

PREA Facility Audit Report: Final

Name of Facility: Central Valley Juvenile Detention and Assessment Center

Facility Type: Juvenile

Date Interim Report Submitted: NA

Date Final Report Submitted: 03/24/2021

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: Elaine Brideschge	Date of Signature: 03/24/2021

AUDITOR INFORMATION	
Auditor name:	Brideschge, Elaine
Email:	ebridsch@courts.az.gov
Start Date of On-Site Audit:	02/22/2021
End Date of On-Site Audit:	02/23/2021

FACILITY INFORMATION	
Facility name:	Central Valley Juvenile Detention and Assessment Center
Facility physical address:	900 E. Gilbert Street, San Bernardino, California - 94215
Facility Phone	
Facility mailing address:	175 W. 5th St, San Bernardino , California - 92415

Primary Contact	
Name:	Teri Brister
Email Address:	Teri.Brister@prob.sbcounty.gov
Telephone Number:	909-387-6196

Superintendent/Director/Administrator	
Name:	Joseph Bakunas
Email Address:	Joseph.Bakunas@prob.sbcounty.gov
Telephone Number:	909-387-6903

Facility PREA Compliance Manager	
Name:	LaShawndra Butler
Email Address:	lashawndra.butler@prob.sbcounty.gov
Telephone Number:	O: (909) 387-0568

Facility Health Service Administrator On-Site	
Name:	Carlos Peace
Email Address:	carlos.peace@prob.sbcounty.gov
Telephone Number:	(909) 387-5874

Facility Characteristics	
Designed facility capacity:	240
Current population of facility:	93
Average daily population for the past 12 months:	105
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	12-21
Facility security levels/resident custody levels:	Secured Facility
Number of staff currently employed at the facility who may have contact with residents:	505
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	359
Number of volunteers who have contact with residents, currently authorized to enter the facility:	0

AGENCY INFORMATION	
Name of agency:	San Bernardino County Probation Department
Governing authority or parent agency (if applicable):	
Physical Address:	175 W. 5th , San Bernardino, California - 92514
Mailing Address:	
Telephone number:	

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

Agency-Wide PREA Coordinator Information			
Name:	Teri Brister	Email Address:	teri.brister@prob.sbcounty.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 PREA onsite audit for Central Valley Juvenile Detention and Assessment Center (CVJDAC) located in San Bernardino, California was conducted on February 22, 2021 and February 23, 2021 by Elaine Bridschge, from Valley Farms, Arizona, a U.S. Department of Justice certified PREA Auditor for Juvenile Facilities, contracted through PREA Auditors of America, LLC. The purpose of the audit was to determine the degree of compliance with the Federal Rape Elimination Act (PREA) standards.

Prior to the audit, an initial pre audit meeting occurred between the auditor and the PREA Coordinator, Teri Brister, to discuss the audit process, review expectations, and gather preliminary facility characteristics and logistical information. On January 15, 2021, approximately six weeks in advance of the onsite audit, the facility posted a Notice of Audit, provided by the auditor, throughout the facility announcing the upcoming audit. The Notice explained the purpose of the audit and provided juveniles, staff, and visitors with the auditors contact information. The Notice of Audit was written in English and in Spanish. The facility dated the Notice of Audit with the date it was posted, and the auditor was emailed dated photos of the displayed Notice of Audit. During the site review, the auditor verified that the Notices were displayed and visible to juveniles and staff.

Pre-audit preparation included a thorough evaluation of all documentation and materials electronically submitted by the facility into the PREA Resource Center's Online Automated System (OAS), along with supporting documentation included in the pre-audit questionnaire. The documentation reviewed by the auditor included agency policies, procedures, forms, education materials, training curriculum and rosters, posters, brochures, juvenile and staff file reviews, and other relevant materials to determine compliance with the PREA standards. This review prompted questions and a request for additional documentation in the form of an issue log that was submitted to staff for review and clarification. Responses were submitted to the auditor in a timely manner and prior to the onsite audit. Additional documentation was also submitted by the facility in advance of the audit. The onsite portion of the audit was conducted over a two-day period. The auditor held an entrance meeting to review the audit agenda and discuss the audit process with facility leadership. The auditor was provided a roster of current juveniles and staff that were assigned to work that day. Rosters were utilized to select random staff and juveniles to be interviewed.

Following the entrance meeting, an extensive site review (facility tour) was conducted which included observation of facility configuration, staff supervision of juveniles, medical area, lobby, housing, intake, classrooms, medical, visitation areas, recreation area, dining room, kitchen, and storage and administration areas. The auditor was able to complete a tour checklist following the recommended PRC tour guidelines. The auditor was able to view camera locations, showering areas, toilet facilities, and sleeping rooms. The auditor was able to informally talk to the juveniles and staff. While on the tour, the auditor was permitted full access to all areas of the facility. The auditor was escorted by the Compliance Managers and PREA Coordinator.

The auditor conducted interviews with facility leadership, staff, and juveniles. The interviews were conducted consistent with Department of Justice PREA auditing expectations in content and approach

utilizing the PREA Compliance Audit Instrument Interview Guides, (i.e. agency director, PREA coordinator, specialized staff, random staff, medical and mental health staff, human resource staff, investigators, and residents). The auditor was able to ask additional questions to personnel and juveniles to gain more information about certain practices of the facility. In addition, the auditor was able to verify through interviews specific protocols and clarify documentation submitted.

The juveniles were selected randomly to interview by the auditor using a current juvenile roster. The auditor selected juveniles from all occupied housing units, to include interviews with 17 juveniles. At the time of the onsite visit, there were 91 juveniles listed on the daily roster. There were no juveniles to interview that met the criteria for residents who reported sexual abuse while at the facility and there were no juveniles held in isolation, other than medical observation due to the COVID-19 pandemic. Juveniles were interviewed using the recommended DOJ PREA Compliance Audit Instrument Interview Guides that question their knowledge on a variety of PREA protections generally and specifically their knowledge of reporting mechanisms available to juveniles to report sexual abuse and sexual harassment. The auditor was able to ask additional questions to juveniles to gain more information about certain practices of the facility. In addition, the auditor was able to gather information through interviews regarding facility practices that occur in the environment.

Twelve random staff members were interviewed representing all shifts and 15 staff were interviewed in specialty areas. The auditor selected staff randomly and by specialty using a current staff roster and a completed specialty staff form. The auditor randomly selected staff per each shift, position assignment, and gender. Selected staff were interviewed using either random or specialty area interview questions. The staff were questioned using the recommended DOJ PREA Compliance Audit Instrument Interview Guides that question their PREA training and overall knowledge of the agency's zero tolerance policy, reporting mechanisms available to juveniles and staff, the response protocols when a juvenile alleges abuse, and first responder duties.

Specialty interviews were comprised of a representation of staff who has acted as first responders, intake staff, and shift supervisors who conduct unannounced rounds. The auditor also interviewed specialty staff to include medical staff, mental health staff, human resources staff, staff that monitor retaliation, investigators, and staff who perform risk assessments. The Division Director II (agency head designee), Superintendent designee, PREA Coordinator, PREA Compliance Managers, and members of the Sexual Abuse Response Team were also interviewed. The facility's leadership accommodated the auditor's request to interview specific staff and arranged juvenile supervision while staff were participating in the interview process. Interviews were not conducted with volunteers or contractors due to the COVID-19 pandemic. The facility has not allowed any volunteers or contractors to enter the facility and engage with juveniles for over one year.

Outreach efforts were made to San Bernardino Sexual Assault Services (SBSAS), a community-based victim advocacy service provider. The facility has an active memorandum of understanding with the agency. The auditor was able to verify services provided via SBSAS website.

The auditor reviewed 17 juvenile case records randomly selected by the auditor utilizing a juvenile roster provided to the auditor by the facility to evaluate screening and intake procedures, resident education, and other general programmatic areas. The auditor randomly selected and reviewed 12 employee files, along with all employee training logs to determine compliance with training mandates and background check procedures. The auditor did not review investigation files. On the final day of the onsite audit, a debriefing was held with the facility's leadership staff. The purpose of the meeting was to summarize preliminary audit findings, next steps of the audit process, and to provide specific feedback to include strengths and recommended areas of improvement as it relates to PREA standards.

The auditor did not encounter any barriers to completing the audit.

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.

San Bernardino County Probation Department operates the Central Valley Juvenile Detention and Assessment Center located at 900 East Gilbert Street in San Bernardino, California. The agency website is <http://joinprobation.org>. The facility has been accredited with NCCHC.

The facility has a bed capacity of 240 with an average daily population of 105. At time of audit, the population count was 91. The average length of stay for juveniles at this facility is 47 days. The facility houses male and female juveniles ages 12-21. This is a secured detention facility. The facility employs 505 staff members with 183 that has direct contact with juveniles. The facility is comprised of four pods.

Pod 1 has 2 units. Each unit has 12 rooms (4 single and 8 double occupancy) with toilets in each room. There are 2 ADA sleeping rooms and 1 ADA shower. In addition to the ADA shower, there are 3 other private showers. The pod contains a dayroom and 2 recreation areas. Each unit has one classroom, a laundry room, staff workspace and a staff work room.

Pod 2 has 4 units. Each pod has interior and exterior recreation access. Each unit has 12 rooms (4 single and 8 double occupancy) with toilets in each room. There are 2 ADA sleeping rooms and 1 ADA shower. In addition to the ADA shower, there are 3 other private showers. Each unit has a dayroom, one classroom, a laundry room, staff workspace and a staff work room. This pod is currently being used as the female pod.

Pod 3 has 4 units. Each unit has 12 rooms (4 single and 8 double occupancy) with toilets in each room. There are 2 ADA sleeping rooms and 1 ADA shower. In addition to the ADA shower, there are 3 other private showers. The pod contains a dayroom and 2 recreation areas. Each unit has one classroom, a laundry room, staff workspace and a staff work room.

Pod 4 has 4 units. Each unit has 12 rooms (4 single and 8 double occupancy) with toilets in each room. There are 2 ADA sleeping rooms and 1 ADA shower. In addition to the ADA shower, there are 3 other private showers. The pod contains a dayroom and 2 recreation areas. Each unit has one classroom, a laundry room, staff workspace and a staff work room.

The facility has a fully equipped kitchen and dining area. Meals are cooked onsite by facility employees. A medical unit and a mental health (Forensic Adolescent ServiceTeam - FAST) unit are available onsite to respond quickly to the needs of juveniles detained. The facility is monitored 24/7 by central control staff. The central control room has multiple monitors and staff watching on cameras and juvenile movement. The facility has 231 cameras located inside and outside of the facility. A library is also located onsite and accessible to juveniles. The facility did not have any newly renovated areas to inspect at time of audit.

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:	3
Number of standards met:	40
Number of standards not met:	0

Standards exceeded: 115.313; 115.315; 115.333.

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.

115.311	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23, Prison Rape Elimination Act of 2003 (PREA) states that SBC Probation has zero tolerance towards all forms of sexual abuse and sexual harassment of youth in the juvenile detention and assessment center and treatment facilities. SBC Probation strictly prohibits any form of sexual activity involving youth with other youth and youth with staff, visitors, contractors, volunteers and interns as defined by the Department of Justice PREA Juvenile Standards, California State Law, and the San Bernardino County Probation Department policies.</p> <p>San Bernardino County Probation Department Procedure, Coordinated Response to Sexual Abuse and Sexual Harassment in the Juvenile Detention and Assessment Centers and Treatment Facilities Title 15, Section 1324 states outlines how it will implement the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment. It includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment; sanctions for those found to have participated in prohibited behaviors; and includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of residents.</p> <p>San Bernardino County Probation Department Procedure, Intake/MAYSI Screening, Assessment and Admittance Title 15, Sections 1350, 1353, 1430, 1431, and 1437, NCCHC ensures proper screening of a youth’s arrest record, medical and mental health and any known or perceived disabilities of history of special education services upon intake at a Juvenile Detention and Assessment Center and Treatment Facilities. The screening is completed to identify and meet any urgent medical and/or mental health, safety, or educational needs of detained youth.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Org chart – Professional Standards identifying the PREA Coordinator. Agency PREA Coordinator is Teri Brister and is listed as the Supervising Probation Officer.</p> <p>Org chart – CVJDAC identifying the compliance managers. PREA Compliance Managers hold a Probation Corrections Supervisor I position and reports to the Facility Superintendent.</p> <p>Interviews were conducted with the PREA Coordinator and Compliance Managers. All feel they have enough time to manage all their PREA-related responsibilities, although it can become overwhelming at times. The agency has six Compliance Managers, which are assigned directly to this facility. The PREA Coordinator interacts with the Compliance Managers through regular email and phone calls, in person meetings, as well as, by providing them with ongoing training and resources. When an issue with complying with a PREA standard is identified, the PREA Coordinator works with the Compliance Managers to develop a corrective action plan to work towards compliance with that standard.</p> <p>Summary of findings:</p>

Based on the evidence discussed, the facility has demonstrated compliance with this standard.

115.312	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>San Bernardino County Probation does not contract for confinement of residents with private agencies or other entities; therefore, this standard is not applicable. The agency has a contract administrator.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.313	Supervision and monitoring
	<p>Auditor Overall Determination: Exceeds Standard</p> <p>Auditor Discussion</p> <p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23, Prison Rape Elimination Act of 2003 (PREA) states The agency requires each facility it operates to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect residents against abuse.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department, Central Valley Detention and Assessment Center 2020 Staffing Plan is a developed, implemented, and documented plan that provides adequate levels of staffing, and where applicable, video monitoring, to protect youth against sexual abuse. The plan takes into consideration the 11 criteria per standard to calculate adequate staffing levels and determine the need for video monitoring. The gateway facility closed and merged with CVJDAC. This created a large staffing pool. Ratios are currently at a 1:2 ratio, far exceeding the required 1:8 ratio.</p> <p>Annual PREA Staffing Plan Review 2021 was completed on January 19, 2021.</p> <p>Roles and Responsibilities of Probation Corrections Supervisors (PCSI/II) includes conducting facility rounds, at minimum, two rounds per shift to examine safety and security issues by PCSIs and one round per shift by PCSIIs.</p> <p>Completed Supervisor Unit Rounds forms for all units</p> <p>During a tour of the facility, the auditor did not notice any blind spots. The auditor observed private, single use bathrooms throughout the facility to ensure privacy. Doors remained locked and must be unlocked by a staff member upon request. Staffing ratios were observed. During this audit, staffing ratios were observed at a 1:2 ratio.</p> <p>Interviews were conducted with the superintendent, PREA coordinator, and staff responsible for conducting unannounced rounds. The facility has been able to meet the requirements of the staffing plan through mandatory overtime when needed. There have not been any deviations from the staffing plan. The facility is obligated by Board of State and COmmunity Corections (BSCC), Title 15. to maintain staffing ratios of 1:10 during waking hours and 1:10 during sleeping hours. The PREA coordinator is consulted regarding any assessments of, or adjustments to, the staffing plan for this facility. Unannounced rounds are completed on each shift daily by intermediate and higher-level facility staff. Rounds are documented. To prevent staff from alerting other staff that rounds are being conducted, rounds are completed randomly, without announcement, at different times of the day and night in different orders.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has exceeded compliance with this standard.</p>

115.315	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Exceeds Standard</p> <p>Auditor Discussion</p> <p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23, Prison Rape Elimination Act of 2003 (PREA) states that CVJDAC does not conduct cross-gender strip searches or cross-gender body cavity searches of youth except in exigent circumstances or when performed by medical practitioners.</p> <p>San Bernardino County Probation Department Procedure Searches in Booking, Detention and Treatment Facilities Title 15, Section 1360 does not permit cross-gender pat-down searches of youth, absent exigent circumstances.</p> <p>San Bernardino County Probation Department Procedure Lesbian, Gay, Bisexual, Transgender, Questioning, Intersex (LGBTQI) and Gender Non-conforming (GNC) Youth in Juvenile Detention and Assessment Centers (JDACs) and Treatment Facilities (TFs) Title 15, Section 1350, 1352, 1352.5; National Commission on Correctional Health Care (NCCCHC) requires that all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches be documented and justified. The policy prohibiting staff from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status.</p> <p>San Bernardino County Probation Department Procedure Searches in Booking, Detention and Treatment Facilities Title 15, Section 1360 prohibits staff from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Strip Search/Body Cavity Search Authorization Form</p> <p>DCB Defensive Tactics Instructor Training for training year 2020-2021 rosters.</p> <p>Juvenile Corrections Officer – Core Lesson Plan 20.8 for Person Search. Training length is six hours and includes testing mechanisms.</p> <p>During a tour of the facility, the auditor observed all staff announcing their presence when entering an occupied housing unit. Staff are reminded periodically of the requirement to announce staff presence when entering a housing unit where youth are likely to be showering, performing bodily functions, or changing clothes.</p> <p>Interviews were conducted with random staff, and random residents. There were not any residents that identified as transgender or intersex to interview at time of audit. Staff have received training to conduct pat-down searches and searches of transgender and intersex juveniles in a professional and respectful manner during new employee orientation. Staff are restricted from conducting cross gender pat down searches except in exigent circumstances. Staff are prohibited from searching or physically examining a transgender or intersex juvenile</p>

for the sole purpose of determining the juvenile's genital status. Staff stated that officers announce their presence when entering a housing unit that houses residents of the opposite gender. Juveniles are able to dress, shower, and use the toilet without being viewed by staff of the opposite gender. Juveniles said that all staff announce their presence when entering units. Residents were able to verbalize the purpose of staff announcements and what the expectations are, should a staff member of the opposite gender enter their living area. This is a direct reflection of the quality and quantity of PREA education residents receive. Residents stated that they have not been pat searched by an officer of the opposite gender. Juveniles stated that they have never been naked in full view of staff of the opposite gender. There was no cross-gender viewing incidents.

Summary of findings:

Based on the evidence discussed, the facility has exceeded compliance with this standard.

115.316	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) includes established procedures to provide disabled residents 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. The agency has established procedures to provide residents with limited English proficiency 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. The policy prohibits use of resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident’s safety, the performance of first-response duties under §115.364, or the investigation of the resident’s allegations.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Service Providers for Language Translation & Interpretation Updated 08/04/2020 list.</p> <p>PREA Refresher: Helping Youth Who Primarily Speak Another language October 2020 handout.</p> <p>During a tour of the facility, the auditor observed materials in English and in Spanish. Each unit has two ADA sleeping rooms and one ADA shower to accommodate juveniles with a physical disability.</p> <p>Interviews were conducted with agency head, random staff, and disabled/limited English proficiency residents. Staff stated that the agency has established procedures to provide juveniles with disabilities and those what are limited English proficient 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. Juveniles have full access to the language line contracted service. Staff states that the agency does not allow the use of juvenile interpreters, readers, or other types of juvenile assistants to assist disabled juveniles or juveniles with limited English proficiency when making an allegation of sexual abuse or sexual harassment. Residents stated that the facility provides them with information about sexual abuse and sexual harassment that they are able to understand. An adult interpreter is provided when needed. The residents stated that the facility provides someone to help them read, write, speak, or to explain things to them when they need help.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.317	Hiring and promotion decisions
	<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="252 324 965 358">Policy reviewed to verify compliance with this standard:</p> <p data-bbox="252 392 1484 649">Interoffice Memo regarding Staff Hiring Process – Sworn are required to meet the minimum standards as outlined in the California Government Code section 1031 and the hiring guideline established by the San Bernardino County Probation Department. A thorough background investigation is conducted using guidelines outlined in the California Peace Officer Standards and Training (POST). Memo states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.</p> <p data-bbox="252 683 1452 896">Interoffice Memo regarding Staff Hiring Process – Non-Sworn are required to meet the minimum hiring guidelines as established by the San Bernardino County Probation Department and a thorough background investigation is conducted before an applicant is considered for hire. Memo states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.</p> <p data-bbox="252 929 1452 1008">Interoffice Memo regarding Building Clearance Process for Contractors requires contractors for all unescorted access to undergo a background check.</p> <p data-bbox="252 1041 1484 1982">San Bernardino County Probation Department Policy Manual #23 Prison Rape Elimination Act of 2003 (PREA) prohibits hiring or promoting anyone who may have contact with residents, and prohibits enlisting the services of any contractor who may have contact with residents, who: • Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other; • Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or • Has been civilly or administratively adjudicated to have engaged in the activity described within this standard. The policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents. The policy requires that before it hires any new employees who may have contact with residents, it (a) conducts criminal background record checks; (b) consults any child abuse registry maintained by the State or locality in which the employee would work; and (c) consistent with Federal, State, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. The policy requires that a criminal background records check be completed, and applicable child abuse registries consulted before enlisting the services of any contractor who may have contact with residents. The policy requires that either criminal background records checks be conducted at least every five years of current employees and contractors who may have contact with residents or that a system is in place for otherwise capturing such information for current employees.</p> <p data-bbox="252 2016 1037 2049">Documents reviewed to verify compliance with this standard:</p> <p data-bbox="252 2083 1396 2116">Employee file review for background checks. All files reviewed contained criminal record</p>

background checks and child abuse registry checks.

Interviews were conducted with the administrative human resources staff. The facility performs criminal record background checks for all newly hired employees, employees who are being considered for a promotion, and contractors who may have contact with juveniles. The facility considers prior incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with juveniles. Before hiring new employees or contractors who may have contact with juveniles, the facility consults a child abuse registry maintained by the State. The facility is notified automatically by DOJ of any action against an employee. The facility asks all applicants and employees who may have contact with juveniles about previous misconduct. Questions are on the background questionnaire and given prior to hire. The facility imposes upon employees a continuing affirmative duty to disclose any such previous misconduct. When a former employee applies for work at another institution, upon request from that institution (signed waiver/authorization), the facility provides information on substantiated allegations of sexual abuse or sexual harassment involving the former employee.

Summary of findings:

Based on the evidence discussed, the facility has demonstrated compliance with this standard.

115.318	<p>Upgrades to facilities and technologies</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The agency has not acquired a new facility or made a substantial expansion or modification to existing facilities since the last PREA audit. The facility has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Map and count of surveillance cameras - the facility has 231 operational cameras throughout the interior and exterior of the facility.</p> <p>During a tour of the facility, the auditor observed 231 camera locations and was able to examine the video monitoring system in the master control room. There were no renovated areas to observe at time of audit. The auditor observed the design and layout of the facility. Staff are able to view juvenile activities from multiple locations creating better supervision and the reduction of blind spots. Many areas contained multiple cameras.</p> <p>Interviews were conducted with the agency head and the superintendent. They stated that when acquiring, designing, or planning substantial modifications to facilities there is no greater responsibility than keeping juveniles safe. When discussing any modifications, PREA standards are consulted to ensure compliance. Monitoring technology is utilized to supplement, not replace, staff supervision. All cameras provide up to three months of recorded data for playback when needed. The facility is continuously being monitored for blind spots.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has exceeded compliance with this standard.</p>
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115.321	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23 Prison Rape Elimination Act of 2003 (PREA) states that the agency/facility is responsible for conducting administrative sexual abuse investigations (including resident-on-resident sexual abuse or staff sexual misconduct). The San Bernardino County Sheriff Department or the San Bernardino Police Department is responsible for conducting criminal sexual abuse investigations (including resident-on-resident sexual abuse or staff sexual misconduct). The facility offers all residents who experience sexual abuse access to forensic medical examinations. Forensic medical examinations are offered without financial cost to the victim. If requested by the victim, a victim advocate, or qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals.</p> <p>San Bernardino County Probation Department Procedure Coordinated Response to Sexual Abuse and Sexual Harassment in the Juvenile Detention and Assessment Centers (JDACs) and Treatment Facilities (TFs) Title 15, Section 1324 states that the agency is not responsible for investigating criminal allegations of sexual abuse and relies on another agency to conduct these investigations, the agency has requested that the responsible agency follow the requirements of the PREA standards.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Sheriff/Coroner/Public Administrator Contract Law Enforcement Medical Services, Inc. to provide forensic medical examinations without financial cost to the victim. Examinations conducted by SAFE/SANE examiners are conducted at Redlands Community Hospital and Kaiser Hospital in Fontana.</p> <p>San Bernardino Sexual Assault Services, Inc Agreement 2020-2023. This agency will provide 24-hour crisis hotline and crisis intervention; crisis counseling; hospital accompaniment and advocacy; follow-up services; referral services; and bilingual services.</p> <p>Interviews were conducted with random staff, and compliance managers. Staff understand the agency’s protocol for obtaining usable physical evidence if a juvenile alleges sexual abuse. Staff was able to identify who is responsible for conducting sexual abuse investigations. If requested by the victim, a victim advocate with San Bernardino Sexual Assault Services, Inc will be provided. An MOU with this organization has been developed and contains the requirements described within this standard. San Bernardino Sexual Assault Services, Inc provides access to a SAFE/SANE professional 24 hours a day, 7 days a week. An active list of certified SAFE/SANE providers is maintained by the hospital. The facility has not had any sexual abuse incidents that required a forensic examination.</p> <p>At time of audit, there were not any juveniles who reported a sexual abuse to interview.</p>

Summary of findings:

Based on the evidence discussed, the facility has demonstrated compliance with this standard.

115.322	Policies to ensure referrals of allegations for 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="252 327 967 360">Policy reviewed to verify compliance with this standard:</p> <p data-bbox="252 405 1471 517">San Bernardino County Probation Department Policy Manual #23 Prison Rape Elimination Act of 2003 (PREA) ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.</p> <p data-bbox="252 562 1461 887">San Bernardino County Probation Department Procedure Coordinated Response to Sexual Abuse and Sexual Harassment in the Juvenile Detention and Assessment Centers (JDACs) and Treatment Facilities (TFs) Title 15, Section 1324 ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. The procedure requires allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior.</p> <p data-bbox="252 931 1038 965">Documents reviewed to verify compliance with this standard:</p> <p data-bbox="252 1010 928 1043">Plan "A" for Coordinated Response to Sexual Abuse</p> <p data-bbox="252 1088 928 1122">Plan "B" for Coordinated Response to Sexual Abuse</p> <p data-bbox="252 1167 1366 1200">Plan for Coordinated Response to Sexual Harassment reported by youth and by staff.</p> <p data-bbox="252 1245 794 1279">Sexual Abuse Immediate Services Report</p> <p data-bbox="252 1323 855 1357">Incident Report – Medical Services Addendum</p> <p data-bbox="252 1402 679 1435">PREA Retaliation Monitor Report</p> <p data-bbox="252 1480 1455 1615">Interviews were conducted with the agency head designee and investigator. Staff stated that the agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment. Facility notifies San Bernardino County Sheriff Office and Professional Standards Unit of all sexual abuse allegations.</p> <p data-bbox="252 1659 528 1693">Summary of findings:</p> <p data-bbox="252 1738 1481 1771">Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.331	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23 Prison Rape Elimination Act of 2003 (PREA) ensures that all employees who may have contact with residents on the agency's zero-tolerance policy for sexual abuse and sexual harassment. The agency trains all employees who may have contact with residents on the right of residents to be free from sexual abuse and sexual harassment.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Training Plan 2020-2021</p> <p>PREA Refresher: PREA Basics zero tolerance handout</p> <p>Relias PREA Reporting Obligations in Juvenile Facilities completion of online training records.</p> <p>Lesson Plan Class #19.2 Child Abuse (2-hour class)</p> <p>Lesson Plan Class #16.1 Sexual Assault and Abuse (7-hour class)</p> <p>PREA Refresher: Duty to Report: Knowledge, Suspicion, or Information handout</p> <p>PREA Refresher: Completing an Incident Report handout</p> <p>PREA Refresher: Encouraging Youth to Report Sexual Abuse handout</p> <p>PREA Refresher: Handling Disclosures of Abuse handout</p> <p>PREA Refresher: Professional Communication and Boundaries handout</p> <p>Review of staff training files</p> <p>Interviews were conducted with random staff. Staff attest to have received training in all eleven areas listed in the standard through in person training and video. Training was received upon hire and annually during refresher training. Videos are shown monthly to residents.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.332	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents reviewed to verify compliance with this standard:</p> <p>San Bernardino County PREA videos for contractors and volunteers (2-hour training)</p> <p>PREA Pamphlet for contractors, depending on the service they provide.</p> <p>Since the onsite of the COVID pandemic, the facility has not allowed any volunteers into the facility for over one year. There are not any current volunteers to interview or files to review. A review of training documents and curriculum indicates that training consists of an explanation of the agency's zero tolerance policy on sexual abuse and sexual harassment, and how to report such incidents. A PREA refresher training will be provided to all volunteers and contractors when the facility allows prior to them having any contact with residents.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.333	Resident education
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23 Prison Rape Elimination Act of 2003 (PREA) states that youth receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. Policy requires that residents who are transferred from one facility to another be educated regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents to the extent that the policies and procedures of the new facility differ from those of the previous facility. Resident PREA education is available in formats accessible to all residents, including those who are limited English proficient. Resident PREA education is available in formats accessible to all residents, including those who are deaf. Resident PREA education is available in formats accessible to all residents, including those who are visually impaired. Resident PREA education is available in formats accessible to all residents, including those who are otherwise disabled. Resident PREA education is available in formats accessible to all residents, including those who have limited reading skills. The agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, resident handbooks, or other written formats.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>CVJDAC Orientation Handbook (youth) – English</p> <p>CVJDAC Orientation Handbook (youth) - Spanish</p> <p>Youth Intake Zero-tolerance acknowledgement forms</p> <p>Zero-tolerance posters/Right to be free from sexual abuse</p> <p>During a tour of the facility, the auditor observed zero tolerance posters throughout the facility, juvenile handbooks available in processing (intake) area, and postings in intake regarding PREA.</p> <p>Interviews were conducted with intake staff and random residents. Staff stated that juveniles are provided with information about the agency's zero tolerance policy and how to report incidents or suspicions of sexual abuse and sexual harassment. Continuing education is provided to juveniles through a PREA video and postings. Juveniles are educated regarding their rights to be free from sexual abuse and sexual harassment, and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. Juveniles receive initial PREA information on day one of arrival during the intake process. Juveniles recalled being given information about PREA at intake, as well as, watching the video and receiving a PREA handbook. All youth were educated on their rights to be free from sexual abuse and sexual harassment, from retaliation for reporting such incidents, and on agency policies and procedures for responding to such incidents within 10</p>

days of intake. Residents stated that they are shown a PREA video weekly in their units, which far exceeds this standard requirement.

Summary of findings:

Based on the evidence discussed, the facility has exceeded compliance with this standard.

115.334	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23 Prison Rape Elimination Act of 2003 (PREA) requires that investigators are trained in conducting sexual abuse investigations in confinement settings.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Investigator Training Rosters</p> <p>Interviews were conducted with investigative staff. Staff stated that they received training specific to conducting sexual abuse and sexual harassment investigations in confinement settings through Relias Online Training. The course covered techniques for interviewing juvenile sexual abuse victims, proper use of Miranda and Garrity rights, sexual abuse evidence collection, and the criteria and evidence required to substantiate a case for administrative or prosecution referral.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.335	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23 Prison Rape Elimination Act of 2003 (PREA) agency policy relates to the training of medical and mental health practitioners who work regularly in its facilities.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>PREA 201 for Medical and Mental Health Practitioners training certificates. Training provided by the NIC Academy Division.</p> <p>PREA: Behavioral Health Care for Sexual Assault Victims in a Confinement Setting training certificates. Training provided by the NIC Academy Division.</p> <p>Interviews were conducted with medical and mental health staff. Staff stated that facility medical staff do not conduct forensic examinations. Both medical and mental health stated that they received training on how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to juvenile victims of sexual abuse and sexual harassment, and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.341	Obtaining information from residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23 Prison Rape Elimination Act of 2003 (PREA) requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other residents.</p> <p>San Bernardino County Probation Department Procedure Housing Assessments and Classifications Title 15, Section 1352, 1350.5 requires that residents be screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their intake.</p> <p>During a tour of the facility, the auditor observed the intake processing area and received a copy of all the intake paperwork.</p> <p>Interviews were conducted with staff responsible for risk screening, random juveniles, PREA Coordinator, and the Compliance Managers. Staff stated that juveniles upon admission to the facility or transferred from another facility are screened for risk of sexual abuse victimization or sexual abusiveness toward other juveniles. The screening is completed the first day during the intake/processing. All juveniles are reassessed weekly during MDT meetings, within 14 days by mental health staff, and a formal review is completed at minimum twice a year. The risk screening considers all criteria specified within this standard. The risk screening is a standardized form used for every juvenile. Information is ascertained through interview, and a review of files, history, and case notes. Only staff working directly with residents, mental health, medical, and supervisors have access to the risk screening. Juveniles remembered being asked questions at time of intake regarding if they have ever been sexually abused, whether they identify as being gay, bisexual, transgender, and whether they have any disabilities.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has exceeded compliance with this standard.</p>

115.342	Placement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Procedure Housing Assessments and Classifications Title 15, Section 1352, 1350.5 states that the agency/facility uses information from the risk screening required by PREA standard 115.341 to inform housing, bed, work, education, and program assignments with the goal of keeping all residents safe and free from sexual abuse.</p> <p>San Bernardino County Probation Department Procedure Lesbian, Gay, Bisexual, Transgender, Questioning, Intersex (LGBTQI) and Gender Non-Conforming (GNC) Youth in Juvenile Detention and Assessment Centers (JDACS) and Treatment Facilities (TFs) Title 15, Section 1350, 1352, 1352.5, National Commission on Correctional Health Care (NCCHS) states that that residents at risk of sexual victimization may only be placed in isolation as a last resort if less restrictive measures are inadequate to keep them and other residents safe, and only until an alternative means of keeping all residents safe can be arranged. The facility prohibits placing lesbian, gay, bisexual, transgender, or intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status. The facility prohibits considering lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator of likelihood of being sexually abusive. The agency or facility makes housing and program assignments for transgender or intersex residents in a facility on a case-by-case basis.</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) requires that residents at risk of sexual victimization may only be placed in isolation as a last resort if less restrictive measures are inadequate to keep them and other residents safe, and only until an alternative means of keeping all residents safe can be arranged. The facility policy requires that residents at risk of sexual victimization who are placed in isolation have access to legally required educational programming, special education services, and daily large-muscle exercise. The facility prohibits placing lesbian, gay, bisexual, transgender, or intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status.</p> <p>San Bernardino County Probation Department Procedure Administrative Separation Title 15, Sections 1354, 1354.5, 1390 and NCCHC requires that residents at risk of sexual victimization who are placed in isolation have access to legally required educational programming, special education services, and daily large-muscle exercise. If a resident at risk of sexual victimization is placed on single cell, the facility affords each such resident a review every 7 days to determine whether there is a continuing need to restrict the youth from having a roommate.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Housing Assessment and Classification packet</p> <p>Information Verification Form</p>

SOGIE Booking Questionnaire San Bernardino Probation

During a tour of the facility, the auditor was able to tour living units. All juveniles are able to shower separately from other juveniles. The auditor did not observe any isolation areas or juveniles being held in isolation.

Interviews were conducted with the Compliance Managers, staff responsible for completing the risk screening, superintendent, medical and mental health staff, and the PREA Coordinator, and juveniles that identified as being gay, lesbian, bisexual and transgender. The facility does not use isolation, therefore there were not any staff to interview who supervise juveniles in isolation and no juveniles to interview who were placed in isolation. All staff stated that isolation is not used at the facility and that the facility does not have a special housing unit for lesbian, gay, bisexual, transgender, or intersex juveniles. Compliance managers and staff that perform screening for risk of victimization and abusiveness stated that the facility uses information from risk screening during intake to keep juveniles safe and free from sexual abuse. This information is used to determine housing assignments, roommate status, and programming. No youth were held in isolation for victimization in the past 12 months. Transgendered residents stated that they were asked questions about their safety when they first arrived and that they have not been placed in a housing area specifically for transgendered residents. Residents stated that they are provided a private area to shower, although they would like more privacy if possible. Interviews with residents that identify as gay, lesbian, and bisexual stated that they have not been placed in a housing unit only for LGBTI residents.

Summary of findings:

Based on the evidence discussed, the facility has demonstrated compliance with this standard.

115.351	Resident reporting
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) allows for multiple internal ways for residents to report privately to agency officials about: • sexual abuse and sexual harassment; • retaliation by other residents or staff for reporting sexual abuse and sexual harassment; AND • staff neglect or violation of responsibilities that may have contributed to such incidents. The policy mandates that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties.</p> <p>San Bernardino County Probation Department Procedure Immigration and Consulate Notifications requires residents detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>MOU with San Bernardino County Department of Aging and Adult Services for External Ombudsman Services provides at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of the agency.</p> <p>Incident Report log</p> <p>During a tour of the facility, the auditor was able to verify multiple internal ways for juveniles to report privately to agency staff. The auditor observed reporting forms throughout the facility and boxes mounted on walls in which juveniles can place their written report into. Posters of hotline numbers were displayed near phones for juvenile’s access.</p> <p>Interviews were conducted with random staff, random juveniles, and the compliance manager. At time of audit, there were no juveniles who reported a sexual abuse to interview. Staff stated that they can privately report sexual abuse and sexual harassment of juveniles by speaking privately with a supervisor, by calling the hotline number, and by writing a memo. Juveniles can report privately through the grievance process, calling the hotline number, or through a third party. The agency provides an Ombudsman to for residents to report abuse or harassment to a public or private entity or office that is not part of the agency.</p> <p>In order for the juvenile to report by phone, the juvenile has direct access to place a phone call themselves. The juvenile can speak in private. Juveniles are able to remain anonymous when reporting. Staff are required to document verbal reports immediately. Staff are able to call the Ombudsman and report sexual abuse and sexual harassment.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.352	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) explains resident grievances regarding sexual abuse. The policy allows a resident to submit a grievance regarding an allegation of sexual abuse at any time regardless of when the incident is alleged to have occurred and does not require a resident to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse. The agency's policy and procedure require that a resident grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint. The agency's policy and procedures that require that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. Agency policy and procedure permits third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and to file such requests on behalf of residents. Agency policy and procedure require that if the resident declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the resident's decision to decline. Agency policy allows parents or legal guardians of residents to file a grievance alleging sexual abuse, including appeals, on behalf of such resident, regardless of whether or not the resident agrees to having the grievance filed on their behalf. The agency has a policy and established procedures for filing an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. The agency's policy and procedures for emergency grievances alleging substantial risk of imminent sexual abuse require an initial response within 48 hours. The agency's policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse require that a final agency decision be issued within 5 days. The agency has a written policy that limits its ability to discipline a resident for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the resident filed the grievance in bad faith.</p> <p>San Bernardino County Probation Department Procedure Grievances and Appeals Title 15, Section 1361 allows a resident to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Youth PREA Handbook containing ways to report</p> <p>At time of audit, there were no juveniles who reported sexual abuse to be interviewed.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.353	Resident access to outside confidential support services and legal representation
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Policy reviewed to verify compliance with this standard:</p> <p>The visitation (access to parents and attorneys) policy is embedded into the youth's Orientation Handbook.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>San Bernardino Sexual Assault Services Pamphlet provides residents with access to outside victim advocates for emotional support services related to sexual abuse and access to such services by giving residents (by providing, posting, or otherwise making accessible) mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, State, or national victim advocacy or rape crisis organizations.</p> <p>Crisis Hotline number poster - SBSAS</p> <p>MOU with community service provider (SBSAS) that are able to provide residents with emotional support services related to sexual abuse.</p> <p>Youth Orientation Handbook, pages 17, 20, and 26 contain information regarding youth access to parents and attorneys.</p> <p>During a tour of the facility, the auditor was able to observe posters displayed containing hotline numbers to crisis/advocacy services.</p> <p>Interviews were conducted with random juveniles, superintendent, and the compliance managers. At time of audit, there were no juveniles detained who reported a sexual abuse. Juveniles were aware that outside services were available for dealing with sexual abuse. Juveniles stated that there is a hotline number posted that they can call. Juveniles thought they what they say to people from the hotline agency would remain private. Juveniles have regular access to attorneys and parents. Staff stated that juveniles can have daily private access to attorneys and parents.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.354	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The agency website contains policy and procedure for third party reporting. The auditor was able to review the documents on the website http://joinprobation.org. The auditor was also able to view third party reporting procedures during the facility tour.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.361	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. It requires all staff to report immediately and according to agency policy any retaliation against residents or staff who reported such an incident and it requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. The agency requires all staff to comply with any applicable mandatory child abuse reporting laws. Apart from reporting to the designated supervisors or officials and designated State or local service agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.</p> <p>Interviews were conducted with random staff, medical and mental health staff, compliance managers, and superintendent. Staff stated that when the facility receives an allegation of sexual abuse, staff will report it to the PREA coordinator, compliance manager, supervisor, Professional Standards Unit, and the Department of Child Family Services. The notification would be immediate. The juvenile’s attorney will be notified as well. All allegations of sexual abuse and sexual harassment are reported directly to facility investigators. The facility remains in constant communication with the Professional Standards Unit and the Department of Child Family Services and law enforcement regarding all investigations. Medical and mental health staff, at the initiation of services, discloses the limitations of confidentiality and their duty to report to juveniles. All staff are mandated reporters.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.362	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) states when the agency or facility learns that a resident is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the resident</p> <p>Interviews were conducted with the agency head, superintendent, and random staff. Staff understand the facility's process and the actions they would take should they learn a juvenile is at risk of imminent sexual abuse. Actions will be taken immediately. Facility administration will meet immediately to determine the most appropriate response to the situation and put a plan in place to keep the juvenile safe. The facility did not have any incidents of substantial risk of imminent sexual abuse.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.363	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) requires that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the PREA Coordinator must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. The agency's policy also requires that the head of the facility notify the appropriate investigative agency. Agency policy requires that the facility head provides such notification as soon as possible, but no later than 72 hours after receiving the allegation. The agency or facility documents that it has provided such notification within 72 hours of receiving the allegation. The agency or facility policy requires that allegations received from other agencies or facilities are investigated in accordance with the PREA standards.</p> <p>Interviews were conducted with the agency head and the superintendent. When the facility receives an allegation of sexual abuse or sexual harassment from another facility it is investigated immediately, and the notification process would be the same as if it was reported within the facility. According to staff, the facility has not yet had this type of report; therefore, no documentation is available for review.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.364	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) includes first responder protocols. Agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence. Agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to notify security staff.</p> <p>San Bernardino County Probation Department Procedure Coordinated Response to Sexual Abuse and Sexual Harassment in the Juvenile Detention and Assessment Centers (JDACs) and Treatment Facilities (TFs) Title 15, Section 1324 describes first responder duties. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report separate the alleged victim and abuser. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. The policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. The policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report 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.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Interviews were conducted with staff first responders and random staff. At time of audit there were no juveniles detained who reported a sexual abuse. All staff were able to describe accurately and in detail the actions they would take as a first responder to an allegation of sexual abuse. Staff explained thoroughly that upon learning of an allegation that a juvenile was sexually abused, they would immediately separate the alleged victim and abuser; preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; and request that the alleged victim and alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.365	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Procedure Coordinated Response to Sexual Abuse and Sexual Harassment in the Juvenile Detention and Assessment Centers (JDACs) and Treatment Facilities (TFs) Title 15, Section 1324 is a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>An interview was conducted with the superintendent. The superintendent was able to describe the facility's plan to coordinate actions among first responders, medical, mental health, investigators, and facility leadership. The team would meet regularly to determine what the next steps will be.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.366	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has entered into or renewed any collective bargaining agreements. Agreements can be found at https://hr.sbcounty.gov/memorandums-of-understanding.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>General MOU</p> <p>Nurses Unit and Per Diem Nurses Unit MOU</p> <p>Probation MOU</p> <p>Specialized Peace Officer Unit and Specialized Peace Officer Supervisory Unit MOU</p> <p>Interviews were conducted with the agency head. The agency head was able to verify that the collective bargaining agreement permits the agency to remove alleged staff sexual abusers from contact with any juveniles pending an investigation or determination of whether and to what extent discipline is warranted.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.367	<p>Agency protection against retaliation</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) protects all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The agency designates staff member(s) or charges department(s) with monitoring for possible retaliation. The agency/facility monitors the conduct or treatment of residents or staff who reported sexual abuse and of residents who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by residents or staff.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Specialty list of staff members charged with monitoring retaliation.</p> <p>PREA Retaliation Monitor Report</p> <p>Interviews were conducted with the agency head, superintendent, and designated staff member charged with monitoring retaliation. At time of audit, there were no juveniles to interview who reported a sexual abuse or juveniles who were held in isolation. Staff stated that they follow policy when it comes to protecting juveniles and staff from retaliation. Juveniles can be moved to other units or a different facility and staff can be assigned to other areas or placed on administrative leave. Allegations of retaliation are investigated immediately. Monitoring of retaliation consists of speaking to staff and juveniles, assigning a staff to monitor, looking for red flags, and review of progress notes. The maximum length of time to monitor conduct and treatment is 90 days. This can be extended longer if needed.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>
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115.368	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) states that residents who allege to have suffered sexual abuse may only be placed in isolation as a last resort if less restrictive measures are inadequate to keep them and other residents safe, and only until an alternative means of keeping all residents safe can be arranged. The facility policy requires that residents who are placed in isolation because they allege to have suffered sexual abuse have access to legally required educational programming, special education services, and daily large-muscle exercise.</p> <p>During a tour of the facility, the auditor did not observe any isolation areas or juveniles held in isolation.</p> <p>Interviews were conducted with the superintendent, and medical and mental health staff. There were no staff who supervise juveniles in isolation to interview, nor juveniles held in isolation to interview at time of audit. Staff stated that there has not been any instance in which isolation was utilized to protect a juvenile who alleged to have suffered sexual abuse. Juveniles are never segregated or isolated. Juveniles can be moved to another unit or room if needed.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.371	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Procedure Department Investigations/Critical Incident Reviews describes criminal and administrative agency investigations.</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) states that the agency does not terminate an investigation solely because the source of the allegation recants the allegation. The agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.</p> <p>Interviews were conducted with investigative staff, PREA coordinator, compliance managers, and the superintendent. There were no juveniles who reported sexual abuse to interview at time at audit. Staff stated that the Professional Standards Unit and local law enforcement will investigate sexual abuse allegations and the facility is kept informed of the progress by designating a point of contact in the central office. The PREA coordinator remain in constant contact with the investigative agency.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.372	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) imposes a standard of a preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>An interview was conducted with investigative staff. A preponderance of evidence is the standard of evidence required to substantiate allegations of sexual abuse or sexual harassment.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.373	Reporting to residents
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) requires that any resident who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. Following a resident's allegation that a staff member has committed sexual abuse against the resident, the agency/facility subsequently informs the resident (unless the agency has determined that the allegation is unfounded) whenever: • The staff member is no longer posted within the resident's unit; • The staff member is no longer employed at the facility; • The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or • The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. Following a resident's allegation that he or she has been sexually abused by another resident in an agency facility, the agency subsequently informs the alleged victim whenever: • The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or • The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. Following a resident's allegation that he or she has been sexually abused by another resident in an agency facility, the agency subsequently informs the alleged victim whenever: • The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or • The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. The agency has a policy that all notifications to residents described under this standard are documented.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Unsubstantiated complaint of sexual abuse document</p> <p>Sample of Administrative Investigation packet</p> <p>An interview was conducted with the superintendent. There are no juveniles who reported sexual abuse. The facility notifies a juvenile who makes an allegation of sexual abuse, that the allegation has been determined to be substantiated, unsubstantiated, or unfounded verbally and in writing.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.376	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) states that staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. The disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.</p> <p>County of San Bernardino Policy Manual Non-Discrimination/Harassment Policy states that staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.377	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with residents. The facility takes appropriate remedial measures and considers whether to prohibit further contact with residents in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>An interview was conducted with the superintendent. In case of any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, the facility takes remedial measures and prohibits further contact with juveniles. An investigation will begin immediately, and the contractor or volunteer will have no further access to the facility. There have not been any incidents of sexual abuse by contractors or volunteers.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.378	Interventions and disciplinary sanctions for residents
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) states that residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse. Residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for resident-on-resident sexual abuse. In the event a disciplinary sanction for resident-on resident sexual abuse results in the isolation of a resident, the facility policy requires that residents in isolation have daily access to large muscle exercise, legally required educational programming, and special education services. In the event a disciplinary sanction for resident-on-resident sexual abuse results in the isolation of a resident, residents in isolation receive daily visits from a medical or mental health care clinician. In the event a disciplinary sanction for resident-on-resident sexual abuse results in the isolation of a resident, residents in isolation have access to other programs and work opportunities to the extent possible. The facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. The facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for the abuse, the facility considers whether to require the offending resident to participate in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives. Access to general programming or education is not conditional on participation in such interventions. The agency disciplines residents for sexual conduct with staff only upon finding that the staff member did not consent to such contact. The agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation. The agency prohibits all sexual activity between residents. The agency prohibits all sexual activity between residents and disciplines residents for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Interviews were conducted with the superintendent and medical and mental health staff. Juveniles are subject to disciplinary sanctions following an administrative or criminal finding that the juvenile engaged in juvenile-on-juvenile sexual abuse. Sanctions can include criminal charges, behavior motivation program, or transfer to another facility. The facility offers general therapy, counseling, and other intervention services. Referrals are made to outside agencies for services designed to address and correct the underlying reasons or motivations for sexual abuse.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.381	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) requires that all residents at this facility who have disclosed any prior sexual victimization during a screening are offered a follow-up meeting with a medical or mental health practitioner. Medical and mental health staff maintain secondary materials documenting compliance with the above required services. All residents who have ever previously perpetrated sexual abuse are offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening. The follow-up meeting was offered within 14 days of the intake screening. Mental health staff maintain secondary materials documenting compliance with the above required services. Medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Samples of 14-day review of reported victimization</p> <p>Interviews were conducted with staff responsible for risk screening and juveniles detained who disclosed sexual victimization during intake. Staff stated that when a screening indicates that a juvenile has experienced prior sexual victimization or a previously perpetrated sexual abuse, whether in an institutional setting or in the community, a follow up meeting with a medical and/or mental health practitioner is offered. Informed consent from juveniles, under the age of 18, is not required before reporting about prior sexual victimization that did not occur in an institutional setting. Staff discloses at intake that they are mandated reporters. A resident was interviewed who disclosed prior sexual victimization during risk screening. The juvenile stated that when they told a staff that they had been sexually abused, the staff asked them if they would like to meet with a doctor or speak to a counselor. The juvenile declined this option.</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.382	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) requires that resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Interviews were conducted with medical and mental health staff, and staff first responders. There were no juveniles detained who reported a sexual abuse. Staff stated that juvenile victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services, to include emergency contraception and sexually transmitted infection prophylaxis. Juvenile victims are immediately referred to San Bernardino Sexual Assault Services, Inc. for SAFE/SANE services. Staff first responders were able to describe the actions they would take as a first responder to an allegation of sexual abuse.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.383	<p>Ongoing medical and mental health care for sexual abuse victims and abusers</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) states that the facility offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. Female victims of sexual abusive vaginal penetration while incarcerated are offered pregnancy tests. If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services. Resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The facility attempts to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>Interviews were conducted with medical and mental health staff. There were no juveniles detained who reported a sexual abuse to interview at time of audit. Staff stated that treatment contains follow-up services, treatment plans, and when necessary, referrals for continued care after leaving the facility. Medical and mental health services are consistent with community level of care. If pregnancy results from sexual abuse while detained, victims are given timely information and access to all lawful pregnancy related services immediately. Mental Health evaluations of all known juvenile-on-juvenile abusers are referred to outside providers.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>
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115.386	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) requires the facility to conduct a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. The facility will conduct a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation. The sexual abuse incident review team includes the PREA coordinator, PREA manager, and upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners. The facility prepares a report of its findings from sexual abuse incident reviews to include any recommendations for improvement and submits such report to the facility head or designee and PREA coordinator. The facility implements the recommendations for improvement or documents its reasons for not doing so.</p> <p>Interviews were conducted with the superintendent, compliance managers, and incident review team members. Staff stated that the facility has an incident report team, consisting of management, supervisors, investigators, medical staff, PREA coordinator, PREA manager, and mental health staff. The team examines how the incident occurred and develops an action plan to address any issues. CVJDAC did not have any criminal administrative investigations in the past 12 months.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.387	Data collection
	<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="252 327 967 360">Policy reviewed to verify compliance with this standard:</p> <p data-bbox="252 405 1484 819">San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) ensures that the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The agency aggregates the incident-based sexual abuse data at least annually. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. The agency provided the Department of Justice (DOJ) with data from the previous calendar year upon request.</p> <p data-bbox="252 864 1038 898">Documents reviewed to verify compliance with this standard:</p> <p data-bbox="252 931 663 965">2020 Annual Report for website</p> <p data-bbox="252 999 663 1032">2019 Annual Report for website</p> <p data-bbox="252 1066 663 1099">2018 Annual Report for website</p> <p data-bbox="252 1155 528 1189">Summary of findings:</p> <p data-bbox="252 1223 1484 1256">Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.388	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents reviewed to verify compliance with this standard:</p> <p>PREA Report – 2020 verifies that the agency reviews data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including: • Identifying problem areas; • Taking corrective action on an ongoing basis; and • Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole. The annual report includes a comparison of the current year's data and corrective actions with those from prior years. The annual report provides an assessment of the agency's progress in addressing sexual abuse.</p> <p>The agency makes its annual report readily available to the public at least annually through its website https://joinprobation.org. The annual reports are approved by the agency head.</p> <p>Interviews were conducted with the agency head, PREA coordinator, and the compliance managers. Staff stated that incident based sexual abuse data to assess and improve sexual abuse prevention, detection, response policies, practices, and training is collected. Annual reports are written according to standard. The PREA coordinator completes the DOJ SSV. The agency prepares an annual report of its findings from its data review and any corrective actions for each facility, as well as agency as a whole. The annual report does not contain any personal identifiable information.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.389	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy reviewed to verify compliance with this standard:</p> <p>San Bernardino County Probation Department Policy Manual #23. Prison Rape Elimination Act of 2003 (PREA) ensures that incident-based and aggregate data are securely retained. Agency policy requires that aggregated sexual abuse data from facilities under its direct control be made readily available to the public, at least annually, through its website. Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The agency maintains sexual abuse data collected for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.</p> <p>Documents reviewed to verify compliance with this standard:</p> <p>PREA Annual Report - 2020</p> <p>Website review of PREA Report. The agency removed all personal identifiers before publishing.</p> <p>An interview was conducted with the PREA coordinator. Staff stated that the agency reviews data collected and aggregated data in order to assess and improve the effectiveness of its sexual abuse prevention, detention, and response policies, and training.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.401	Frequency and scope of audits
	<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 1474 405">In 2020, the agency operated the Gateway facility and the CVJDAC facility. Gateway closed in 2020. CVJDAC is currently the only operating facility at this time.</p> <p data-bbox="252 445 1481 562">The CVJDAC facility was audited in 2018. The facility is currently in cycle 3, year two (August 20, 2020 – August 19, 2021 of the audit process. The facility’s next audit should be scheduled in cycle 4, year 2, between August 20, 2024 and August 19, 2025.</p> <p data-bbox="252 602 1474 851">During the prior three-year audit period, the agency ensured that both facilities operated by the agency, was audited at least once. The auditor was able to review previous audit reports on the agency website. The auditor was given access to, and the ability to observe, all areas of the audited facility. The auditor was permitted to request and receive copies of any relevant documents, including electronically stored documents. The auditor was also permitted to conduct private interviews with juveniles.</p> <p data-bbox="252 891 1453 1097">During a tour of the facility, the auditor was able to verify that a Notice of Audit was posted in all housing units and other areas throughout the facility. Juveniles verified that the Notice of Audit was placed weeks ago. They were aware of the audit and that they could write a confidential letter and mail it to the auditor, if needed. The auditor did not receive any correspondence from staff, third party, or juveniles.</p> <p data-bbox="252 1137 528 1171">Summary of findings:</p> <p data-bbox="252 1211 1481 1245">Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>During the prior three-year audit period, the agency ensured that each facility it operated, was audited at least once. The agency is in the second year of the third cycle. The auditor was able to review previous audit reports on the agency website http://joinprobation.org. All final audit reports were posted within 90 days.</p> <p>Summary of findings:</p> <p>Based on the evidence discussed, the facility has demonstrated compliance with this standard.</p>

Appendix: Provision Findings		
115.311 (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
115.311 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.311 (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
115.312 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
115.312 (b)	Contracting with other entities for the confinement of residents	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents OR the response to 115.312(a)-1 is "NO".)	na
115.313 (a)	Supervision and monitoring	

	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has implemented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Generally accepted juvenile detention and correctional/secure residential practices?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any judicial findings of inadequacy?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from Federal investigative agencies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from internal or external oversight bodies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: All components of the facility's physical plant (including "blind-spots" or areas where staff or residents may be isolated)?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the resident population?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels	yes

	and determining the need for video monitoring: The number and placement of supervisory staff?	
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Institution programs occurring on a particular shift?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any applicable State or local laws, regulations, or standards?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes
115.313 (b)	Supervision and monitoring	
	Does the agency comply with the staffing plan except during limited and discrete exigent circumstances?	yes
	In circumstances where the staffing plan is not complied with, does the facility fully document all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.313 (c)	Supervision and monitoring	
	Does the facility maintain staff ratios of a minimum of 1:8 during resident waking hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility maintain staff ratios of a minimum of 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility fully document any limited and discrete exigent circumstances during which the facility did not maintain staff ratios? (N/A only until October 1, 2017.)	yes
	Does the facility ensure only security staff are included when calculating these ratios? (N/A only until October 1, 2017.)	yes
	Is the facility obligated by law, regulation, or judicial consent decree to maintain the staffing ratios set forth in this paragraph?	yes

115.313 (d)	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: Prevailing staffing patterns?	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
115.313 (e)	Supervision and monitoring	
	Has the facility 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? (N/A for non-secure facilities)	yes
	Is this policy and practice implemented for night shifts as well as day shifts? (N/A for non-secure facilities)	yes
	Does the facility 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? (N/A for non-secure facilities)	yes
115.315 (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
115.315 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches in non-exigent circumstances?	yes

115.315 (c)	Limits to cross-gender viewing and searches	
	Does the facility document and justify all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches?	yes
115.315 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement policies and procedures that enable residents 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 a resident housing unit?	yes
	In facilities (such as group homes) that do not contain discrete housing units, does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing? (N/A for facilities with discrete housing units)	yes
115.315 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If a resident's genital status is unknown, does the facility determine genital status during conversations with the resident, 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
115.315 (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 residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.316 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all	yes

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

	through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	
115.316 (b)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.316 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.364, or the investigation of the resident's allegations?	yes

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

115.317 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consult any child abuse registry maintained by the State or locality in which the employee would work?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.317 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
	Does the agency consult applicable child abuse registries before enlisting the services of any contractor who may have contact with residents?	yes
115.317 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes
115.317 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes

115.317 (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
115.317 (h)	Hiring and promotion decisions	
	Unless prohibited by law, 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
115.318 (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 residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.318 (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 residents 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
115.321 (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

115.321 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth? (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
115.321 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all residents who experience 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
115.321 (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?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.321 (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
115.321 (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 entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency is not responsible for investigating allegations of sexual abuse.)	yes
115.321 (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? (Check N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.321 (d) above.)	yes
115.322 (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
115.322 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.322 (c)	Policies to ensure referrals of allegations for investigations	
	<p>If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.321(a))</p>	yes

115.331 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in juvenile facilities?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of juvenile victims of sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
	Does the agency train all employees who may have contact with residents on: Relevant laws regarding the applicable age of consent?	yes

115.331 (b)	Employee training	
	Is such training tailored to the unique needs and attributes of residents of juvenile facilities?	yes
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.331 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.331 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.332 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.332 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.332 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

115.333 (a)	Resident education	
	During intake, do residents receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	Is this information presented in an age-appropriate fashion?	yes
115.333 (b)	Resident education	
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.333 (c)	Resident education	
	Have all residents received such education?	yes
	Do residents receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility?	yes
115.333 (d)	Resident education	
	Does the agency provide resident education in formats accessible to all residents including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Have limited reading skills?	yes

115.333 (e)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.333 (f)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.334 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.331, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received 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 115.321(a).)	yes
115.334 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing juvenile sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(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 115.321(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 115.321(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 115.321(a).)	yes
115.334 (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 115.321(a).)	yes

115.335 (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 juvenile 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
115.335 (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
115.335 (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

115.335 (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 §115.331? (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
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.332? (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
115.341 (a)	Obtaining information from residents	
	Within 72 hours of the resident's arrival at the facility, does the agency obtain and use information about each resident's personal history and behavior to reduce risk of sexual abuse by or upon a resident?	yes
	Does the agency also obtain this information periodically throughout a resident's confinement?	yes
115.341 (b)	Obtaining information from residents	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.341 (c)	Obtaining information from residents	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Prior sexual victimization or abusiveness?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Current charges and offense history?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Age?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Level of emotional and cognitive development?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical size and stature?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Mental illness or mental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Intellectual or developmental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: The resident's own perception of vulnerability?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents?	yes

115.341 (d)	Obtaining information from residents	
	Is this information ascertained: Through conversations with the resident during the intake process and medical mental health screenings?	yes
	Is this information ascertained: During classification assessments?	yes
	Is this information ascertained: By reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's files?	yes
115.341 (e)	Obtaining information from residents	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes
115.342 (a)	Placement of residents	
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Housing Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Bed assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Work Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Education Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Program Assignments?	yes

115.342 (b)	Placement of residents	
	Are residents isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged?	yes
	During any period of isolation, does the agency always refrain from denying residents daily large-muscle exercise?	yes
	During any period of isolation, does the agency always refrain from denying residents any legally required educational programming or special education services?	yes
	Do residents in isolation receive daily visits from a medical or mental health care clinician?	yes
	Do residents also have access to other programs and work opportunities to the extent possible?	yes
115.342 (c)	Placement of residents	
	Does the agency always refrain from placing: Lesbian, gay, and bisexual residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Transgender residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from considering lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator or likelihood of being sexually abusive?	yes

115.342 (d)	Placement of residents	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents 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 residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.342 (e)	Placement of residents	
	Are placement and programming assignments for each transgender or intersex resident reassessed at least twice each year to review any threats to safety experienced by the resident?	yes
115.342 (f)	Placement of residents	
	Are each transgender or intersex resident'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
115.342 (g)	Placement of residents	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes
115.342 (h)	Placement of residents	
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The basis for the facility's concern for the resident's safety? (N/A for h and i if facility doesn't use isolation?)	na
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? (N/A for h and i if facility doesn't use isolation?)	na
115.342 (i)	Placement of residents	
	In the case of each resident who is isolated as a last resort when less restrictive measures are inadequate to keep them and other residents safe, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

115.351 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: 2. Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.351 (b)	Resident reporting	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
	Are residents detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security to report sexual abuse or harassment?	yes
115.351 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.351 (d)	Resident reporting	
	Does the facility provide residents with access to tools necessary to make a written report?	yes
115.351 (e)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes

115.352 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.352 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.352 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

115.352 (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 residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90 day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension of time to respond is 70 days per 115.352(d)(3)) , does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

115.352 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes
	Is a parent or legal guardian of a juvenile allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such juvenile? (N/A if agency is exempt from this standard.)	yes
	If a parent or legal guardian of a juvenile files a grievance (or an appeal) on behalf of a juvenile regarding allegations of sexual abuse, is it the case that those grievances are not conditioned upon the juvenile agreeing to have the request filed on his or her behalf? (N/A if agency is exempt from this standard.)	yes

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

115.353 (a)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by providing, posting, or otherwise making accessible 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?	yes
	Does the facility enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible?	yes
115.353 (b)	Resident access to outside confidential support services and legal representation	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.353 (c)	Resident access to outside confidential support services and legal representation	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.353 (d)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with reasonable and confidential access to their attorneys or other legal representation?	yes
	Does the facility provide residents with reasonable access to parents or legal guardians?	yes

115.354 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.361 (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 they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.361 (b)	Staff and agency reporting duties	
	Does the agency require all staff to comply with any applicable mandatory child abuse reporting laws?	yes
115.361 (c)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials and designated State or local services agencies, are staff prohibited 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
115.361 (d)	Staff and agency reporting duties	
	Are medical and mental health practitioners required to report sexual abuse to designated supervisors and officials pursuant to paragraph (a) of this section as well as to the designated State or local services agency where required by mandatory reporting laws?	yes
	Are medical and mental health practitioners required to inform residents of their duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.361 (e)	Staff and agency reporting duties	
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the appropriate office?	yes
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the alleged victim's parents or legal guardians unless the facility has official documentation showing the parents or legal guardians should not be notified?	yes
	If the alleged victim is under the guardianship of the child welfare system, does the facility head or his or her designee promptly report the allegation to the alleged victim's caseworker instead of the parents or legal guardians? (N/A if the alleged victim is not under the guardianship of the child welfare system.)	yes
	If a juvenile court retains jurisdiction over the alleged victim, does the facility head or designee also report the allegation to the juvenile's attorney or other legal representative of record within 14 days of receiving the allegation?	yes
115.361 (f)	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
115.362 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.363 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
	Does the head of the facility that received the allegation also notify the appropriate investigative agency?	yes
115.363 (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

115.363 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.363 (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
115.364 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.364 (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
115.365 (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

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

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

115.367 (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
115.368 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect a resident who is alleged to have suffered sexual abuse subject to the requirements of § 115.342?	yes
115.371 (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 does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	yes
115.371 (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 involving juvenile victims as required by 115.334?	yes
115.371 (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
115.371 (d)	Criminal and administrative agency investigations	
	Does the agency always refrain from terminating an investigation solely because the source of the allegation recants the allegation?	yes

115.371 (e)	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
115.371 (f)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.371 (g)	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
115.371 (h)	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
115.371 (i)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.371 (j)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.371(g) and (h) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention?	yes
115.371 (k)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes

115.371 (m)	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 115.321(a).)	yes
115.372 (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
115.373 (a)	Reporting to residents	
	Following an investigation into a resident's allegation of sexual abuse suffered in the facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.373 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

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

115.376 (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
115.376 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.376 (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
115.376 (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
115.377 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.377 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes

115.378 (a)	Interventions and disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, may residents be subject to disciplinary sanctions only pursuant to a formal disciplinary process?	yes
115.378 (b)	Interventions and disciplinary sanctions for residents	
	Are disciplinary sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied daily large-muscle exercise?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied access to any legally required educational programming or special education services?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident receives daily visits from a medical or mental health care clinician?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the resident also have access to other programs and work opportunities to the extent possible?	yes
115.378 (c)	Interventions and disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.378 (d)	Interventions and disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to offer the offending resident participation in such interventions?	yes
	If the agency requires participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, does it always refrain from requiring such participation as a condition to accessing general programming or education?	yes

115.378 (e)	Interventions and disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.378 (f)	Interventions and disciplinary sanctions for residents	
	For the purpose of disciplinary action, does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.378 (g)	Interventions and disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.381 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes
115.381 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening?	yes
115.381 (c)	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
115.381 (d)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18?	yes

115.382 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.382 (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 staff first responders take preliminary steps to protect the victim pursuant to § 115.362?	yes
	Do staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.382 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.382 (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
115.383 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.383 (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
115.383 (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

115.383 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	yes
115.383 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.383(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.)	yes
115.383 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.383 (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
115.383 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.386 (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
115.386 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes

115.386 (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
115.386 (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 §§ 115.386(d) (1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.386 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.387 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.387 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes

115.387 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.387 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.387 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	na
115.387 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.388 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.388 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes

115.388 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.388 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.389 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.387 are securely retained?	yes
115.389 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.389 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.389 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

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