-type: none"> • Offenders who are limited English proficient 	2
<ul style="list-style-type: none"> • Offenders with a cognitive disability 	2
<ul style="list-style-type: none"> • Offenders who identify as gay, lesbian or bisexual 	4
<ul style="list-style-type: none"> • Offenders who identify as transgender or intersex 	3
<ul style="list-style-type: none"> • Offenders in segregated housing (for high risk of sexual victimization) 	0
<ul style="list-style-type: none"> • Offenders who reported sexual abuse 	2

<ul style="list-style-type: none"> • Offenders who reported prior sexual victimization during risk screening 	0
Total random offenders interviewed	21
Total targeted offenders interviewed	16
Total offenders interviewed	37

File Review

Based upon the information provided on the PREA Audit Request for Information form completed by the Pender CI staff, the auditor was able to determine the facility had four (4) sexual abuse allegations and four (4) sexual harassment allegations for the period of 4/01/2020 to 4/01/2021. Two (2) of the four (4) sexual abuse allegations were found to be unsubstantiated and two (2) were found to be unfounded. Of the four (4) sexual harassment allegations, one (1) was still pending, two (2) were found to be unsubstantiated and one (1) was found to be unfounded.

Employee personnel files were maintained in the Human Resources Office. The criminal background records check documentation was maintained in the employee personnel files. The auditor reviewed documentation from five (5) employee personnel files. When selecting the files, the auditor considered reviewing employee files of newer employees who were recently hired as well as staff who had been employed with the facility and staff that were recently promoted to positions at the facility. Training files were reviewed on the same staff.

The auditor reviewed documentation from eight (8) offender files. Documentation in the files included offender education participation acknowledgement forms. Intake Screening information and PREA allegation and investigation information was observed on the agency OPUS computer data collection system. The case management staff made very precise contact note entries concerning an offender's arrival date at the facility as well as the Orientation the offenders attended.

The auditor reviewed two electronic medical and mental health files. These files are electronically maintained. The Auditor was provided with information on where medical or mental health staff would make entries in the electronic record. There were no medical or mental health files to review that were based upon sexual abuse investigations. Files of two transgender offenders were reviewed to ensure proper reviews occurred every six months.

Type of File Reviewed	Number of Files Reviewed
Administrative/criminal investigative files	8
Grievance files	3
Employee Personnel	5
Employee Training	5
Offender/Intake screening files	8
Medical Files	2
Mental health Files	2
Total number of files reviewed	33

Close-Out

At the end of the onsite portion of the audit, an exit debriefing late in the evening on April 14, 2021 a summary of the findings was conducted with the Acting Warden/PCM and two Lieutenants. At the exit debriefing, the auditor gave an overview of the audit and commented on the on-site observations, interviews, and summarized the strengths and weaknesses after completing the Pre-Audit and On-Site Audit phases. Further discussion was held regarding Standard 115.41 and the risk assessment process. Facility staff were advised discussions would be continuing with the PREA Office regarding their progress with the needed changes in the OPUS system. Discussion regarding follow up on the cross-gender announcements concerning supervisors completing unannounced rounds was also held. There was a discussion to send the auditor additional documentation for a few minor issues and Pender staff ensured the information would be sent to the auditor within the next few weeks. Discussion regarding the privacy barriers was held and it was reported that the work order had already been submitted for the privacy barriers in the holding cells. The auditor shared that she would make contact with the PCM if any further items were needed. The auditor thanked the Acting Warden and his staff for their hard work and dedication to the PREA process.

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

Pender Correctional Center (Pender CI) is located in Burgaw, North Carolina in Pender County. The address is 906 Penderlea Highway, Burgaw, NC 28425. Ground was broken November 30, 1990 to build the then 756-bed medium security prison for adult males, adjacent to the 112-bed medium security Pender Correctional Center. The old medium security prison was established as a one-dormitory unit in 1935. It was one of 61 field unit prisons renovated or built during the late 1930's to house offenders who worked building roads. In 1978, inmates built a 28-cell unit for placing inmates in administrative and disciplinary segregation. A recreation building was constructed by offenders in 1986. In 1990, lawmakers provided \$18 million for a new 756-bed medium security prison at Pender and the first offenders moved into the new medium security housing area in March 1993. The facility has six dormitories with four wings in each unit, education buildings, recreation building, medical building, dining hall, operations center, administration building, programs building, gatehouse and chapel. Offenders are assigned to work in food service, grounds, maintenance, janitorial services and various programs the facility offers.

The age range of the offender population during the onsite portion of the audit was 21-67 years old. The facility does not house youthful offenders. The design capacity is (768). The offender count on the first day of the audit was (729). The facility staffing consists of security and non-security employees. Non-security staff include administrative staff, case management and programming staff, maintenance, medical and food service staff. The PAQ indicated there were (246) staff assigned to the facility. The daily operations are managed by Sergeants, Lieutenants and Captains who oversee correctional officers. There are two security shifts at the facility. The shift times are 0600-1800 hours and 1800-0600 hours.

The facility has a total of six (6) housing units with four (4) wings in each unit. Housing Units A, B, C, D, E, and F are general population units. Each housing unit wing is a single level open dormitory style unit. Offenders sleep in bunk beds in each area. Offenders have access to televisions, telephones, chairs and microwaves. The auditor observed PREA materials posted on the housing units, telephone numbers posted near the telephones and PREA posters throughout all areas of the facility. Each housing unit wing has a large shower and bathroom area. Each shower and toilet area has barriers that allow offenders the ability to shower, use the restrooms and change clothing without staff of the opposite gender being able to view them. Additional buildings on facility grounds include the Chapel, kitchen/dining facilities, gatehouse, programs building, canteen, maintenance, gymnasium/library, laundry, medical, clothes house, operations area, visitation area and an Administrative office area.

Under normal operations, Pender CI provides substance abuse programming, vocational and educational programs and a horticulture therapy program for offenders who have developmental disabilities. Several of these programs have been suspended over the past year due to Covid 19 restrictions.

Medical care and mental health services are offered by practitioners employed by the facility. Forensic medical exams are completed at the Pender Memorial Hospital. The facility has several staff members trained as PREA Support Persons who are available to offer advocacy support for offender victims of sexual abuse. The PREA Investigators work various shifts and would be called in to investigate any

situations of sexual abuse. The State Bureau of Investigation would conduct criminal investigations involving offenders. Criminal investigations may also be conducted by the Burgaw Police Department. Criminal cases involving staff would also be referred to the Office of Staff Investigations out of Raleigh.

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	0
Number of standards met:	40
Number of standards not met:	0
Not audited at the facility level: Audited at the agency-level, and not relevant to the facility-level audit because the facility has no independent responsibility for the operation of these standards.	5

The Auditor found the North Carolina Department of Public Safety has developed appropriate policies and procedures that aid in prevention, detection and response to sexual abuse and sexual harassment. The Auditor found the facility's staff are well trained and retained information provided through the agency's training efforts. The Auditor formally interviewed staff and determined staff understood their responsibilities in the agency's policies and procedures regarding the prevention, detection and response towards acts of sexual abuse and sexual harassment. Staff understand their roles as first responders to incidents of sexual abuse and sexual harassment. The Auditor determined the facility has been successful in developing a zero-tolerance culture towards all forms of sexual abuse and sexual harassment. The Auditor discovered the facility's leadership support its staff in the prevention, detection and response efforts. Facility leadership makes unannounced rounds throughout all facility areas to deter sexual abuse and sexual harassment.

The facility's population was educated regarding the agency's prevention, detection and response efforts towards sexual abuse and sexual harassment. Most offenders interviewed informed the Auditor they were confident in staff's abilities and felt staff would maintain confidentiality with sexual abuse related information. The Auditor observed staff interactions with the offender population while on site. All interactions were professional and appeared as if staff have developed appropriate working relationships with the population. The overall population interviewed by the Auditor felt safe in the facility.

A review of files and other documents revealed facility personnel are documenting actions in accordance with the NCDPS policies and procedures related to sexual abuse and sexual harassment. Each offender informed the Auditor facility staff are professional and take incidents and threats of sexual abuse or sexual harassment seriously. Formal interviews with staff revealed they are knowledgeable in the policies and procedures to prevent, detect and respond to incidents of sexual abuse and sexual harassment.

The agency ensures its investigators are trained to conduct sexual abuse and sexual harassment

investigations in confinement settings. Investigators understand how to conduct appropriate investigations following an allegation of sexual abuse and sexual harassment. The facility's investigator understands the requirement to refer criminal acts of sexual abuse to the local law enforcement agency for criminal investigation. Policy requires investigations be objective and are conducted promptly and thoroughly. Investigators are required to inform offenders of investigative determinations at the conclusion of each investigation. The facility would conduct an incident review of all allegations within 30 days of the conclusion of the investigation, unless the allegation was unfounded by the facility's investigator.

The Auditor determined the facility met (40) standards while (5) standards were audited at the agency level.

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● NCDPS-Prisons Policy F.1600 (Management of Security Posts, dated 8/12/2019) ● NC General Statute 14-27.7 Poster (Intercourse and sexual offenses with certain victims; consent no defense) ● Pender Correctional Institution Standard Operating Procedure Ch. 13.2 (Inmate Sexual Abuse and Sexual Harassment/Coordinated Response, dated 3/25/2019) ● NCDPS-Prisons Policy B.200 (Offender Discipline Procedure, dated 8/10/2018) ● NCDPS-Prisons Organization Chart (dated 9/4/2020) ● NCDPS website ● NCDPS-Prisons form OPA-A16, Designation of PREA Compliance Manager (dated 8/06/2019) ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● PREA Director (Coordinator) ● Pender CI PREA Compliance Manager <p>Findings:</p> <p>This auditor reviewed the North Carolina DPS-Prisons policy that addresses the department's support of the Prison Rape Elimination Act. The Pender Correctional Institution, as well as all other North Carolina DPS-Prison facilities, utilize agency Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) mandating zero tolerance towards all forms of sexual abuse and sexual harassment that applies to staff, contractors and volunteers. Policy F. 3400 also included definitions, provided training requirements of staff and described conduct of investigations involving PREA allegations. Policy F .3400, as well as Pender Correctional Institution Standard Operating Procedure Ch. 13.2 (Inmate Sexual Abuse and Sexual Harassment/Coordinated Response, dated 3/25/2019) clearly outlines the agency and facility's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019), NCDPS-Prisons Policy F.1600 (Management of Security Posts, dated 8/12/2019) and NC General Statute 14-27.7 (Intercourse and sexual offenses with certain victims; consent no defense) describe that fraternization or sexual misconduct between staff, contractors, volunteers and offenders. Each described the prohibited behaviors and sanctions if such behavior was discovered. NDPS-Prisons Policy B.200 (Offender Discipline Procedure, dated 8/10/2018) details sanctions that may be assessed to offenders found guilty of sexual</p>

assaultive behavior.

NCDPS's commitment of ensuring zero tolerance for sexual misconduct in all its institutions was observed during the onsite visit. This commitment was clearly observed by the posters, flyers and reporting systems in place for staff and offenders. Staff receive information regarding PREA during their initial academy as well as on-going training of staff during their annual in-service training.

The NCDPS-Prisons, agency-wide PREA Director (Coordinator) reports directly to the Professional Standards, Policy & Planning Chief Deputy Secretary, who in turn reports directly to the Secretary. This position works with sixty-nine (69) NCDPS facilities throughout the state implementing and guiding the agency's efforts toward PREA compliance. A written summary of an interview conducted by certified PREA Auditor Dorothy Xanos earlier in the audit cycle was reviewed. The summary review allowed this auditor to verify that the PREA Director (Coordinator) has enough time to ensure PREA standards are met and that all related concerns are addressed.

Each NCDPS facility has its own PREA Compliance Manager (PCM) that reports to the Warden. The Warden at the Pender Correctional Institution has appointed the Associate Warden as the current PCM. The PREA Compliance Manager at the Pender Correctional Institution addresses all PREA concerns that occur throughout the facility. He reported that he has sufficient time and authority to coordinate efforts to comply with PREA standards.

There is a definite commitment to the sexual safety and security of the staff and offenders at the facility. Based on interviews, documentation provided and observation of operations at the Pender Correctional Institution, this auditor believes the facility "meets" this standard.

Corrective Action:

None

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● NCDPS-Prisons Memorandum of Agreement with Center for Community Transitions ● Memo from NCDPS PREA Director, dated 10/02/2019 ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● PREA Director (Coordinator) ● Agency Contract Administrator <p>Findings:</p> <p>This standard is Not Applicable to the Pender Correctional Institution specifically as Pender CI does not contract for the housing of its' offenders. However, the NCDPS-Prisons does maintain one contract with the Center for Community Transitions for female offenders in need of treatment for access to substance abuse programming. The initial contract was effective July 2017. A review of the MOU contained the contractor's obligation to adopt and comply with the DOJ PREA Standards as well as ensuring that a PREA Audit is conducted by a certified DOJ PREA auditor. The agreement also required the Center for Community Transitions provide a copy of the final PREA report.</p> <p>Although this auditor did not personally interview the Contract Administrator, she accepts the information provided from a recent interview with DOJ certified PREA auditor, Dorothy Xanos. The interview detailed the agency's contract, policy and support of the PREA standards with full compliance. The interview with the PREA Director (Coordinator) confirmed the NCDPS-Prisons has entered into the MOU with the Center for Community Transitions as well as confirming that the contract is monitored by NCDPS-Prisons to ensure the Center for Community Transitions complies with the PREA standards.</p>

115.13	Supervision and monitoring
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • North Carolina General Statute 143B-709 Security Staffing • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Policy F.1600 (Management of Security Posts, dated 8/12/2019) • Pender Correctional Institution Standard Operating Procedure Ch. 13.2 (Inmate Sexual Abuse and Sexual Harassment/Coordinated Response, dated 3/25/2019) • Pender CI Staff Plan Analysis PREA Review, dated 12/17/2019 • Prisons Post Chart Review for Pender CI, dated 11/03/2020 • Pender CI Daily Shift Narratives documenting Unannounced Rounds covering multiple posts/shifts • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Pender CI Acting Warden • PREA Director (Coordinator) • Intermediate or Higher-Level Staff • Pender CI PREA Compliance Manager <p>Findings:</p> <p>Review of the North Carolina State Statute 143B-709, NCDPS-Prisons Policy F .1600 (Management of Security Posts, dated 8/12/2019) contained information requiring each facility to develop a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect offenders against sexual abuse.</p> <p>While state statute requires a staffing analysis every 3 years, the agency policy requires an annual review of the staffing plan, including a review of all required components of the standard, which was completed in December 2019. The December 2020 proposed staffing plan was also submitted. Interviews with the Acting Warden and other Intermediate-Higher Level Staff all stated that decisions are made with safety and security as the primary focus when reviewing the staffing plan. Based on the custody level of the offenders and open bay dormitory style housing at the facility, there are very few cameras placed throughout the facility.</p> <p>Facility Post Charts are developed in accordance with the staffing plan that is reviewed annually. The Post Charts indicate all positions for each shift. Staffing levels are adequate and still ensure high levels of safety and security.</p>	

Deviations from the staffing plan are documented on the Daily Shift Narrative Report by the Officer in Charge if necessary. The facility reported no deviations from the staffing plan in the last 12 months. Unannounced rounds are clearly documented on the Daily Shift Narratives of each housing unit/areas and over multiple shifts and rotations. These are conducted daily by the Officer in Charge (Sergeant) and documentation includes the date/time and location of the physical rounds. Interviews with higher level facility staff confirmed unannounced rounds throughout all areas of the facility each week and documented on the Daily Shift Narrative.

This auditor's review of logs from all areas confirmed unannounced rounds were being made by higher level supervisory staff on all shifts.

After thorough review of policies, SOPs, other supporting documents, interviews conducted, and observations this auditor determines the agency and the facility has met the requirements of this standard based on the above information.

Corrective Action:

None

115.14	Youthful inmates
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● Pender CI Facility Offender Roster ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Pender CI Acting Warden ● Pender CI PREA Compliance Manager ● Intake staff <p>Findings:</p> <p>The review of NDCPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment Policy, clearly requires that a youthful offender should not be placed in a housing unit in which the youthful offender will have sight, sound, or physical contact with any adult offender through the use of a shared dayroom or other common space, shower area, or sleeping quarters. Agency policy also requires that the facility maintain sight and sound separation between youthful offenders and adult offenders or provide direct staff supervision when youthful offenders and adult offenders have sight, sound, or physical contact.</p> <p>While youthful offenders are not assigned to the Pender CI, the agency does provide specialized housing for youthful offenders at other NCDPS-Prison facilities. While assigned at these other facilities, best efforts are made to avoid placing youthful offenders in isolation. Specialized housing arrangements for youthful offenders are provided throughout the agency to meet the requirements of this standard.</p> <p>The Pender Correctional Center does not house youthful offenders. Offenders housed at Pender CI are 18 years old or older. Interviews with the Acting Warden, Intake staff and the PREA Compliance Manager confirmed there are no youthful offenders housed at Pender CI as there are no offenders under the age of 18 able to be assigned to Pender CI. Facility offender rosters also confirmed there are no offenders under the age of 18 assigned to Pender CI. The youngest offender assigned and interviewed was 21 years old.</p> <p>After thorough review of policies, SOPs, other supporting documents, interviews conducted, and observations this auditor determines the agency and the facility has met the requirements of this standard based on the above information.</p> <p>Corrective Action:</p>

	None
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F .0100 (Operational Searches, dated 8/12/2019) • NCDPS-Prisons Policy F .1600 (Management of Security Posts, dated 8/12/2019) • NCDPS-Prisons Policy B.0300 (Offender Conduct Rules, dated 8/12/2019) • NCDPS Safe Search Practices Training Curriculum, dated 07/01/2019 • Cross Gender Announcement & Acknowledgement forms (OPA T.30.pdf) • Memo from DPS PREA Director reference PREA Cross-Gender Announcement, dated 5/25/2021 • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Pender CI PREA Compliance Manager • Random sample of Staff • Random sample of Offenders <p>Findings:</p> <p>Review of the NCDPS-Prisons Policy F .1600 (Management of Security Posts, dated 8/12/2019) and NCDPS-Prisons Policy F .0100 (Operational Searches, dated 8/12/2019) prohibits any cross-gender strip search or visual body cavity searches by staff of the opposite gender. Offenders are not allowed to be supervised by staff of the opposite gender while showering or in the toilet area unless appropriate privacy screening is provided to obscure the view of breasts, genitalia and buttocks. NCDPS-Prisons Policy B.0300 (Offender Conduct Rules, dated 8/12/2019) also requires offenders to cover themselves appropriately throughout specified areas of the facility. B.0300 also requires that offenders not be supervised by officers of the opposite gender while showering or in the toilet area unless appropriate privacy screening is provided to obscure from view the offender's breasts, genitalia and buttocks. Staff of the opposite gender are also required to announce their presence when entering a housing area and document such announcement on the shift log.</p> <p>The offender rulebook also requires offenders to be clothed while going to and from the shower and restroom areas. Facility procedures also prevent female staff from conducting strip searches, unless exigent circumstances require, at which point, the cross-gender strip search should be documented. The PREA Compliance Manager indicated the facility has had no cross-gender searches (pat, strip or visual body cavity) conducted over the past twelve (12) months. There were also no exigent circumstances of cross gender searches (pat, strip or visual body cavity) conducted over the past twelve (12) months.</p> <p>Offender interviews indicated that offenders felt they had the adequate ability to shower,</p>

perform bodily functions and change their clothing without non-medical staff of the opposite gender viewing them. During the tour, the auditor observed that offenders in A, B, C, D, E and F Dorms had the ability to shower, perform bodily functions and change their clothing without non-medical staff of the opposite gender viewing them. Placement of shower curtains and partial door coverings allowed for privacy but also allowed for security to be maintained.

In 2013, the NCDPS-Prisons PREA Administrator sent an email as part of its "Campaign of Awareness" regarding the development of a cross-gender bulletin board document and announcement that is to be shared with staff as well as a bulletin board poster. A Cross Gender Announcement and Acknowledgement Form (OPA-T30) was attached to the email, with directions that all staff were to sign and the original signed document was to be placed in the employee's personnel file. This form is still used today.

Review of the training curriculum, Safe Search Practices Training, indicated compliance with policy and the standard. The PCM provided curriculum that indicated pat searches, cross-gender pat searches, searches of transgender and intersex offenders are conducted in a respectful, professional manner and prohibits cross-gender strip searches as well as cross-gender visual body cavity searches of any offender. Curriculum also explains that a transgender or intersex offender should not be searched or physically examined for the sole purpose of determining the offender's genital status. Training records provided indicated that 100% of all security staff received training on conducting cross-gender searches and searches of transgender and intersex offenders in a professional and respectful manner consistent with security needs by attending the Safe Search Practices Training. PREA Acknowledgement Forms and Cross Gender Announcement & Acknowledgement forms are signed by all staff completing the PREA: Sexual Abuse and Sexual Harassment 101 & 201 courses and the PREA-Sexual Abuse and Sexual Harassment Medical & Mental Health Response training courses.

Staff interviews revealed that staff fully understand the circumstances that require staff of the opposite gender to announce their presence. Opposite gender announcements at the beginning of shift by female staff were observed by the auditor. The announcements at the beginning of shift are noted in the Shift Narrative Log by the OIC. There was discussion regarding opposite gender announcements being made by opposite gender supervisors making unannounced rounds. Clarification was gained and a notification memo was distributed to facility staff for clarification.

Staff were all able to articulate the search procedures and situations that would be considered exigent circumstances as well as the required authorizations and the required documentation to be completed. Staff were also aware that staff are not allowed to complete searches of transgender or intersex offenders to solely determine the genital status of the offender. Staff shared that they would conduct pat searches of a transgender or intersex offender in a private area if the individual offender requested.

After reviewing agency policy, training curriculum, training records, visually observing the shower and bathroom areas of the facility, observation of staff, interviewing staff and offenders, this auditor finds this standard in compliance.

Corrective Action:

None

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● NCDPS-Prisons Policy E .1800 (Non-English Speaking Offender Program dated 2/05/18) ● NCDPS-Prisons Policy E .2600 (Reasonable Accommodations for Offender with Disabilities dated 9/05/13) ● Health Services Policy & Procedure Manual, Policy # TX VII-1 (Developmental Disabilities, effective 8/2007) ● Health Services Policy & Procedure Manual, Policy # TX VII-2 (Physical, Mental or Cognitive Disabilities, effective 8/2009) ● Pender CI Orientation Booklet-Spanish version dated 1/07/2020 ● Statewide Term Contract 961C-Translation & Interpretation Services (Omnia Partners) ● Interpretation & Translation Services Access Contact Sheet ● NCDPS-Prisons Offender PREA Education Acknowledgement Form (Spanish and English versions) ● NCDPS-Prisons PREA Support Services form (English and Spanish) ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Intake Staff ● Pender CI PREA Compliance Manager ● Random sample of Staff ● Inmates identified with Disabilities or who are LEP <p>Findings:</p> <p>Review of the NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), NCDPS-Prisons Policy E .1800 (Non-English Speaking Offender Program dated 2/05/18) and NCDPS-Prisons Policy E .2600 (Reasonable Accommodations for Offender with Disabilities dated 9/05/13) provided information and guidance to ensure that offenders with disabilities, such as those who are deaf or hard of hearing, those who are blind or have low vision or those who have intellectual, psychiatric or speech disabilities have an equal opportunity to participate in and benefit from all of the protections of PREA. Health Services Policy & Procedure Manual, Policy # TX VII-1 (Developmental Disabilities, effective 8/2007) and Health Services Policy & Procedure Manual, Policy # TX VII-2 (Physical, Mental or Cognitive Disabilities, effective 8/2009) explains how specialized case management services are available for offenders that are identified as developmentally disabled, physically disabled</p>

or mentally disabled. The specialized case management includes assisting in orientation to the unit policies and procedures, representation at disciplinary proceedings and additional evaluations, if necessary. Offenders with Limited English Proficiency are afforded the same opportunities. Offenders who are observed to have difficulty understanding or speaking English are screened by use of an approved screening instrument. For new admissions, the screening will occur in the diagnostic center. For offenders who have completed diagnostic processing, the screening will be conducted at the facility by program or educational staff.

Upon arrival at the diagnostic center, all offenders receive a handbook that contains the agency's zero tolerance policy toward sexual abuse and sexual harassment, and how to report incidents or suspicions of sexual abuse and sexual harassment. The Offender Handbook is available in Spanish and English. Offenders sign a form indicating they have received this initial information. This form also allows staff to document if the offender needs any extra assistance for comprehending the information. When an offender transfers to another facility, they will not be provided a new Offender Handbook. Policy prohibits the facility from relying on offender interpreters, offender readers or other forms of offender assistants except when a delay in interpreter services could compromise an offender's safety, the performance of first responder duties or the investigation of the allegations.

A current contract is in place offering language translation, interpretation and American Sign Language services that staff can utilize when services are necessary for an offender with disabilities or for those who are limited English proficient. The Language Resource Center provides on-site interpreting, telephonic interpreting, video remote interpreting as well as document translation. This auditor observed that PREA informational posters are visible throughout the facility in both English and Spanish.

Initial PREA Education is provided by intake staff in a manner that ensures the offender comprehends the material presented and it is read to the offender during the intake process. Policy requires that within three calendar days of arriving at the Pender Correctional Institution, a PREA brochure be provided to the offender population included information on suspicious behavior, reporting, prevention strategies, making false claims, definitions of forms of sexual misconduct and retaliation. As with other material, it is available in an English and Spanish version. A Spanish version of the Offender Orientation Packet was also provided to each offender who needed.

During the on-site visit, three (3) physically disabled (ADA standard) offenders, two (2) limited English proficient offenders and two (2) offenders with cognitive disabilities were identified, interviewed and reported that they remembered being asked question regarding PREA when they came into the facility. Those offenders reported they understood information that staff presented and know reporting processes. Case management services are provided for any offender with any identified special needs. The PREA Compliance Manager reported there were no offender interpreters, assistance or readers that assisted another offender with reporting allegations of sexual abuse or sexual harassment.

Random staff interviews indicated staff, mostly supervisory staff, were aware of the Language Resource Center interpretation services. A few newer staff were not aware but said they would contact a supervisor. All staff were aware they were not allowed to utilize offender interpreters, offender readers or other types of offender assistants except in limited circumstances. Some staff reported that if an offender was LEP, he would more than likely be assigned to an LEP facility.

After reviewing agency policy, offender PREA Education presentation, interviewing staff and offenders, this auditor finds this standard in compliance.

Corrective Action:

None

115.17	Hiring and promotion decisions
	<p data-bbox="248 168 896 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 246 523 280">Auditor Discussion</p> <p data-bbox="248 324 1366 358">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="248 398 775 432">Information or Documents Reviewed:</p> <ul data-bbox="300 499 1461 918" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Administrative Memorandum Addendum from the NCDPS PREA Director, dated 10/13/2013 • HR 005 NCDPS Applicant Verification Form, dated December 2020 • HR 008 NCDPS Professional Reference Check Form, dated December 2020 • HR 013 NCDPS Employment Statements, dated December 2020 • Pender Correctional Institution Background Check Log • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="248 958 408 992">Interviews:</p> <ul data-bbox="300 1059 1305 1093" style="list-style-type: none"> • Administrative Specialist (Responsible for Human Resources duties onsite) <p data-bbox="248 1133 389 1167">Findings:</p> <p data-bbox="248 1207 1481 2007">Review of the NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and the Administrative Memorandum from the DPS HR Director dated 8/30/2013 with an Addendum from the DPS PREA Director dated 10/13/2013, prohibits the NCDPS-Prisons from hiring or promoting anyone who may have contact with offenders, and shall not enlist the services of any contractor who may have contact with offenders, who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse. Information on substantiated allegations of sexual abuse or sexual harassment involving a former NCDPS employee shall be furnished to any institutional employer the former employee has applied to work if the request was in writing. Pender Correctional Institution performs criminal background records checks on any potential new employee and contractor as well as individuals seeking promotion. Background records checks are also conducted on all current employees and contractors every five (5) years. Material omissions or providing false information is grounds for termination. Staff are obligated to disclose any arrests or previous misconduct within 24-hours of the event.</p> <p data-bbox="248 2047 1439 2125">Documentation received and reviewed prior to the onsite audit currently being utilized by NCDPS-Prisons require consideration of any incidents of sexual harassment when hiring or</p>

promoting employees or enlisting the services of any contractor. The Administrative Memorandum from the DPS HR Director dated 8/30/2013 requires the agency to consider any incidents of sexual harassment in determining to hire or promote anyone, or to enlist the services of any contractor.

NCDPS policy is required to perform criminal background records checks and consistent with any federal state or local laws, make best efforts to contact all prior institutional employers for any information on substantiated allegations of sexual abuse or any resignation during a pending allegation of sexual abuse. In the past twelve (12) months, the facility reported that thirty-five (35) individuals were hired who may have contact with offenders. In addition to employee applicants, zero (0) criminal background checks were completed on contracted staff over the past twelve (12) months as there were no contract staff hired by the facility in the past twelve (12) months. These individuals all had criminal background checks completed. The criminal records checks completed search for criminal convictions, pending criminal charges and driving records on a federal, state and local level. The criminal background checks are not conducted onsite. They are sent to NCDPS Central Office for completion.

The Administrative Specialist I was detailed in her explanation of the process of conducting criminal background checks on all new hire employees and contractors as well as any staff member being considered for a promotion. The Administrative Specialist I provided the document utilized to track when current employees and contractors are due for the five (5) year re-check of criminal records. The process to initiate the five (5) year criminal records check was explained. A selection of five (5) employee HR files were reviewed. There are no contract staff employed by the facility so there were no HR files reviewed for contract staff.

Two of the five (5) employee files reviewed also contained appropriate administrative paperwork for promotional purposes. She did report that if information was requested from an institutional employer for which a former employee has applied to work requests information on substantiated allegations of sexual abuse or sexual harassment, she would refer them to the Regional HR office. All HR files contained the appropriate applications and hiring forms that include the questions regarding any prior incidents of sexual misconduct. The forms reviewed were the NCDPS Applicant Verification Form, NCDPS Professional Reference Check Form and the NCDPS Employment Statement Forms.

After reviewing agency policy and procedures, a review of employee and contractor HR files, staff interviews, and the receipt of follow-up documentation, this auditor finds this standard in compliance.

Corrective Action:

None

115.18	Upgrades to facilities and technologies
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1366 360">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="252 405 775 439">Information or Documents Reviewed:</p> <ul data-bbox="300 506 1461 663" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Pender CI's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="252 707 408 741">Interviews:</p> <ul data-bbox="300 808 839 842" style="list-style-type: none"> • Pender CI PREA Compliance Manager <p data-bbox="252 887 392 920">Findings:</p> <p data-bbox="252 954 1461 1279">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires all designing and acquisition of new facilities and in planning substantial expansion or modification of existing facilities to consider the effect of the design, acquisition, expansion, or modification upon the facility's ability to protect offenders from harm, including sexual abuse. The policy also requires that any installing or updating of video monitoring systems, electronic surveillance systems, or other monitoring technology to be considered how such changes may enhance the facility's ability to protect offenders from harm, including sexual abuse.</p> <p data-bbox="252 1323 1461 1480">The Pender CI has not acquired a new facility or made substantial expansion or modification to its existing facility since August 20, 2012 or since the last PREA Audit in 2017. Pender CI has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the facility's last PREA audit in 2017.</p> <p data-bbox="252 1503 1461 1659">The facility installed a new digital video recorder and cameras had to be replaced when damaged in a lightning storm. Pender CI has eighty-two (82) cameras. Camera placement was internal and external included stationary and PTZ cameras. The cameras are monitored in the Operations Room and have an approximate 30-day recording capability.</p> <p data-bbox="252 1704 1461 1771">After reviewing agency policy and procedures, staff interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.</p> <p data-bbox="252 1816 504 1850">Corrective Action:</p> <p data-bbox="252 1895 328 1928">None</p>

115.21	Evidence protocol and forensic medical examinations
	<p data-bbox="248 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 282">Auditor Discussion</p> <p data-bbox="248 327 1366 360">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="248 405 775 439">Information or Documents Reviewed:</p> <ul data-bbox="300 506 1481 1693" style="list-style-type: none"> ● North Carolina General Statute 143B-1200 (Assistance Program for Victims of Rape and Sexual Offenses) ● North Carolina General Statute 114-12 (State Bureau of Investigation created; powers and duties) ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● Pender Correctional Institution Standard Operating Procedure Ch. 7.12A (Support Agreement for PREA Incidents (MOU with Burgaw Police Department), dated 3/01/2020) ● NCDPS Office of Special Investigations Policy DPS-SI-100 (OSI Authority to Conduct Investigations, dated 3/25/2019) ● NCDPS Training Curriculum, Specialized Investigations: Sexual Abuse and Harassment, dated 1/31/2013 ● Pender Memorial Hospital Emergency Department Policy 3.20, (Reported Sexual Assault, dated 11/2014) ● NCDPS-Prisons, Health Services Policy & Procedures, Policy # CP-18 (Sexual Abuse, dated 2/2014) ● NCDPS PREA Evidence Chain of Custody Form ● Form OPA I20 Incident Scene Tracking Log ● Memorandum of Understanding with Rape Crisis Center of Coastal Horizons Center, dated 04/12/2021 ● Memorandum from Commissioner of Division of Adult Corrections and Juvenile Justice (dated September 23, 2019) to the North Carolina Sheriff's Association ● PREA Support Person Training Modules on LMS ● Training Progress Report for PREA Support Person Training for the (9) designated PREA Support Person staff members ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p data-bbox="248 1738 408 1771">Interviews:</p> <ul data-bbox="300 1839 1114 2040" style="list-style-type: none"> ● Pender CI's PREA Compliance Manager ● SANE from Pender Memorial Hospital ● Rape Crisis Center, Coastal Horizons Center representative ● Staff designated as PREA Support Person ● Random sample of staff <p data-bbox="248 2085 392 2119">Findings:</p>

North Carolina General Statute 143B-1200 (Assistance Program for Victims of Rape and sexual Offenses), NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires administrative and/or criminal investigations be completed on all incidents of offender-on-offender sexual abuse or staff sexual misconduct. Investigations are to be conducted promptly, thoroughly, and objectively for all allegations. Evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings or criminal proceedings are utilized. Allegations of sexual abuse are referred for investigation to an agency with legal authority to conduct criminal investigations, unless the allegation does not involve potential criminal behavior. Individuals assigned to investigate allegations of sexual abuse or sexual harassment are required to attend specialized training that provides the skills and knowledge necessary to investigate Sexual Abuse and Harassment allegations that are made. These investigators are also required to complete the same PREA training (SAH 101 and SAH 102) courses that all staff are required to complete. NCDPS-Prisons investigators only conduct administrative investigations. The Burgaw Police Department would conduct an investigation involving potential criminal allegations. The agency sent a letter to all law enforcement agencies in the state on September 23, 2019 requesting their compliance with PREA standards in the event an investigation is completed. A current Memorandum of Understanding is in place between the Burgaw Police Department and the Pender Correctional Institution for completing PREA investigations that are potential criminal cases.

The facility reports that they do not house youthful offenders. The facility reports in their PAQ that the evidence protocol was adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

The above policies require and the facility reports that all offenders who experience sexual abuse are provided access to forensic medical examinations by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) at no financial cost to the offender. The facility currently utilizes the Pender Memorial Hospital to conduct all forensic exams. An interview with the SANE at the Pender Memorial Hospital indicated they are responsible for conducting all forensic exams from Pender CI. Both the facility and the SAFE/SANE reported no forensic medical exams had been conducted over the last twelve (12) months on offenders from Pender CI. Any evidence collected from a forensic exam is sent to the state's crime lab. Pender Memorial Hospital has a SANE on call after normal operating hours.

The facility was successful in securing a Memorandum of Understanding with a victim advocacy services from a rape crisis center for potential sexual assault victims. A MOU is in place with the Rape Crisis Center, Coastal Horizons Center, dated 04/12/2021. The Rape Crisis Center, Coastal Horizons Center will provide confidential emotional support to offenders who are victims of sexual abuse and will accompany an offender during a forensic exam.

Offenders are provided information from the Rape Crisis Center, Coastal Horizons Center during their orientation. A telephonic interview was held with a representative from the Rape Crisis Center, Coastal Horizons Center. She indicated there had been no calls from offenders assigned to Pender CI in the last twelve (12) months. In addition, NCDPS PREA Office sent a memo requiring all facilities identify staff to become trained to become a PREA Support Person (PSP). The PSP can accompany an offender (of the same sex), during a forensic

exam, accompany and support the offender victim through the investigatory interview and provides emotional support, crisis intervention and referrals. Pender CI currently has designated eleven (11) staff. These staff were screened for appropriateness to serve as a victim advocate and received specialized training (PREA Support Person Training). Staff interviews and training records confirmed the responsibilities of the PSP at the Pender CI.

In 2019, the Commissioner of Division of Adult Corrections and Juvenile Justice sent a memorandum to the North Carolina Sheriff's Association providing them information concerning investigations in accordance with the national PREA standards. It was noted in the memorandum "that it is the desire of the NCDPS that all assisting law enforcement entities also adhere to listed requirements to include offering all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by SAFEs or SANEs where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs and SANEs."

After reviewing agency policy and procedures, staff interviews, training records, MOU documentation and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● Pender Correctional Institution Standard Operating Procedure Ch. 7.12A (Support Agreement for PREA Incidents (MOU with Burgaw Police Department), dated 3/01/2020) ● NCDPS Website ● Memorandum from Commissioner of Division of Adult Corrections and Juvenile Justice (dated September 23, 2019) to the North Carolina Sherriff’s Association ● Pender CI’s PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Pender CI PREA Investigator ● Pender CI Acting Warden <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) require that administrative and/or criminal investigations be completed on all incidents of offender-on-offender sexual abuse or staff sexual misconduct. Investigations are to be conducted promptly, thoroughly, and objectively for all allegations. Allegations of sexual abuse and sexual harassment are referred for investigation to an agency with legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The referrals are to be documented. When a verified incident of sexual abuse of an offender by a staff member, contractor or volunteer and sexual abuse between offenders occurs, referrals are to be made to a local law enforcement agency or State Bureau of Investigations (SBI) for investigation and consideration for criminal prosecution. Pender CI staff assigned to investigate allegations of sexual abuse or sexual harassment are required to attend the PREA Training that all staff are required to participate in as well as specialized training in conducting sexual abuse investigations in confinement settings that includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in a confinement setting and criteria and evidence required to substantiate a case for administrative action or referral for prosecution. Allegations involving staff are also to be reported to the Office of Special Investigations. NCDPS facility investigators only conduct administrative investigations while criminal investigations are referred to Burgaw Police Department or the State Bureau of Investigations (SBI). A Mutual Aid Agreement is in place with the Burgaw Police Department and the Pender Correctional Institution for completing all PREA investigations that are potential criminal cases. The</p>

Burgaw Police Department provides investigative services on a 24-hour basis for allegations of sexual abuse has the legal authority to conduct criminal investigations in the facility.

Staff refers all allegations of sexual abuse and harassment to their Regional office and the NCDPS PREA Office. The appropriate information regarding the investigation is entered to their internal OPUS system. The PREA policy, Offender Sexual Abuse and Sexual Harassment Policy, is found on the NCDPS website. The Auditor reviewed the North Carolina Department of Public Safety website. The NCDPS website includes a link to access the agency's Offender Sexual Abuse and Sexual Harassment policy. The policy includes the agency's responsibilities while investigating allegations of sexual abuse and sexual harassment. The policy informs all allegations that appear to be criminal in nature are referred to the local law enforcement agency. The public is informed of the agency's zero-tolerance towards sexual abuse and sexual harassment.

Pender CI reported eight (8) allegations of sexual abuse and sexual harassment resulting in an administrative investigation in the past twelve (12) months. There were three (3) allegations of sexual abuse and sexual harassment referred for criminal investigation in the past twelve (12) months. None of which were substantiated. The PCM tracks all of the sexual abuse and sexual harassment investigations at the facility.

In 2019, the Commissioner of Division of Adult Corrections and Juvenile Justice sent a memorandum to the North Carolina Sheriff's Association providing them information concerning investigations in accordance with the national PREA standards. Interviews with the Acting Warden and Investigative staff confirmed that administrative or criminal investigations are completed for all allegations of sexual abuse or sexual harassment. Any internal investigation that identifies criminal activity or reveals that a staff member is involved is immediately referred to the Burgaw Police Department or SBI. The facility investigator acts as a liaison with investigator from the Burgaw Police Department as well as keeping the Acting Warden updated on the progress of the sexual abuse investigation.

No department of justice component is responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in the Pender Correctional Institution.

After reviewing agency policy and procedures, staff interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● NCDPS-Prisons Policy A.0900 (Employee Training, dated 1/7/2021) ● New Employee Orientation Manual (June 6/25/2020) ● NCDPS PREA: Sexual Abuse and Sexual Harassment 101 Training Curriculum (rev. 7/1/2019) ● NCDPS PREA: Sexual Abuse and Sexual Harassment 201 Training Curriculum (rev. 7/1/2018) ● NCDPS PREA: Staff and Offender Relationships Training Curriculum (rev 7/01/2019) ● Learning Management Systems Instructions ● Staff PREA Informational Poster ● OPA-T10 Form-PREA Orientation Acknowledgement Form ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Random sample of Staff ● Human Resources Staff <p>Findings:</p> <p>In accordance with the NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and NCDPS-Prisons Policy A.0900 (Employee Training, dated 1/7/2021) require that all new employees should receive Sexual Abuse and Harassment 101 as well as annual refresher training. The training contains all ten required components of the standard which include: (1) The agency's zero tolerance policy for sexual abuse and sexual harassment, (2) How to prevent, detect, report and respond to allegations of sexual abuse and sexual harassment, (3) Offender's rights to be free from sexual abuse and sexual harassment, (4) The rights of offenders and employees to be free from retaliation for reporting sexual abuse and sexual harassment, (5) The dynamics of sexual abuse and sexual harassment in confinement, (6) The common reactions of sexual abuse and sexual harassment victims, (7) How to detect and respond to signs of threatened and actual sexual abuse, (8) How to avoid inappropriate relationships with offenders, (9) How to communicate effectively and professionally with offenders, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming offenders; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</p> <p>All new employees are required to read the NCDPS Employee PREA brochure and sign the</p>

PREA Acknowledgement Form. The PREA Acknowledgement Forms are stored in each employee's personnel file in the Human Resources Office. This auditor observed the PREA Acknowledgement Forms in all staff personnel files that were reviewed. By signing the form, staff acknowledge that they received the training and understand their responsibilities in reporting incidents of sexual abuse and sexual harassment. All employees are trained as new hires, regardless of their previous experience. Training is tailored to both genders, as well as juveniles/youthful offenders, so additional training is not necessary.

All staff receive Sexual Abuse and Harassment 101 refresher training every two years and Sexual Abuse and Harassment 201 refresher information during the alternate years emphasizing the zero-tolerance and duty to report, as well as covering current sexual abuse and sexual harassment policies and procedures. Other training is also provided through the LMS system that staff can participate in when the training is assigned to them. In addition, information is shared during shift line-ups and through PREA Bulletins. Training records indicate staff completed the required training during the last training year. Employee training records are electronically maintained. Each employee has their individual log on to the Learning Management System (LMS). LMS is the online system utilized by the NCDPS-Prisons. Upon completion of courses staff acknowledge their completion through an electronic signature or completing the required test or course evaluation.

After reviewing agency policy and procedures, staff interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● NCDPS-Prisons Policy F .0604 (Community Volunteer Program, dated 7/01/10) ● PREA Sexual Abuse and Harassment 101 Training Curriculum ● PREA Information for Person (s) with Direct and Indirect Contact with Offenders Acknowledgement Forms ● Volunteer Training Packets ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <p>Random Volunteers and Contractors</p> <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), and NCDPS-Prisons Policy F .0604 (Community Volunteer Program, dated 7/01/10) require that all volunteers and contractors who will have contact with offenders have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection and response. Volunteers and contractors will receive the PREA: Sexual Abuse and Harassment 101 training as part of initial orientation. The volunteer/contractor is required to verify their understanding of the training by signing the PREA Acknowledgement Form as well as signing the Volunteer Orientation Form indicating completion of the full Orientation Program. The facility reported in its PAQ that (93) volunteers and (4) contract staff have been trained in agency policies and procedures regarding sexual abuse and sexual harassment prevention, detection and response policies and procedures. Due to the recent Covid 19 restrictions, there has been no volunteer trainings conducted over the last 12 months so several volunteers/contractors have expired statuses but as soon as the facility is able to, Volunteer Orientation and training will begin again. Interviews with volunteers/contractors indicated they had received training on their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response.</p> <p>The level and type of training provided to volunteers and contractors is based on the services they provide and the level of contact they have with the offenders. All volunteers and contractors who have contact with offenders are notified of the zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. Volunteers and contractors are required to completed the Sexual Abuse and Harassment 101 training and sign the PREA Acknowledgement Form upon completing the training. Volunteer record</p>

files were reviewed and documentation existed acknowledging their requirement for confidentiality, their duty to report incidents of sexual abuse and sexual harassment as well as an understanding of their responsibilities under the agency policy regarding sexual abuse and sexual harassment prevention, detection and response. Telephonic interviews with three (3) Religious volunteers, one (1) Music volunteer were conducted. These volunteers all confirmed they completed the Sexual Abuse and Harassment 101 training and attended the Volunteer Orientation. They also openly shared their knowledge about NCDPS zero tolerance and their duty to report sexual abuse and harassment.

After reviewing agency policy and procedures, staff/volunteer interviews, documentation and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● Offender PREA Brochure (English and Spanish, dated 2/04/2014) ● Translation and Interpretation Services Contract for period Oct 7, 2019 thru March 14, 2022 ● Pender CI Orientation Booklet (English and Spanish versions, dated 7/01/2020) ● Offender PREA Education Acknowledgement Form ● Education Upon Transfer Email (dated 8/2/2013) ● Ways to Report Poster ● Pender CI Offender Orientation Talking Points ● External Reporting Agency (Forgiven Ministries) Memo from PREA Director, dated 6/08/2018 ● Offender Announcement PREA External Reporting Phone Line Talking Points ● Examples of Pender CI Transfer List with Offender PREA and Orientation Acknowledgement forms ● Offender Case Management Notes ● Offender Records Files reviewed on site ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Orientation Staff-Case Management ● Random sample of Offenders <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires that offenders receive information at the time of reception about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. The Pre-Audit Questionnaire indicates that there were (599) offenders all of which received education on PREA's zero-tolerance policy and reporting methods for sexual abuse and sexual harassment incidents.</p> <p>Upon arrival at the facility, offenders receive a PREA educational brochure that contains information on ways to report incidents of sexual assault or sexual harassment. Within 30 days of the offender's arrival at Pender CI, a comprehensive education orientation is provided again to offenders by Case Management Staff in the Chapel area. Offenders are educated regarding their rights to be free from both sexual abuse and sexual harassment and retaliation</p>

for reporting such incidents and on agency policy and procedure for responding to such incidents, to the extent that the policies and procedures of the new facility differ from those of the previous facility. Appropriate provisions are made as necessary for offenders not fluent in English, persons with disabilities and those with low literacy levels. The facility orientation is in written and video formats. Upon completion of the comprehensive education, all offenders sign the Offender Acknowledgement Form acknowledging they attended PREA Orientation. The offender receives a copy of the Offender Acknowledgement Form while the original is maintained in the Offender Records File. Case Management staff also make a notation in the offender's Case Manager Note section in the OPUS system.

Offender files were reviewed and dates on the Offender Acknowledgement Forms were within the appropriate time frames in accordance with this standard. Several random offenders reported during their interviews that they remembered receiving information regarding PREA the day they arrived and again at a later date. Covid 19 has delayed some participants face to face contact education but as soon as possible after being released from quarantine or isolation status, the appropriate conversations are held. PREA posters were highly visible in all areas of the facility and information was in the Orientation Booklet all offenders are all provided.

After reviewing agency policy and procedures, staff and offender interviews, and documentation provided this auditor finds this standard in compliance.

Corrective Action:

None

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● OPUS Incident Reporting Lesson Plan: PREA Investigation (March 2011) ● Coordinated Response Overview Flowchart ● NCDPS Specialized Investigations: Sexual Abuse and Harassment Lesson Plan, dated 1/31/2013 ● LMS Training Progress Summary of Five (5) assigned Investigators indicating completion of Specialized Investigations: Sexual Abuse and Sexual Harassment Training course ● LMS Training Progress Summary of Five (5) assigned Investigators indicating completion of Specialized Investigations: Sexual Abuse and Sexual Harassment Training course ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Pender CI Investigative Staff <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires staff assigned as investigators to complete training on conducting sexual abuse and sexual harassment investigations in a confinement setting. This required training includes: Techniques for Interviewing Sexual Abuse Victims; Proper use of Miranda and Garrity Warnings; Sexual abuse evidence collection in a confinement setting; and Criteria and evidence required to substantiate a case for administrative action or prosecution referral. When the staff investigators complete the specialized Investigator Training, it is documented in the staff training records in the Learning Management System.</p> <p>The NCDPS Specialized Investigations: Sexual Abuse and Harassment training lesson plans were developed by the NCDPS PREA Office. All staff selected as PREA Investigators must complete this training prior to be assigned to conduct administrative investigations. There are currently five (5) staff currently assigned to the Pender CI who have completed the NCDPS PREA Specialized Investigations: Sexual Abuse and Harassment training. Training records for the five (5) trained investigators was provided and verified completion of the required specialized training at various dates as well as completing their required annual PREA training. Interviews with the investigative staff confirmed that the specialized investigator training included interviewing techniques on sexual abuse victims, information on proper usage of</p>

Miranda and Garrity warnings, evidence collection and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

In accordance with the NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) and interviews with trained investigative staff, when a Sexual Abuse/Sexual Harassment investigation is assigned to them, a preliminary administrative investigation is initiated. If at any point in the preliminary investigation the investigator feels a situation could be criminal, a referral is made to the Burgaw Police Department or State Bureau of Investigations for further investigation and determination of criminal charges.

After reviewing agency policy and procedures, staff interviews, review of investigative packets and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Sexual Abuse and Sexual Harassment Medical and Mental Health Response Training Curriculum, dated 2012 • LMS Training Progress Summary of Medical and Mental Health Staff indicating completion of PREA Sexual Abuse and Sexual Harassment Medical and Mental Health Response training course • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Medical and Mental Health practitioners <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires medical and mental health care practitioners to complete the mandated PREA Sexual Abuse and Sexual Harassment 101 and 201 training required for all NCDPS-Prisons staff. In addition, all full and part-time medical and mental health care practitioners who work regularly in the facility are required to be trained in: Detecting and assessing signs of sexual abuse and sexual harassment; Preserving physical evidence of sexual abuse; Responding effectively and professionally to victims of sexual abuse and sexual harassment; and How to and whom to report allegations or suspicions of sexual abuse and sexual harassment. The Sexual Abuse and Sexual Harassment Medical and Mental Health Response Training Curriculum covers all components of the PREA Standard.</p> <p>A review of the training records of medical and mental health staff indicated completion of PREA: Sexual Abuse and Sexual Harassment 101 & 201 as well as PREA Sexual Abuse and Sexual Harassment Medical & Mental Health Staff Response. The facility reported that there were currently twenty-one (21) Medical and Mental health staff who work regularly at the facility who received the training required by policy. Training records and training completion certificates confirmed training was completed by both the medical and mental health staff member. Medical and mental health staff sign the PREA Acknowledgement Form as well as the Cross Gender Announcement & Acknowledgement Form during their New Employee Orientation also. Interviews conducted with medical and mental health staff confirmed that they completed the required training. They shared that the training included information on detecting and assessing signs of sexual abuse and sexual harassment, preserving any physical evidence of sexual abuse, responding effectively and professionally to sexual abuse</p>

and harassment and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment to. The Medical staff at the Pender CI does not conduct forensic exams.

After reviewing agency policy and procedures and staff interviews this auditor finds this standard in compliance.

Corrective Action:

None

115.41	Screening for risk of victimization and abusiveness
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1366 360">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="252 405 775 439">Information or Documents Reviewed:</p> <ul data-bbox="300 506 1485 1133" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Policy TX-I13, Evaluation & Management of Transgender Offenders, dated August 2018 • NCDPS-Prisons Diagnostic Center Procedures 305 (Psychological and Psychiatric Referral, dated 01/01/2014) • Screening Inventory Update Power Point Presentation, dated April 2021 • Risk to Sexual Victimization and Abusiveness Screening Guide-Prisons (revised 04/26/2021) • Memorandum from Director Rehabilitative Services regarding PREA Screening revisions effective 04/30/2021 • Memorandum from Assistant Commissioner, Prisons Administration and NCDPS PREA Director regarding Civil Immigration dated 4/19/2021 • Offender Initial Assessments and Reassessments • Pender CI's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="252 1178 408 1211">Interviews:</p> <ul data-bbox="300 1279 1171 1435" style="list-style-type: none"> • Pender CI Case Manager (Staff Responsible for Risk Screening) • Pender CI Acting Warden • Pender CI PREA Compliance Manager • Random sample of Offenders <p data-bbox="252 1480 389 1514">Findings:</p> <p data-bbox="252 1559 1477 1839">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Health Services Policy and Procedures Manual, Policy TX-I13, Evaluation & Management of Transgender Offenders, NCDPS-Prisons Diagnostic Center Procedures 305 (Psychological and Psychiatric Referral, dated 01/01/2014) and the Risk to Sexual Victimization and Abusiveness Screening Guide-Prisons (revised 04/26/2021) were all reviewed. Policy F.3400 requires all offenders receive a mental health screening administered via the web-based OPUS intake system, within (72) hours after their admission to Prisons.</p> <p data-bbox="252 1850 1461 1928">Diagnostic Services staff conduct screening to determine an offender's risk of being sexually abused by other offenders or their risk of being sexually abusive towards other offenders.</p> <p data-bbox="252 1962 1477 2130">The screening shall use an objective screening instrument that obtains the following minimum criteria to assess offenders for risk of sexual victimization: Whether the offender has a mental, physical, or developmental disability; The age of the offender; The physical build of the offender; Whether the offender has previously been incarcerated; Whether the offender's</p>

criminal history is exclusively nonviolent; Whether the offender has prior convictions for sex offenses against an adult or child; Whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; Whether the offender has previously experienced sexual victimization; and The offender's own perception of vulnerability; The intake screening does not however, consider, at a minimum, whether an offender is detained solely for civil immigration purposes. NCDPS researched the requirement across various disciplines: Prisons Administration, General Counsel's Office and Information Technology and has determined that circumstances do not exist where NCDPS would house an offender solely for civil immigration purposes. Therefore, they believe this section of the standard is inapplicable to NCDPS.

The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse (as known to the agency) in assessing offenders for risk of being sexually abusive. Policy F.3400 also requires that within a set time period not to exceed thirty (30) days from the offender's arrival at the facility, the facility will reassess the offender's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening. The policy also prohibits disciplining offenders for refusing to answer or for not disclosing complete information related to questions regarding whether the offender has a mental, physical, or developmental disability, whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming, whether the offender has previously experienced sexual victimization and the offender's own perception of vulnerability during the screening or assessment process.

Recent revisions to the screening instrument in OPUS and the language in the Risk to Sexual Victimization and Abusiveness Screening Guide bring NCDPS into compliance with standard 115.41 component. Language now reflects that at intake/diagnostics, offenders will have an initial assessment within (72) hours and be reassessed within (30) days of arrival at the intake/diagnostics facility. In addition, language now exists that the screening of offenders upon transfer normally occurs within (72) hours and reassessment again within (30) days of arrival at the transfer facility. Reassessments should also occur every six months with the case management requirements and when warranted due to a referral, request, incident of sexual abuse or when in receipt of additional information that is relevant to the offender's risk of victimization or abusiveness.

The Offender Population Unified System (OPUS) automatically calculates if the offender is considered high-risk for victimization and/or high-risk for abusiveness based on the responses from the screening inventory at an offender's initial assessment performed at a Diagnostic Center. Upon arrival to Pender CI (within 72 hours) the intake staff completes a screening inventory of the offender. Offender records were reviewed and indicated that the offenders' intake screenings were all completed within (72) hours of their arrival at Pender CI. Case Management staff reported that if an offender's intake screening is not done on their day of arrival, it is done the next day after their arrival at Pender CI.

The information gained from the screening for risk of victimization and abusiveness is strictly limited to staff on a "need to know basis" and staff with the appropriate profile(s) can generate reports that list all offenders identified as high-risk for victimization and/or abusiveness. The information in the report is used in determining housing, bed, work, education and program assignments with the goal of keeping offenders who are high risk of being sexually victimized

separated from those who are at high risk for being sexually abusive. The facility should make individualized determinations about how to ensure the safety of each offender.

Policy F.3400 and the updated NCDPS-Prisons Risk to Sexual Victimization and Abusiveness Screening Guide require screening of offenders: at intake/diagnostics normally occurs within (72) hours and reassessed within thirty (30) days from the offender's arrival at the intake/diagnostics facility. OPUS continuously reassesses the offender's risk based on relevant data. On transfer, screening of offenders normally occurs within (72) hours and reassessed within (30) days. An alert displays and the ability to conduct the reassessment will occur after (15) days of admission. OPUS continuously reassess the offender's risk based on relevant data.

According to the PAQ, the facility reassessed 100% of the 679 offenders who entered the facility within the past (12) months whose length of stay in the facility was for (72) hours or more and who were screened for risk of sexual victimization or risk of abusing other inmates. The facility also reported that (599) offenders who entered the facility whose length of stay was for (30) days or more who were reassessed for their risk of sexual victimization or of being sexual abusive within (30) days. Documentation initially presented did not indicate both reassessments were occurring but once the update to the Risk to Sexual Victimization and Abusiveness Screening Guide were put in place, proper reassessments were occurring at the prescribed times putting the facility in compliance with the standard.

After reviewing recent updates and a sample of reassessments of the offender population from Pender CI this auditor finds the facility in compliance with the standard.

Corrective Action:

None

115.42	Use of screening information
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 1364 358">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="252 392 774 425">Information or Documents Reviewed:</p> <ul data-bbox="295 504 1468 963" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Diagnostic Center Procedures 305 (Psychological and Psychiatric Referral, dated 01/01/2014) • Policy TX-I13, (Evaluation & Management of Transgender Offenders, dated 8/2018) • Risk to Sexual Victimization and Abusiveness Screening Guide-Prisons (revised 04/26/2021) • Pender CI High-Risk Victim and High-Risk Aggressor Tracking Form used for reviewing Housing, Bed, Work, Education and Program Assignments • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="252 996 406 1030">Interviews:</p> <ul data-bbox="295 1097 965 1220" style="list-style-type: none"> • Pender CI PREA Compliance Manager Interview • Pender CI Acting Warden • Pender CI Case Management staff <p data-bbox="252 1254 391 1288">Findings:</p> <p data-bbox="252 1332 1484 2094">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Health Services Policy & Procedure Manual Policy TXI-13 (Evaluation and Management of Transgender Offenders August 2018) and the Risk to Sexual Victimization and Abusiveness Screening Guide (revised 4/26/2021) requires the information used from the risk screening required by PREA Standard 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive. The agency and facility make individualized determinations about how to ensure the safety of each offender based on data gathered from the risk assessment, information from medical/mental health screenings, additional records reviews, information obtained from the offender and observations made by staff. A transgender or intersex offender's own view with respect to his own safety is given serious consideration when making facility and housing placement decisions and programming assignments. A few areas that staff consider when assigning offenders is what is the specific housing area design, the level of staff supervision, presence of surveillance equipment and if an area is an isolated area. The policy does prohibit placing gay, bisexual, transgender or intersex offenders in dedicated housing units or wings solely on the basis of such identification or status. Reviews of offenders identified as high-risk abusiveness and identified as high-risk victimization is required to be completed weekly.</p>

The Pender CI Case Managers are responsible for screening each offender that enters the facility. The Case Manager utilizes information in the offender's OPUS file to make decisions on housing, bed, work and other assignments to ensure each offender is safe while assigned to the facility. The Associate Warden is responsible for ensuring those on the list for high risk for abusiveness are not placed with those at high risk for victimization. The system is configured to automatically calculate risk and identify offenders at high risk for sexual victimization and high risk for sexual abusiveness. A report can be generated that identifies offenders in each category for staff to review. Mental Health Staff and Case Management staff utilize information in the OPUS when reassessing the placement and programming assignments for each transgender or intersex offender at least twice each year in order to review any threats to safety experienced by the offender. The OPUS system automatically generates the standard required assessments and information within the OPUS system is limited to only those staff that need to know. After a review of offender files there were five (5) offenders identified as transgender that were assigned to the facility during the onsite audit.

Interviews conducted with the Pender CI PCM (Associate Warden) indicated that the facility would take into consideration on a case-by-case basis whether an offender's housing and program assignment would ensure the offender's health and safety and whether the assignment would present management or security problems. While conducting the onsite tour, the auditor toured housing, bed, work and program areas. Staff explained that offenders who are identified as HRV (high-risk for victimization) are placed in closer proximity to the staff in the housing units, and away from those identified as HRA (high-risk aggressor). Interviews confirmed that at intake, the results of the screening are used to determine housing and bed assignment. Interviews with the transgender offenders also revealed that the transgender offender's own views as to their own safety is given serious consideration when making housing and programming assignments.

NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) states in part, "Transgender or intersex offenders shall be given the opportunity to shower separately from other offenders." Interviews with the transgender offenders, PCM and staff involved in the risk screening indicated that offenders that identify as transgender or intersex are provided the opportunity to shower separately from other offenders. At Pender CI offenders identified as transgender or intersex are provided the opportunity to shower at separate times than the other offenders. However, none of the transgenders chose to take advantage of showering at separate times because of the measures already in place in the shower and bathroom areas with the barriers and shower curtains in place. The transgender offenders denied being assigned to a dedicated housing unit while at Pender CI. The transgender offenders were complimentary of the staff at Pender CI in regards to ensuring his safety and considering their opinions and input. Pender CI was not under a consent decree, legal settlement, or legal judgement for the purpose of protecting lesbian, gay, bisexual, transgender or intersex offenders.

After reviewing agency policy and procedures, staff interviews, offender interviews and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.43	Protective Custody
	<p data-bbox="248 170 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 282">Auditor Discussion</p> <p data-bbox="248 327 1366 360">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="248 405 775 439">Information or Documents Reviewed:</p> <ul data-bbox="300 506 1461 875" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Diagnostic Center Procedures 305 (Psychological and Psychiatric Referral, dated 01/01/2014) • Policy TX-I13, (Evaluation & Management of Transgender Offenders, dated 8/2018) • Risk to Sexual Victimization and Abusiveness Screening Guide-Prisons (revised 04/26/2021) • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="248 920 408 954">Interviews:</p> <ul data-bbox="300 1021 839 1099" style="list-style-type: none"> • Pender CI Acting Warden • Pender CI PREA Compliance Manager <p data-bbox="248 1133 392 1167">Findings:</p> <p data-bbox="248 1211 1485 1794">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires that offenders at high risk for sexual victimization shall not be placed in restrictive housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. The facility is required to document the basis for the facility's concern for the offender's safety, the reason why no alternative means of separation can be arranged and the duration of the limitation. Policy allows an offender may be held in restrictive housing up to 24 hours until an assessment is completed. Policy also requires that offenders placed in restrictive housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility does have to restrict on offender's access to programs, privileges, education, or work opportunities, the facility shall document the opportunities that have been limited, the duration of the limitation and the reasons for such limitations. Any information regarding any such situations would be documented in the OPUS system.</p> <p data-bbox="248 1839 1469 2040">Pender CI PCM reported that there were no offenders who were at risk of sexual victimization who were held in involuntary segregated housing in the past twelve (12) months awaiting completion of an assessment of alternative means. The design and operations of the facility allow for a variety of options of housing if necessary. The Acting Warden and the PREA Compliance Manager both reported they would transfer the offender as an alternative.</p> <p data-bbox="248 2085 1469 2152">After reviewing agency policy and procedures, staff interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.</p>

	Corrective Action:
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	None
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● Orientation Paperwork containing reporting information ● Agency Website-PREA, Undue Familiarity ● Ways to Report Posters ● Report Fraud, Waste, Abuse or Misconduct flyer ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● PREA Compliance Manager ● Random Sample of Offenders ● Random Sample of Staff ● Rape Crisis Center of Coastal Horizons Center representative <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires that multiple internal ways should be provided for offenders to privately report sexual abuse and sexual harassment, retaliation by other offenders or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Ways of reporting incidents of sexual abuse and harassment include reporting to any departmental employee/volunteer/contract staff, utilizing the administrative remedy process (grievance), writing the PREA Office, to a third party- including family members, friends, and outside organizations, a local rape crisis center, and/or utilizing the toll-free number for reporting directly to an external agency/entity (Project Inmate Reporting Sexual Abuse). While touring the facility, signage was observed in multiple areas in each housing unit/living unit. The signage included instructions and numbers that can be called to report incidents of sexual abuse/assault. Additional signage provided contact information for Offender reporting, Family & Friends Reporting, Employee Reporting and Employee Responsibilities. One of the numbers is automatically programmed into the Offender Calling System as (*63). This number was called by the auditor during the onsite portion of the audit and the auditor was able to speak with an individual on the other end of the line and did not get a recording. Third party reporting can be made via email, phone or letter. When offenders arrive at the facility, they are provided a document that explains how to report incidents anonymously. The offenders are also provided a PREA External reporting number as well as access to a Rape Crisis Center (Rape Crisis Center of Coastal Horizons Center). The auditor interviewed staff from the Rape Crisis Center of Coastal Horizons</p>

Center. The Rape Crisis Center of Coastal Horizons Center representative indicated that there had been no calls from offenders from Pender CI during the past (12) months requesting any emotional support services related to a sexual abuse or sexual harassment occurring at the facility.

When offenders participate in Orientation, they are provided a pamphlet regarding Sexual Abuse Awareness, to include different ways to report incidents of sexual abuse and sexual harassment. The pamphlet also explains the partnership between NCDPS-Prisons and Forgiven Ministry to provide external reporting for offenders that are victims of sexual abuse and sexual harassment. The form provides a telephone number to call as well as an explanation of the offender's rights in regard to sexual safety. Reports received by Forgiven Ministry are immediately forwarded to agency officials, allowing the offender to remain anonymous upon request.

The "PREA: Ways to Report" is a poster that was observed throughout the facility during the tour and includes methods for staff, offenders and visitors to report sexual abuse or sexual harassment.

Even though the facility does not house offenders detained solely for civil immigration purposes, policy still requires that offenders detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the US Department of Homeland Security.

Policy also requires that staff accept reports of sexual abuse and sexual harassment that are made verbally, in writing, anonymously or from a third party. Each employee has a duty to report any and all violations and are to immediately notify their OIC and document verbal reports made to them through the Incident Reporting System. Policy also allows staff to privately report sexual abuse and sexual harassment of offenders. The ways for staff to report are defined in the policy and is also included on the Ways to Report posters that are prominently posted throughout all areas of the facility. The Ways to Report posters indicate that staff can report via their chain of command, sending an email or placing a call to the PREA Office, or contacting the NCDPS Fraud, Waste, Abuse or Misconduct Hotline.

Interviews with random offenders confirmed they were educated on how to report sexual abuse and sexual harassment utilizing the hotline numbers posted on each housing unit.

Most offenders were aware of where to go to find reporting methods in their Orientation paperwork. Interviews with random staff confirmed they were all comfortable in reporting situations to their OIC and knew additional ways to report were on the posters.

After reviewing agency policy and procedures, staff and offender interviews, interviews with external entity and observations made during the onsite portion of the audit, this auditor finds the facility meets this standard based on the multiple reporting methods provided for the offender population and staff.

Corrective Action:

None

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy G .0300 (Administrative Remedy Procedure, dated 8/01/13) ● NCDPS-Prisons Offender Rules and Policies Handbook ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Random Sample of Staff ● Random Sample of Offenders <p>Findings:</p> <p>NCDPS-Prisons Policy G .0300 (Administrative Remedy Procedure, dated 8/01/13) allows an offender to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident occurred. Policy requires all grievances that are filed regarding allegations of sexual abuse or sexual harassment be forwarded to the Warden for appropriate action in accordance with PREA. Immediate notification of the NCDPS PREA Office is also required. Offenders are educated and advised of the Administrative Remedy Procedure during their Orientation at all Diagnostic Centers. Offenders are provided both written material and an oral explanation of the procedure and provided the opportunity to ask questions regarding the grievance procedure. Offenders are permitted to request assistance in understanding the process and also in completing a grievance. Third parties are permitted to assist an offender in submitting a grievance regarding allegations of sexual abuse and are also permitted to submit such a grievance. Outside third parties may include other offenders, staff members, family members, attorneys and outside advocates. The policy allows that the alleged offender victim agree to have the grievance submitted on his behalf. If the offender declines to have the grievance processed on his behalf, the facility should document this refusal. The facility reported that there were no grievances alleging sexual abuse filed by offenders in the past twelve (12) months in which the offender declined third-party assistance, containing documentation of the offender's decision to decline.</p> <p>The policy also explains that an offender can submit a grievance without submitting it to the staff member who is subject of the complaint. The policy does not allow the grievance to be referred to the staff member who is subject to the complaint.</p> <p>NCDPS-Prisons utilizes a tiered grievance process. Policy requires that a decision be made within ninety (90) days (time period does not include time consumed by offenders in preparing any administrative appeal) on any portion of a grievance alleging sexual abuse and allows an extension of time to respond up to seventy (70) days. When an extension is requested, the offender should be notified in writing of the extension and provide a date when the decision</p>

will be made. Policy also requires that if at any level of the administrative remedy process, including the final level, the offender does not receive a response within the time provided for reply, including any properly noticed extension, the absence of a response shall be a denial at that level which the offender may appeal. The facility reported that there had been zero (0) grievances filed in the last twelve (12) months that alleged sexual abuse that reached final decision within ninety (90) days of being filed. None of these grievances required an extension. There were three (3) grievances filed in the last twelve (12) months that alleged sexual harassment that reached final decision within (90) days of being filed. Neither of these grievances required an extension either.

If an emergency grievance alleges that an offender is subject to substantial risk for imminent sexual abuse, an initial response should be provided within (48) hours and final agency decision be issued within (5) days. Pender CI reported that there were no emergency grievances alleging substantial risk of imminent sexual abuse filed in the past 12-months.

No reprisals are to be taken against any offender for a good faith use of or participation in the grievance procedure. The prohibition against reprisals should not be construed to prohibit discipline of offenders who do not use the system in good faith.

Interviews with random offenders confirmed the multiple ways an offender could report allegations of sexual abuse or sexual harassment, submitting a grievance was one of those ways. The offenders explained the grievance boxes on the housing units. None of the random offenders interviewed had ever filed a grievance regarding an allegation of sexual abuse or sexual harassment but said other grievances they have filed were responded to well withing the timeframes set out in policy. Random staff interviewed shared how an offender could place a grievance in the grievance box and assigned staff retrieved the contents of the mailbox.

After reviewing agency policy and procedures, staff and offender interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● Memorandum of Understanding with Rape Crisis Center of Coastal Horizons Center (dated 4/12/2021) ● Brochure for Rape Crisis Center of Coastal Horizons Center ● Orientation Packet (English and Spanish version) ● Ways to Report Poster ● Inmate PREA Brochure ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Pender CI PREA Compliance Manager ● Rape Crisis Center of Coastal Horizons Center Representative ● Random sample of Staff ● Random sample of Offenders <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires the facility to provide victim offenders with access to outside victim advocates for emotional support services related to sexual abuse, PREA Support Persons and legal counsel. Mailing addresses and telephone numbers, including toll-free hotline numbers for local, state, or national victim advocacy or rape crisis organizations are provided to offenders during their intake and Orientation. Enabling reasonable communication between offenders and the organizations/agencies in as confidential manner as possible is also required per policy. The facility is required to inform the offenders prior to giving them access, of the extent to which such communication will be monitored and the extent to which reports of abuse will be forwarded to authorities with mandatory reporting laws.</p> <p>There is a Memorandum of Understanding with Rape Crisis Center of Coastal Horizons Center, signed 4/12/2021 by the Acting Warden of Pender CI and a Rape Crisis Center of Coastal Horizons Center representative. The Rape Crisis Center of Coastal Horizons Center will provide free, confidential sexual abuse advocacy services for the Pender CI offender population. The Rape Crisis Center of Coastal Horizons Center crisis line telephone number is posted throughout the housing units for easy access. The auditor conducted a telephone interview with a representative from the Rape Crisis Center of Coastal Horizons Center and she indicated that the Rape Crisis Center of Coastal Horizons Center had not received any</p>

telephone calls in the past twelve (12) months from offenders at Pender CI. The Rape Crisis Center of Coastal Horizons Center representative explained that they are also contracted with the Pender Memorial Hospital so if an offender was taken for a forensic exam, the Rape Crisis Center of Coastal Horizons Center also provides advocates and support services during the forensic exam process. The SANE at Pender Memorial Hospital confirmed the partnership with the Rape Crisis Center of Coastal Horizons Center and advised they have a SAFE/SANE available on a 24-hour basis that would conduct a forensic exam at no financial cost to the offender victim.

Interviews with random staff and the PCM indicated the offenders are provided with a PREA brochure and orientation material that contained facility guidelines regarding PREA, information on how to report incidents of sexual abuse and sexual harassment, including telephone numbers of outside agencies. Spanish versions are provided to limited English proficient offenders. Offenders were knowledgeable of how to utilize the crisis hotline numbers and what type of services the Rape Crisis Center of Coastal Horizons Center provided.

After reviewing agency policy and procedures, staff and offender interviews, interviews with representatives from Rape Crisis Center of Coastal Horizons Center and Pender Memorial Hospital and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Website-PREA Information • Report Fraud, Waste, Abuse or Misconduct flyer • Ways to Report Poster • Pender Orientation Packet, dated 7/01/2021 (English and Spanish versions) • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Random Sample of Staff <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), recognizes that third-party reporting can be made via email, phone or letter and can be made to any NCDPS-Prisons employee. Phone calls made to the PREA telephone number goes directly the PREA Office where the statewide PREA Coordinator who will in turn notify and inform the Warden of the specified facility. The NCDPS-Prisons website provides information to the general public regarding PREA, to include information regarding third-party reporting of sexual abuse and sexual harassment incidents. The auditor viewed the website and confirmed the information regarding third-party reporting. The website contained a link that would send an email to the NCDPS-Prison PREA Director. Staff are also provided a way to report offender sexual abuse anonymously through the Fraud, Waste, Abuse and Misconduct Hotline. The PREA Coordinator notifies the Warden of any information received and an investigation into the allegations will be initiated.</p> <p>Pender CI has an MOU with Rape Crisis Center of Coastal Horizons Center to provide for advocacy services as well as being an external entity that offenders could utilize to report allegations of sexual abuse and sexual harassment anonymously. In order for the Rape Crisis Center of Coastal Horizons Center representative to notify the facility of the information shared with them, the offender must sign a consent form giving the Rape Crisis Center of Coastal Horizons Center permission to contact the facility and report the allegation of sexual abuse or sexual harassment.</p> <p>Random interviews with staff confirmed that they understand the requirement to accept allegations of sexual abuse and sexual harassment when a third-party may report an incident of sexual abuse and sexual harassment to them. Staff said that the "third-party" could be other offenders, staff members, attorneys, outside advocates, offender family members.</p>

After reviewing agency policy and procedures, NCDPS Website, staff interviews, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● North Carolina Mandatory Reporting ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Pender CI Acting Warden ● Medical and Mental Health Practitioner ● Random Sample of Staff <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires all staff, employees and volunteers to immediately report any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility to their immediate supervisor or the Officer in Charge (OIC) of the shift. As well as reporting incidents, staff should also report any retaliation against offenders or staff who report incidents and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. These reports also go to the immediate supervisor or OIC of the shift. The reporting of third-party and anonymous reports is included an are reported to the designated investigators. Staff are prohibited from revealing any information related to a sexual abuse incident to anyone other than to the extent necessary to make treatment, investigation and other security and management decisions. Mental health and medical staff are also required to report incidents of sexual abuse and informing the offender of the practitioner's duty to report at the initiation of services. If the facility ever has an alleged victim under the age of 18 or that was considered a vulnerable adult under state or local vulnerable persons statute, a report to the North Carolina Department of Social Services is required.</p> <p>Random staff interviews, indicated staff understood their responsibility to report any knowledge, suspicion or information of sexual abuse or sexual harassment. Staff also understood that any information related to sexual abuse or sexual harassment is to be confidential and not be shared with anyone other than those that need to know. Staff said they would report to their supervisor or the OIC verbally and submit a written report. Medical and mental health staff also understood their responsibility to report any knowledge, suspicion or information of sexual abuse or harassment to facility supervisors and explained they would notify the offender of their duty to report at the initiation of any services they would provide to</p>

the offender. Medical and mental health staff reported they would utilize confidentiality appropriately in situations concerning sexual abuse and sexual harassment. Through an interview with the Warden, he advised that any reports of allegation of sexual abuse or sexual harassment that are reported through a third-party would be referred to the appropriate investigator and would be processed as any other allegation.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Pender CI Acting Warden ● Pender CI PREA Compliance Manager ● Random Sample of Staff <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), explains the agency's protection duties when the staff learns that an offender is subject to a substantial risk of imminent sexual abuse and requires immediate staff action be taken to protect the offender.</p> <p>During the interviews with random staff, they all reported that any information they received that alleges an offender is at substantial risk of imminent sexual abuse and they would all react and take immediate action by separating the alleged victim from the abuser to ensure the safety of the alleged victim. The Warden and the PCM both reported that there were no reports of substantial risk of imminent sexual abuse that required immediate action on staff's behalf in the past twelve (12) months.</p> <p>After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.</p> <p>Corrective Action:</p> <p>None</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Pender CI Acting Warden ● Pender CI PREA Compliance Manager <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires that when Pender CI receives an allegation that an offender was sexually abused while confined at another facility, the head of the facility that received the allegation is required to notify the head of the facility or agency where the alleged abuse occurred. The notification to this other agency or facility should occur as soon as possible, but no later than (72) hours after receiving the allegation. The notification is documented on a memorandum and uploaded into the correspondence tracking system (CTS). If Pender CI is notified from another facility or agency that an allegation of sexual abuse or sexual harassment has been reported, the allegation would be investigated immediately.</p> <p>During the interview with the Acting Warden, he shared that if an offender reports an incident of sexual abuse/assault that occurred at another agency/facility, he (Pender CI Acting Warden) would contact the other agency/facility staff via telephone call.</p> <p>The Acting Warden and the PCM reported that there were no reports received from other agencies or facilities reporting that an offender alleged sexual abuse while assigned to Pender CI.</p> <p>After reviewing agency policy and procedures, staff and offender interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.</p> <p>Corrective Action:</p> <p>None</p>

115.64	Staff first responder duties
	<p data-bbox="248 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 282">Auditor Discussion</p> <p data-bbox="248 327 1366 360">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="248 405 775 439">Information or Documents Reviewed:</p> <ul data-bbox="300 506 1461 831" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Pender Correctional Institution Standard Operating Procedure Ch. 13 (Inmate Sexual Abuse and Sexual Harassment/Coordinated Response Plan, dated 3/25/2019) • Pender First Responder Cards • (8) Sexual Abuse Investigation Packets • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="248 875 408 909">Interviews:</p> <ul data-bbox="300 976 906 1055" style="list-style-type: none"> • PREA Compliance Manager • Security and Non-Security First Responders <p data-bbox="248 1088 392 1122">Findings:</p> <p data-bbox="248 1167 1477 1839">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and Pender Correctional Institution Standard Operating Procedure Ch. 13 (Inmate Sexual Abuse and Sexual Harassment/Coordinated Response Plan, dated 3/25/2019) requires first responders to ensure that the alleged offender victim is separated from the alleged offender perpetrator. If the abuse occurred within a time period that allows for the collection of evidence, ensure evidence is preserved and protected by securing the scene and requesting that the alleged offender victim not take any action which may destroy physical evidence, such as brushing teeth, urinating or defecating, smoking, showering, changing clothes or eating and drinking, ensure evidence is preserved by securing the scene and requesting that the alleged offender perpetrator not take any action which may destroy physical evidence, such as brushing teeth, urinating or defecating, smoking, showering, changing clothes or eating and drinking. The Officer in Charge (OIC)/ Senior Person in Charge or immediate supervisor should be notified as soon as possible. If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. The offender should see medical and mental health staff as soon as possible.</p> <p data-bbox="248 1883 1477 2130">Interviews were conducted with random staff and Staff First Responders (security and non-security) and all staff were able to recite First Responder responsibilities in accordance with facility policy when it is learned an offender was sexually abused. Staff produced a laminated credit-card style information card that detailed First Responder duties when they learn an offender was sexually abused. Staff all reported they attended the required training upon being hired and then attended training each year after they were hired. Training records were</p>

reviewed and indicated that staff attended the required training and learned of the proper responses when learning an offender was sexually abused.

The PCM reported that there had been incidents reported to security and non-security staff members that an offender had been sexually abused in the past (12) months.

After reviewing agency policy and procedures, staff interviews and offender interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.65	Coordinated response
	<p data-bbox="248 168 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 284">Auditor Discussion</p> <p data-bbox="248 329 1366 365">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="248 405 775 441">Information or Documents Reviewed:</p> <ul data-bbox="300 504 1461 748" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Pender Correctional Center Standard Operating Procedure Ch. 13(Inmate Sexual Abuse and Sexual Harassment/Coordinated Response Plan, dated 3/25/2019) • Pender CI's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="248 788 408 824">Interviews:</p> <ul data-bbox="300 889 667 965" style="list-style-type: none"> • Pender CI Acting Warden • Random sample of staff <p data-bbox="248 1005 389 1041">Findings:</p> <p data-bbox="248 1081 1477 1326">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and Pender Correctional Institution Standard Operating Procedure Ch. 13(Inmate Sexual Abuse and Sexual Harassment/Coordinated Response Plan, dated 3/25/2019) identifies the facility's written coordinated response and actions to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators and facility leadership.</p> <p data-bbox="248 1366 1477 1870">The Acting Warden shared that he as well as the staff assigned to the facility are confident in their knowledge of coordinated actions to take when a situation of sexual abuse is reported to them. All staff are issued a card that details their responsibilities as first responders to a report of sexual abuse allegations. Random staff interviews confirmed that staff were aware of the proper steps to protect an offender alleging sexual abuse/assault, securing and preserving evidence, requests made to both the offender victim and offender perpetrator to not take any actions that would destroy evidence, notification to the OIC/supervisor on duty/their supervisor, ensuring offender victim is seen by medical staff and documentation of the incident prior to the conclusion of their shift. The Response Plan was reviewed and included a more detailed step-by-step instructions regarding first responder responsibilities, evidence collection procedures, documentation required, notifications required, medical responsibilities, investigator responsibilities and administration responsibilities.</p> <p data-bbox="248 1910 1445 2029">After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.</p> <p data-bbox="248 2069 507 2105">Corrective Action:</p>

	None
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Pender CI Acting Warden ● PREA Compliance Manager ● Human Resources staff <p>Findings:</p> <p>NCDPS does not engage in a collective bargaining agreement with their employee workforce. There has been no collective bargaining agreement entered into that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. NCDPS does not allow such entities to restrict the ability to terminate an employee or remove a staff member who has been alleged to sexually abused or sexually harassed an offender from having contact with an offender pending the outcome of an investigation or of a determination of whether to and to what extent discipline is warranted. The Human Resources staff and the Acting Warden both confirmed collective bargaining is not utilized within NCDPS. A written summary of an interview conducted by certified PREA Auditor Dorothy Xanos earlier in the audit cycle was reviewed. The summary review allowed this auditor to verify that the PREA Program Director reported that collective bargaining is not utilized in the NCDPS.</p> <p>After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.</p> <p>Corrective Action:</p> <p>None</p>

115.67	Agency protection against retaliation
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1273 360">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="252 405 737 439">Information or Documents Reviewed:</p> <ul data-bbox="300 506 1461 707" style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● LMS PREA Support Person Training Curriculum ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p data-bbox="252 752 395 786">Interviews:</p> <ul data-bbox="300 853 1241 965" style="list-style-type: none"> ● Pender CI Acting Warden ● Pender CI PREA Compliance Manager (charged with monitoring staff) ● Pender PREA Support Person (charged with monitoring offenders) <p data-bbox="252 1010 379 1043">Findings:</p> <p data-bbox="252 1088 1477 1626">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires the protection and monitoring of offenders and staff who have reported sexual abuse and sexual harassment or who have cooperated in a sexual abuse or sexual harassment investigation. NCDPS policies and procedures prohibit retaliation against any staff or offender for making a report of sexual abuse as well as retaliation against a victim who has suffered from abuse. Requires multiple protections such as housing changes or transfers for offender victims or abusers, removal of the alleged staff or offender abusers from contact with victims, and emotional support services for offenders or staff who fear retaliation are available. Requires monitoring for a minimum of ninety (90) days, with periodic status checks, and provides protections for any other individual who cooperates with an investigation. The monitoring at a minimum will take place for a period of (90) days or longer, as needed. This monitoring would include offender disciplinary reports, housing and program changes, negative performance reports as well as reassignments of staff.</p> <p data-bbox="252 1671 1477 2130">The PCM confirmed that retaliation against staff or offenders making an allegation of offender sexual abuse or sexual harassment is prohibited. The PCM reported that he is charged with monitoring staff for potential retaliation against them and would document the information on the Staff (OPA-I22) form. The PCM confirmed also that there are eleven (11) PREA Support Persons assigned to Pender CI that are responsible for offender monitoring for potential retaliation. During an interview with a PSP, she explained that the role of the PREA Support Person is to serve as an advocate to link services (community base advocates or mental health professionals) and support to offenders who report sexual abuse and sexual harassment by another offender, staff member, contractor or volunteer. Offenders are met with immediately and every other week thereafter for a minimum of (90) days and up to (180) days. PSPs monitor retaliation by monitoring changes in work assignments, education or</p>

vocational changes, offender disciplinary reports, housing and program changes, negative performance reports as well as reassignments of staff.

When the outcome of the investigation has been determined to be unfounded, retaliation monitoring may be terminated prior to the 90-day minimum requirement only if approved by the facility administrator. Upon completion of the investigation, the PCM and/or the PSP complete a "PREA Sexual Abuse and Harassment Retaliation Report" form [Staff (OPA-I22) or Offender (OPA-I24)].

The Acting Warden and PCM both reported that there had been no incidents of retaliation of either staff or offenders in the past twelve (12) months.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Pender CI Acting Warden ● Pender CI PREA Compliance Manager <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Inmate Sexual Abuse and Sexual Harassment, dated 8/12/19), requires that inmates identified as victims of sexual abuse shall not be placed in involuntary restrictive housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. Also, the policy contained information on post-allegation protective custody or guidelines for moving an inmate to another housing area 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. It allows for the temporary holding, less than twenty-four (24) hours, in involuntary segregated housing or in temporary protective custody only if the facility cannot conduct such an assessment immediately. If an inmate is placed in restrictive housing, the inmate is seen every seven (7) days by the mental health staff who documents the status. An "Administrative Restrictive Housing – Protective Custody" form is required to be completed when an inmate is placed into the restrictive housing unit. There were zero (0) offenders who alleged to have suffered sexual abuse who were held in involuntary segregated housing in the past twelve (12) months for one to 24 hours awaiting completion of an assessment, that were assigned to restrictive housing for longer than thirty (30) days while awaiting an alternative placement.</p> <p>An interview with the Acting Warden and the PCM indicated the facility does not place alleged victims in restrictive housing. Alleged abusers will be placed in restrictive housing but never the alleged victim.</p> <p>After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.</p> <p>Corrective Action:</p>

	None
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115.71	Criminal and administrative agency investigations
	<p data-bbox="248 170 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 282">Auditor Discussion</p> <p data-bbox="248 327 1366 360">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="248 405 775 439">Information or Documents Reviewed:</p> <ul data-bbox="300 506 1461 831" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS Specialized Investigations: Sexual Abuse and Harassment Training Lesson Plans • NCDPS-Office of Special Investigations Policy 100 (OSI Authority to Conduct Investigations, dated 1/01/2020) • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="248 875 408 909">Interviews:</p> <ul data-bbox="300 976 802 1099" style="list-style-type: none"> • Pender CI Investigator • Pender Acting Warden • Pender PREA Compliance Manager <p data-bbox="248 1133 392 1167">Findings:</p> <p data-bbox="248 1211 1485 2096">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires that investigations into allegations of sexual abuse and sexual harassment, shall be conducted promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. Policy also requires that sexual abuse and sexual harassment investigations shall be conducted by staff that has received special training in sexual abuse investigations. Interviews with Pender CI Investigators confirmed their completion of the NCDPS Specialized Investigations: Sexual Abuse and Harassment training. Pender CI currently has five (5) staff who has attended the Investigator training. All alleged incidents of sexual abuse or harassment are referred to the local law enforcement office, the Burgaw Police Department for criminal investigations. When an outside agency investigates sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. Many times, the assigned PREA Investigator will conduct joint interviews with the investigator assigned from the Burgaw Police Department. The Investigator reported that they become the contact person for the Burgaw Police Department. The State Bureau of Investigations may also be contacted when allegations are made against a staff member alleging to have sexually assaulted an offender. In addition, staff refer all allegations of sexual abuse and harassment to the Regional Office and the NCDPS PREA Office for completion of an administrative investigation. The facility's PREA investigators could be assigned to conduct the administrative investigation. Allegations involving staff shall also be reported to the Office of Special Investigation in accordance with NCDPS-SI-100 OSI Authority to Conduct Investigations Policy.</p>

Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data including video and/or audio recordings; shall interview alleged victims, suspected perpetrators, and witnesses. The Investigators should also review prior complaints and reports of sexual abuse involving the suspected perpetrator, included in the incident package and considered when determining credibility of the allegations. When the quality of evidence appears to support criminal prosecution, the Department of Public Safety sexual abuse and harassment investigators shall only be permitted to continue interviews after consulting with local law enforcement agency, who in turn, consults with local prosecutors, as to whether interviews may be an obstacle for subsequent criminal prosecution.

The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as offender or staff. Polygraph examinations or other truth-telling devices are not required as a condition for proceeding with the investigation of an allegation of sexual abuse. During the interviews with the Investigators, they determine the credibility of the subject of an interview depending on their ability to provide verifiable details that contribute to the veracity of their story. The more verifiable details they provide, the more it contributes to the veracity of their story. The investigator's questions also address things that only appear to be secondary to the line of questioning, but are key to establishing the credibility of their narrative. The Investigators explained they like to measure whether the subject's non-verbal indicators of truthfulness align with their verbal indicators that they are being truthful.

The policies also require that investigations include an effort to determine whether staff actions or failures to act contributed to the abuse. Administrative Investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Criminal Investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence with all documentary evidence attached where feasible. Substantiated allegations of conduct that appears criminal shall be referred for prosecution.

According to the PAQ, and verification from interviews with the PCM and investigator, confirm there was one (1) unsubstantiated allegation of conduct that appeared to be criminal that was referred for prosecution since the last PREA audit. This case was unique as the incident involved an alleged victim that was low functioning and was unable to understand the magnitude of the incident. Although the administrative investigation results were unsubstantiated, it was believed based on the low functioning ability of the alleged victim that there was criminal activity based on the alleged victim's inability to understand the actions he was involved in.

All written investigation reports will be retained as long as the alleged abuser is incarcerated or employed by the agency, plus five (5) years. The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

	Corrective Action:
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	None
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115.72	Evidentiary standard for administrative investigations
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1366 360">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="252 405 775 439">Information or Documents Reviewed:</p> <ul data-bbox="300 506 1461 752" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS Specialized Investigations: Sexual Abuse and Harassment Training Lesson Plans • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="252 786 408 819">Interviews:</p> <ul data-bbox="300 887 641 920" style="list-style-type: none"> • Pender CI Investigators <p data-bbox="252 954 392 987">Findings:</p> <p data-bbox="252 1032 1461 1402">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires that when a facility investigates an allegation, the facility shall impose no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The NCDPS Specialized Investigations: Sexual Abuse and Harassment Training Lesson Plans that Pender CI PREA Investigators attend, explains that the Preponderance of the evidence is a lesser standard of proof than, "beyond a reasonable doubt," which is required to convict in a criminal trial. This standard is satisfied if the evidence shows that it is more probable than not that an event occurred.</p> <p data-bbox="252 1447 1477 1603">The investigators shared that when they conduct investigations, they seek the facts and make decisions and conclusions based on these facts. The Investigators routinely identify in their investigative reports if they make a decision based on the preponderance of evidence with further explanation.</p> <p data-bbox="252 1648 1453 1760">After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.</p> <p data-bbox="252 1805 507 1839">Corrective Action:</p> <p data-bbox="252 1883 322 1917">None</p>

115.73	Reporting to inmates
	<p data-bbox="252 168 896 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 1364 358">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="252 398 774 432">Information or Documents Reviewed:</p> <ul data-bbox="300 499 1460 660" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="252 701 406 734">Interviews:</p> <ul data-bbox="300 801 837 880" style="list-style-type: none"> • Pender CI Investigators • Pender CI PREA Compliance Manager <p data-bbox="252 920 391 954">Findings:</p> <p data-bbox="252 994 1476 1753">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), requires any offender who makes an allegation that he or she suffered sexual abuse is informed in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. Also, the policy contains the process for notifying offenders whether the allegation proves substantiated, unsubstantiated or unfounded following an investigation. The policy further requires following an offender's allegation a staff member has committed sexual abuse against the offender, the facility informs the offender unless the allegations are "unfounded" whenever the staff member is no longer posted within the offender's housing unit; the staff member is no longer employed at the facility; the staff member has been indicted on a charge related to sexual abuse within the facility; or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. PREA investigations accepted by the Office of Special Investigations (OSI), will be conducted jointly by an OSI investigator and facility/region PREA investigator. Results of indictments or criminal convictions of Pender CI staff that Burgaw Police Investigators become aware of will be shared with the Warden who will communicate the findings to the PREA Support Person (PSP) assigned. The PSP will then inform the offender whenever the facility learns the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility.</p> <p data-bbox="252 1794 1476 2040">Interviews with the investigators and the PCM confirmed all investigation outcomes, whether the allegation proves substantiated, unsubstantiated or unfounded following an investigation, are completed by the facility investigator and the documentation is maintained with the investigation. The interview with the PCM confirmed there has been eight (8) investigations of alleged staff or offender's inappropriate sexual behavior that occurred in the facility in the past twelve (12) months which was investigated by facility investigators.</p> <p data-bbox="252 2080 1444 2154">After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this</p>

auditor finds this standard in compliance.

Corrective Action:

None

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● NCDPS-Prisons Policy A .0200 (Conduct of Employees, dated 2/1/2016) ● Pender CI’s PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Pender CI Acting Warden ● Pender CI Human Resources Staff <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), NCDPS-Prisons Policy A .0200 (Conduct of Employees, dated 2/1/2016), require that all disciplinary actions must be approved through Facility Head. Additionally, the policy requires that staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.</p> <p>Staff who are terminated or who resign for a violation of the sexual abuse and sexual harassment policies shall be informed of the NCDPS’s reporting the employment action to any relevant licensing bodies and to law enforcement agencies, unless the activity was clearly not criminal. The policy also requires that the violation be reported to the NCDPS PREA Office and law enforcement if the violation is criminal in nature. All disciplinary sanctions are maintained in the employee’s human resources office in accordance with procedures. Resigning prior to disciplinary procedures does not necessarily mean the employee will escape sanctions.</p> <p>Interviews with the Acting Warden and the Human Resources Staff both reported that there had been no staff from Pender CI who violated agency sexual abuse or sexual harassment policies in the past twelve (12) months.</p> <p>After reviewing agency policy and procedures, staff interviews, information obtained through</p>

documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.77	Corrective action for contractors and volunteers
	<p data-bbox="248 168 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 284">Auditor Discussion</p> <p data-bbox="248 329 1366 365">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="248 405 775 441">Information or Documents Reviewed:</p> <ul data-bbox="300 506 1461 792" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Policy F .0604 (Community Volunteer Program, dated 7/01/2010) • Volunteer Training Agenda with PREA Information • PREA Acknowledgement Forms of volunteers/contractors • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="248 835 408 871">Interviews:</p> <ul data-bbox="300 936 839 1050" style="list-style-type: none"> • Pender CI Acting Warden • Pender CI PREA Compliance Manager • Random Volunteers/Contractors <p data-bbox="248 1093 389 1128">Findings:</p> <p data-bbox="248 1171 1481 1624">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and NCDPS-Prisons Policy F .0604 (Community Volunteer Program, dated 7/01/2010) require that any contractor or volunteer who engages in sexual abuse shall be immediately prohibited from contact with offenders and shall be reported to law enforcement, unless the activity was clearly not criminal, and to relevant licensing bodies. In addition, this should also be reported to the NCDPS PREA Office. The facility should also take any appropriate remedial measures shall be considered whether to prohibit further contact with offenders in the case of any other violation of sexual abuse or sexual harassment policies. If an allegation of sexual abuse in which a volunteer or contracting agent is the alleged abuser is substantiated, the volunteer or contracting agent shall be terminated from the relationship with NCDPS.</p> <p data-bbox="248 1666 1469 1872">Interviews with the Acting Warden and PCM both confirmed there were no situations in the past twelve (12) months where a volunteer or contractor was alleged to have violated the sexual abuse or sexual harassment policies and procedures. Just like employees, volunteers and contractors are required to sign the "PREA Acknowledgement Form" upon completion of their required training.</p> <p data-bbox="248 1915 1445 2031">After reviewing agency policy and procedures, staff and volunteer interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.</p> <p data-bbox="248 2074 507 2110">Corrective Action:</p>

	None
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● NCDPS-Prisons Policy B .0200 (Offender Disciplinary Procedures, dated 11/03/20) ● Inmate Rule Book ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Pender CI Acting Warden ● Pender CI PREA Compliance Manager <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), NCDPS-Prisons Policy B .0200 (Offender Disciplinary Procedures, dated 8/10/2018) requires that an offender shall be subject to disciplinary sanctions pursuant to formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual abuse or following a criminal finding of guilt for offender-on-offender sexual abuse. Requires that sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories. The disciplinary process should consider whether an offender's mental disabilities or mental health illness contributed to the offender's behavior when determining the type of sanction, if any, should be imposed.</p> <p>Policy also requires that if the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for any abuse, the facility should consider whether to require the offender to participate in such interventions as a condition of access to programming or other benefits. Pender CI does not have such programming but recommendations could be made for the offender to become involved in upon transfer.</p> <p>For the purpose of disciplinary action, policy requires that if a report of sexual abuse is made in good faith based upon a reasonable belief that the alleged conduct occurred, shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>Policy also prohibits disciplining an offender victim for sexual contact with staff unless a finding that the staff member did not consent to such contact. NCDPS-Prisons Policy B .0200 (Offender Disciplinary Procedures, dated 8/10/2018) identifies that committing, soliciting, or</p>

inciting others to commit any sexual act or indecently exposing oneself, or touching the sexual or other intimate parts of oneself or another person for the purpose of sexual gratification as a Class A offense.

An interview with the Acting Warden explained that formal disciplinary hearings are held where appropriate sanctions are assigned. If necessary, consultation with mental health staff would take place prior to the hearing. The Acting Warden shared that the offender can be sanctioned to restrictive housing, loss of sentence credits, extra duty, loss of privileges, limited trust fund withdrawals and demotion in custody. Criminal charges could also be considered. The PAQ and the Acting Warden both reported that there had been zero (0) incidents of criminal findings of guilt for offender-on-offender sexual abuse that occurred in the facility. There was one (1) unsubstantiated allegation of conduct that appeared to be criminal that was referred for prosecution since the last PREA audit. This case was unique as the incident involved an alleged victim that was low functioning and was unable to understand the magnitude of the incident. Although the administrative investigation results were unsubstantiated, it was believed based on the low functioning ability of the alleged victim that there was criminal activity based on the alleged victim's inability to understand the actions he was involved in.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● Diagnostics Procedures Manual, Procedure 305.3 (Psychological and Psychiatric Referral, dated 12/4/2018) ● Health Services Policy and Procedure CP 18 (Sexual Abuse, dated 2/2014) ● NCDPS Authorization to Release Medical Information ● Patient Medical Consent Form (English and Spanish) ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Pender CI Acting Warden ● Pender Medical and Mental Health practitioners ● Pender CI PREA Compliance Manager <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Diagnostics Procedures Manual, Procedure 305.3 (Psychological and Psychiatric Referral, dated 12/4/2018), Health Services Policy and Procedure CP 18 (Sexual Abuse, dated 2/2014) stipulates that if offenders disclosed any prior sexual victimization during the screening for risk of victimization and abusiveness, whether it occurred in an institutional setting or in the community, staff is to ensure that the offender if offered a follow-up meeting with a medical or mental health practitioner within (14) days of the intake screening. Staff track the date Medical and Mental Health staff was notified, the date of the Medical Assessment and the date of Medical Treatment. If the screening for risk of victimization and abusiveness indicates that a prison offender has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff is to ensure that the offender if offered a follow-up meeting with a mental health practitioner within (14) days of the intake screening. Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the offender is under the age of eighteen (18). Interviews with the Acting Warden and the PCM confirmed there are no offenders under the age of eighteen (18) housed at the facility.</p>

While onsite at the facility, intake screening staff demonstrated how the intake screening tool in the OPUS database is utilized. If, during the screening, an offender responds to certain questions in an affirmative manner, an automated referral is made to medical and/or mental health staff. All offenders who reported prior victimization received the follow up medical or mental health care.

Interviews with Medical and Mental Health staff and documentation reviewed, disclosed they complete their assessments in the HERO system. Mental Health staff also complete a Mental Health Assessment and Treatment Plan form, as well as informed consent disclosures and release of information forms. A variety of other admissions documentation is also completed during the offender's intake. When a referral is made as a result of an initial intake screening, Medical and Mental Health staff log appropriate information on the Medical or Mental Health Referral Log Sheet. When an offender is referred to Medical or Mental Health staff, they log the offender's name, the date of the referral, who made the referral, date they were seen by Medical or Mental Health staff and what the plan is for the that particular offender.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Health Services Policy and Procedure CP 18 (Sexual Abuse, dated 2/2014) • Health Services Policy and Procedure CP 18 (Sexual Abuse, dated 2/2014) • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> • Pender CI Medical and Mental Health Staff • Representative from Pender Memorial Hospital • Representative from The Rape Crisis Center of Coastal Horizons Center • Pender PREA Support Person <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) and Health Services Policy and Procedure CP 18 (Clinical Practice Guidelines, dated 2/2014) requires offender victims receive timely unimpeded access to emergency medical treatment and crisis intervention. Arrangements are to be promptly made to have the alleged offender-victim examined by medical services. Medical and Mental health staff document the timeliness of emergency medical treatment and crisis intervention services that are provided. Provisions of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis. Medical Services will ensure that an offender victim receives medical follow-up and is offered a referral for mental health services. All care for sexual abuse will be provided at no cost to the offender.</p> <p>Documentation and an interview with the representative from Pender Memorial Hospital, confirmed that Pender Memorial Hospital SANE staff provide emergency care and the forensic medical exam at no cost to the victim. The Rape Crisis Center of Coastal Horizons Center has a Memorandum of Understanding to provide confidential emotional support services to the offenders at Pender CI. In addition, a PREA Support Person, could also be made available to provide victim advocate services. Pender CI has eleven (11) staff trained as a PREA Support Persons (PSP) who links the offender with services of community-based advocates or mental health professionals and provides confidential support to offenders who report sexual abuse and harassment.</p> <p>Medical staff and mental health staff all report that any sexual abuse victim receives timely and unimpeded access to emergency medical treatment and crisis intervention services.</p>

Once medical staff learn of a sexual abuse, they act immediately. Medical staff assess and perform a visual exam on the victim offender for any life-threatening injuries that need immediate treatment prior to the victim offender being transported to the emergency department. Refusals for treatment by the victim offender will be handled in accordance with Health Services Policy. All treatment is documented in the offender's chart.

Non-medical staff (First Responders) who learn of an allegation of sexual abuse are trained to follow the PREA Coordinated Response Plan.

After reviewing agency policy and procedures, staff and outside agency representative interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	<p data-bbox="248 168 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 284">Auditor Discussion</p> <p data-bbox="248 329 1366 365">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="248 405 775 441">Information or Documents Reviewed:</p> <ul data-bbox="300 504 1461 835" style="list-style-type: none"> • NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) • NCDPS-Prisons Health Services Policy and Procedure CP 18 (Sexual Abuse, dated 2/2014) • NCDPS-Prisons Health Services Policy and Procedure CI-8 (After Care Planning for Offenders in Healthcare Services, dated 11/2007) • Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) • PREA Standards Compliance Checklist <p data-bbox="248 875 408 911">Interviews:</p> <ul data-bbox="300 974 863 1010" style="list-style-type: none"> • Pender CI Medical & Mental Health Staff <p data-bbox="248 1050 389 1086">Findings:</p> <p data-bbox="248 1126 1477 1453">NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19), Health Services Policy and Procedure CP 18 (Clinical Practice Guidelines) and NCDPS-Prisons Health Services Policy and Procedure CI-8 (After Care Planning for Offenders in Healthcare Services, dated 11/2007) requires that the facility offer medical and mental health care for sexual abuse victims and abusers. When an offender victim is evaluated and treated, it should include follow-up services, treatment plans and referrals for follow-up care upon release, transfer or placement in other facilities. The facility is required to provide such victims with medical and mental health services consistent with the community level of care.</p> <p data-bbox="248 1464 1477 1792">The policies require the facilities to offer follow-up treatment that may include screening, including follow-up care for sexually transmitted infections and other communicable diseases and any other counseling or assistance as requested. Requires treatment services to be free of financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Once an investigation has been completed and an offender has been determined to be an offender-on-offender abuser, within sixty (60) days, a mental health clinician will attempt to conduct an evaluation and offer treatment when deemed appropriate.</p> <p data-bbox="248 1839 1461 2125">Interviews with the medical staff confirmed that victims are offered a sexual assault assessment, individual counseling, referral to the psychiatrist, medications as ordered by the physician, laboratory testing for STD and HIV and follow-up. Victims of sexual abuse will be transported to Pender Memorial Hospital to receive treatment and the physical evidence can be gathered by a certified SANE. The mental health staff interviews indicated their plan for services would include individual or group treatment, including trauma resolution and PTSD, as well as follow-up. Also, the mental health staff would conduct mental health evaluations of</p>

all known offender-on-offender abusers and offer treatment services within fourteen (14) days. Mental health staff also reported that all offenders receive a mental health evaluation during their first few weeks at the facility.

Sexual abuse victims will be considered for referral of continued care at release from custody, in accordance with policy, NCDPS-Prisons Health Services Policy and Procedure CI-8 (After Care Planning for Offenders in Healthcare Services, dated 11/2007).

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS-Prisons Policy F.3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/2019) ● Pender CI Post Incident Reviews ● Pender CI's PREA Audit : Pre-Audit Questionnaire (Prisons and Jails) ● PREA Standards Compliance Checklist <p>Interviews:</p> <ul style="list-style-type: none"> ● Pender CI Acting Warden ● Pender CI PREA Compliance Manager ● Pender CI Investigator ● Pender CI Medical and Mental Health Staff <p>Findings:</p> <p>NCDPS-Prisons Policy F .3400 (Offender Sexual Abuse and Sexual Harassment, dated 8/12/19) requires that a Post Incident Review/sexual abuse incident review for all substantiated and unsubstantiated allegations of sexual abuse. The review is to be completed within thirty (30) days of the conclusion of any sexual abuse investigation. The review process involves upper management officials, investigators, medical or mental health practitioners and the PCM. The review team is tasked with reviewing the situation and consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status or perceived status; or gang affiliation; or motivated or otherwise caused by other group dynamics in the facility; examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in that area during the different shifts; and assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. Policy also requires completion of a written report of its findings that includes any recommendations for improvement and any reasons recommendations were not implemented.</p> <p>Members of the Post Incident Review committee at Pender CI include the Associate Warden of Custody (Pender CI PCM), Pender CI Associate Warden of Programs, Pender CI Medical staff or Mental Health staff, and the Pender CI PREA Investigator. The Warden reviews prior to submission to the Regional office. Members shared that discussion regarding recommendations for improvement are held and their recommendations are taken seriously. During the PIR, a brief summary of the incident is shared, discussion about those things that</p>

went well during the process and those that did not. All components of the standard are considered during the PIR with discussion on each.

After reviewing agency policy and procedures, staff interviews, information obtained through documentation review and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.87	Data collection
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.88	Data review for corrective action
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <p>Information or Documents Reviewed:</p> <ul style="list-style-type: none"> ● NCDPS Website ● Pender CI PREA Report (March 2017) ● NCDPS Sexual Abuse Annual Reports ● Facility Tour <p>Interviews:</p> <ul style="list-style-type: none"> ● Informal Interviews with Staff and Offenders during tour <p>Findings:</p> <p>The NCDPS Website (NC DPS: Prison Rape Elimination Act) contains PREA audit reports from the first, second and third PREA Audit cycles. The first PREA Audit Cycle was from August 2013-August 2016 with a total of forty-six (46) audits reports being placed on the website. The second PREA Audit Cycle was from August 2016-August 2019 with seventy-seven (77) audit reports being completed. The third PREA Audit Cycle is current and began August 2019-August 2022. There were 14 audits completed the first year of the third PREA Audit Cycle (August 2019-August 2020). The NCDPS has a total of sixty-nine (69) facilities (55 prisons, 10 juvenile facilities and 4 community confinement facilities). After completing a comparison, each facility had been audited at least once during the previous three-year audit cycle. During the previous three-year audit cycle, the NCDPS ensured at least one-third of its facilities were audited. The website also contained NCDPS Sexual Abuse Annual Reports.</p> <p>The Pender Correctional Institution was last audited in March 2017 with a final report dated March 28, 2017. The previous auditor was also allowed access to all areas of the facility and provided documentation requested by the auditor. Interviews with staff and offenders were able to be conducted in private and offenders were allowed to correspond with the auditor confidentially.</p> <p>Pender CI was one of the facilities scheduled during the second year of PREA Audit Cycle three. Due to Covid 19, the audit had to be rescheduled from December 2020. While at Pender CI, the auditor was allowed access to all areas of the facility. The facility provided any documentation this auditor requested without hesitation. The staff and offender interviews were able to be held in a comfortable, private area. Offenders were provided an opportunity to correspond with the auditor confidentially. During the audit tour, the auditor observed audit notices posted throughout every area of the facility. The notices were posted March 1, 2021 with photos and locations of the posting being uploaded to the supplemental folders in the OAS. The notices included an address of where offenders were permitted to send confidential correspondence to the auditor in the same manner as sending legal mail to the courts or legal.</p>

After reviewing the agency website, previous PREA Audit report, NCDPS Annual Sexual Abuse Reports, interviews with staff and offenders, and observations made during the onsite portion of the audit, this auditor finds this standard in compliance.

Corrective Action:

None

115.403	Audit contents and findings
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes

	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na

115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual	yes

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

115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes

115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

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

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

115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	no
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

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

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

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

115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	no

115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes

115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes

115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	no
	Does such an assignment not ordinarily exceed a period of 30 days?	no
115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes

115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

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

115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes

115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

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

115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes