

# PREA Facility Audit Report: Final

**Name of Facility:** South Dakota State Penitentiary

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 10/03/2022

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"/>
<b>Auditor Full Name as Signed:</b> Brad R. Harvey	<b>Date of Signature:</b> 10/03/2022

AUDITOR INFORMATION	
<b>Auditor name:</b>	Harvey, Brad
<b>Email:</b>	brad.harvey@bakerso.com
<b>Start Date of On-Site Audit:</b>	06/07/2022
<b>End Date of On-Site Audit:</b>	06/09/2022

FACILITY INFORMATION	
<b>Facility name:</b>	South Dakota State Penitentiary
<b>Facility physical address:</b>	1600 North Dr, Sioux Falls, South Dakota - 57104
<b>Facility mailing address:</b>	PO Box 5911, Sioux Falls, South Dakota - 57117

Primary Contact	
<b>Name:</b>	Brittney Lengkeek
<b>Email Address:</b>	brittney.lengkeek@state.sd.us
<b>Telephone Number:</b>	605-323-9035

Warden/Jail Administrator/Sheriff/Director	
<b>Name:</b>	Dan Sullivan
<b>Email Address:</b>	dan.sullivan@state.sd.us
<b>Telephone Number:</b>	605-367-5050

Facility PREA Compliance Manager	
<b>Name:</b>	Troy Ellis
<b>Email Address:</b>	troy.ellis@state.sd.us
<b>Telephone Number:</b>	O: 605-367-5231
<b>Name:</b>	Tim Schneider
<b>Email Address:</b>	tim.schneider@state.sd.us
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Facility Health Service Administrator On-site	
<b>Name:</b>	Melissa Johnson
<b>Email Address:</b>	melissa.johnson@state.sd.us
<b>Telephone Number:</b>	605-280-2816

Facility Characteristics	
<b>Designed facility capacity:</b>	2088
<b>Current population of facility:</b>	1451
<b>Average daily population for the past 12 months:</b>	1421
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Males
<b>Age range of population:</b>	18-93
<b>Facility security levels/inmate custody levels:</b>	MN, LM, HM, MX
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	448
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	521
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	607

AGENCY INFORMATION	
<b>Name of agency:</b>	South Dakota Department of Corrections
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	3200 East Highway 34, c/o 500 East Capitol Avenue, Pierre, South Dakota - 57501
<b>Mailing Address:</b>	
<b>Telephone number:</b>	6057736636

Agency Chief Executive Officer Information:	
<b>Name:</b>	Doug Clark
<b>Email Address:</b>	doug.clark@state.sd.us
<b>Telephone Number:</b>	605-773-6636

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Brittney Lengkeek	<b>Email Address:</b>	brittney.lengkeek@state.sd.us

SUMMARY OF AUDIT FINDINGS	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>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.</p>	
<b>Number of standards exceeded:</b>	
2	<ul style="list-style-type: none"> <li>• 115.54 - Third-party reporting</li> <li>• 115.65 - Coordinated response</li> </ul>
<b>Number of standards met:</b>	
43	
<b>Number of standards not met:</b>	
0	

# POST-AUDIT REPORTING INFORMATION

## GENERAL AUDIT INFORMATION

### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-06-07
2. End date of the onsite portion of the audit:	2022-06-09

### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Just Detention International was contacted prior to the onsite phase of the audit and advised they had received no complaints against the facility.

## AUDITED FACILITY INFORMATION

14. Designated facility capacity:	2088
15. Average daily population for the past 12 months:	1421
16. Number of inmate/resident/detainee housing units:	8
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

### Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

#### Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1267
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	69
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	9
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	1

41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	22
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	75
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	25
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	16
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	25
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No juvenile inmates were interviewed due to the facility only housing adult male inmates.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	448
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	521
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	607
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	The facility advised during the post onsite phase of the audit that the number of staff, volunteers, and contractors provided by the facility include the total number of active staff and those who have resigned from employment, ceased visiting, or have no further need to access the facility.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	22
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Inmates were randomly selected from facility rosters from each of the housing units.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	29
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1

<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Random inmates were chosen and all were able to speak English fluently with the audit team unassisted. Random inmates were interviewed during the facility tour and no LEP inmates were identified during this walk through.</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>9</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>5</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>8</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>2</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Interviews with staff who work in the confinement unit advised that no inmates were placed into confinement for being found at risk of sexual victimization.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<p><b>Staff, Volunteer, and Contractor Interviews</b></p>	
<p><b>Random Staff Interviews</b></p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>18</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>Random sampling of staff were taken from the staff rosters provided by the facility. Staff were chosen from all shifts and each of the housing units.</p>
<p><b>Specialized Staff, Volunteers, and Contractor Interviews</b></p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>31</p>



<p><b>76. Were you able to interview the Agency Head?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>78. Were you able to interview the PREA Coordinator?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>79. Were you able to interview the PREA Compliance Manager?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

<p><b>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</b></p>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Agency contract administrator</li> <li><input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</li> <li><input type="checkbox"/> Line staff who supervise youthful inmates (if applicable)</li> <li><input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable)</li> <li><input checked="" type="checkbox"/> Medical staff</li> <li><input checked="" type="checkbox"/> Mental health staff</li> <li><input checked="" type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches</li> <li><input checked="" type="checkbox"/> Administrative (human resources) staff</li> <li><input checked="" type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</li> <li><input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations</li> <li><input checked="" type="checkbox"/> Investigative staff responsible for conducting criminal investigations</li> <li><input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness</li> <li><input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation</li> <li><input checked="" type="checkbox"/> Staff on the sexual abuse incident review team</li> <li><input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation</li> <li><input checked="" type="checkbox"/> First responders, both security and non-security staff</li> <li><input checked="" type="checkbox"/> Intake staff</li> <li><input type="checkbox"/> Other</li> </ul>
<p><b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b></p>	<ul style="list-style-type: none"> <li><input checked="" type="radio"/> Yes</li> <li><input type="radio"/> No</li> </ul>
<p><b>a. Enter the total number of VOLUNTEERS who were interviewed:</b></p>	<p>1</p>

<p><b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b></p>	<p><input type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Mental health/counseling</p> <p><input checked="" type="checkbox"/> Religious</p> <p><input type="checkbox"/> Other</p>
<p><b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>a. Enter the total number of CONTRACTORS who were interviewed:</b></p>	<p>2</p>
<p><b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b></p>	<p><input type="checkbox"/> Security/detention</p> <p><input checked="" type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Food service</p> <p><input checked="" type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p>
<p><b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b></p>	<p>No text provided.</p>

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

<p><b>84. Did you have access to all areas of the facility?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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### Was the site review an active, inquiring process that included the following:

<p><b>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	Informal interviews were conducted with both random staff and inmates. Phones were tested during the facility tour. Mail room was observed during the tour and mail room staff were interviewed in reference to incoming and outgoing privileged mail procedures.

### Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	The audit team randomly selected investigative files from sexual abuse and sexual harassment complaints, staff training files, staff background checks, completed inmate screening forms, and inmate training documentation.

## SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

### Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual abuse</b>	9	0	9	0
<b>Staff-on-inmate sexual abuse</b>	6	0	6	0
<b>Total</b>	15	0	15	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual harassment</b>	21	0	21	0
<b>Staff-on-inmate sexual harassment</b>	32	0	32	0
<b>Total</b>	53	0	53	0

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for "convicted.") Do not double count. Additionally, for question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

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

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	1	7	1
Staff-on-inmate sexual abuse	0	1	4	1
<b>Total</b>	0	2	11	2

**Sexual Harassment Investigation Outcomes**

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

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

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

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	16	5
Staff-on-inmate sexual harassment	3	2	21	6
<b>Total</b>	0	2	37	11

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	15
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)

**Inmate-on-inmate sexual abuse investigation files**

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	9
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101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>Staff-on-inmate sexual abuse investigation files</b>	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	6
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	52
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
<b>Inmate-on-inmate sexual harassment investigation files</b>	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	21

<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p><b>Staff-on-inmate sexual harassment investigation files</b></p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>31</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>No text provided.</p>
<p><b>SUPPORT STAFF INFORMATION</b></p>	
<p><b>DOJ-certified PREA Auditors Support Staff</b></p>	
<p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:</p>	<p>1</p>
<p><b>Non-certified Support Staff</b></p>	



<p>116. Did you receive assistance from any <b>NON-CERTIFIED SUPPORT STAFF</b> at any point during this audit? <b>REMEMBER:</b> the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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## AUDITING ARRANGEMENTS AND COMPENSATION

<p>121. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
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<p>Identify the name of the third-party auditing entity</p>	<p>Nakamoto Group</p>
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**Standards****Auditor Overall Determination Definitions**

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

**Auditor Discussion Instructions**

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

115.11	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> <li>1) Pre-Audit Questionnaire</li> <li>2) South Dakota Department of Corrections Policy and Procedure 1.3.E.5 Prison Rape Elimination Act</li> <li>3) South Dakota Department of Corrections Policy and Procedure 1.1.C.1 Code of Ethics</li> <li>4) South Dakota Department of Corrections Organizational Chart</li> <li>5) South Dakota Department of Corrections "An Inmate's Guide - Sexual Abuse &amp; Sexual Harassment Awareness" Information Leaflet</li> </ol> <p>Interview Protocols Utilized:</p> <ol style="list-style-type: none"> <li>1) PREA Coordinator</li> <li>2) PREA Compliance Manager</li> </ol> <p>115.11</p> <p>The South Dakota State Penitentiary (SDSP) is governed by the policies and procedures of the South Dakota Department of Corrections (SDDOC). All relative policies were reviewed during the audit process.</p> <p>115.11(a)</p> <p>SDDCO Policy 1.3.E.5 Prison Rape Elimination Act states on page 5, "IV. Procedures, 1. Approach: The Department of Corrections (DOC) has zero tolerance for sexual abuse or sexual harassment. Staff at each facility housing inmates shall promptly investigate all reported allegations of sexual abuse or sexual harassment..."</p> <p>The policy outlines the facility's approach for the prevention, inmate screening, inmate education, staff training, victim advocate/rape crisis access, transgender/gender dysphoria/Intersex, inmates, reporting, investigations, response, and recording of incidents.</p> <p>115.11(b)</p> <p>The agency has an agency wide PREA Coordinator who is a part of the SDDOC upper management. The facility is fortunate to have the Coordinator station located at their location. This allows the staff the unique opportunity to gain valuable firsthand knowledge of the agency's position on the PREA.</p> <p>An interview was conducted with the PREA Coordinator and she advised that she felt she had ample time to develop, implement, oversee, and review components of the PREA standards implemented by the agency.</p> <p>115.11(c)</p> <p>There are two PREA Compliance Managers at the facility. Their PREA duties is a collateral duty to their designated positions as Unit Managers. The PAQ stated that facility unit managers serve as PREA Compliance Managers (PCM) as a collateral duty. The duties of the PCM fall under the direct supervision of the PREA Coordinator. One of the PCM was interviewed and indicated that they do not feel that they have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.</p> <p>A conversation with the PREA Coordinator revealed that there are internal staffing shortages which has created the changes being made in order to fill positions to help alleviate some of the work burden placed on the PREA Compliance Managers.</p>	

The Auditor conducted an internet search of SDSP during the pre-onsite phase and found several articles about the SDSP staffing crisis due to salaries and the low retention rate of staff. The article spoke of staffing levels being low during the year leading to showers being canceled in parts of the facility in April 2022.

It was determined that the presence of the PREA Coordinator at the facility has allowed the facility to fulfill the standard responsibilities regarding the duties the PCMs.

Recommendations:>

- The organizational chart does not show the PCMs delineated. The audit team was able to determine that PCM duties are collateral two unit managers. It is the recommendation the facility change the organization chart to show the PCMs.
- Fill the vacancies to alleviate the issue of PCMs not having enough time to accomplish the duties of the position.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.11.

115.12	<b>Contracting with other entities for the confinement of inmates</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Documentation Reviewed:</p> <ol style="list-style-type: none"> <li>1) Facility Pre-Audit Questionnaire (PAQ)</li> <li>2) Signed SDDOC Contract with Cornerstone Work Release</li> <li>3) Signed SDDOC Contract with North Dakota Department of Corrections and Rehabilitation</li> <li>4) Signed SDDOC Contract with St. Francis House</li> <li>5) Signed SDDOC Contract with Sequel Falls Academy</li> </ol> <p>Interview Protocols Utilized:</p> <ol style="list-style-type: none"> <li>1) Agency's Contract Administrator or Designee</li> </ol> <p>115.12(a)</p> <p>The SDDOC has four contracts in place for housing inmates at the Cornerstone Work Release (a female facility), North Dakota Department of Corrections and Rehabilitation (juvenile facility), St. Francis House (halfway house for inmates), and Sequel Falls Academy (Department of Corrections paroled juvenile offenders). A review of each contract revealed the verbiage obligating the facilities to comply with the PREA standards.</p> <p>115.12(b)</p> <p>Review of the contracts provided show language that each contracted facility will provide access to the agency in order to determine compliance with the PREA standards. Contracts include the following language: "The Contractor will provide the State access to the facility, staff and offenders for the purposes of monitoring compliance with all PREA requirements and will cooperate fully with all monitoring activities, including providing data on PREA related incidences and the results of investigations. Failure to comply with PREA and applicable standards may result in termination of the contract."</p> <p>An interview was conducted with the Agency Contract Administrator revealed that all contracts are mandated to include applicable PREA guidelines. The PREA Coordinator then works with the contracted agency in order to conduct PREA related training for all staff. In addition, training is provided to facility investigators on how to conduct a PREA investigation. The Contract Administrator advised that all contract facilities were found to be in compliance with all contract requirements for the past twelve months.</p> <p>Staff Interviews and review of documentation provided; the facility meets all components associated with §115.12.</p>

<b>115.13</b>	<b>Supervision and monitoring</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>Area Reviewed During Tour:</p> <ol style="list-style-type: none"> <li>1) Full facility</li> </ol> <p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) Facility Pre-Audit Questionnaire (PAQ)</li> <li>2) SDDOC Policy 1.3.E.5 Prison Rape Elimination Act</li> <li>3) SDDOC Policy 1.1.C.2 Staff Supervision of Offenders</li> <li>4) Screenshots of facility layout to include camera placement</li> <li>5) SDDOC Staffing Plan</li> <li>6) Facility sampling of documentation of variances of staffing plan</li> <li>7) Facility sampling of intermediate or higher-level facility staff rounds</li> </ol> <p>Interview Protocols Utilized:</p> <ol style="list-style-type: none"> <li>1) Warden or designee</li> <li>2) PREA Coordinator</li> <li>3) PREA Compliance Manager</li> <li>4) Intermediate or Higher-Level Facility Staff</li> </ol> <p>115.13(a)</p> <p>SDDOC policy 1.3.E.5 Prison Rape Elimination Act was reviewed and addresses the requirement of this standard. The policy requires the facility to have a staffing plan and each Warden will make its best effort to utilize a staffing plan that provides adequate levels of staffing, where applicable. The policy also requires that appropriately placed video monitoring equipment be used to aid in supervision of inmates and help protect against sexual abuse.</p> <p>In calculating adequate staffing levels and video monitoring needs, the facility considers generally accepted best correctional practices, judicial findings of inadequacy, findings of inadequacy from federal investigative agencies, findings of inadequacies from internal or external oversight bodies, all components of the facility's physical make up including "blind-spots", the composition of the inmate population, the number and placement of staff (all shifts), staff to inmate ratio for each shift, and the prevalence and location of substantiated or unsubstantiated incidents of sexual abuse."</p> <p>The current staffing plan was developed using the maximum capacity of 2,088 inmates. The average daily population for the past twelve months was 1,421 inmates.</p> <p>During the tour and observation of area activities, revealed that the staffing plan is adequate for the proper supervision to detect, prevent, and provide a secure environment for the inmates. It was also determined that the facility is facing staff shortages that may negatively affect the facility operations.</p> <p>Interviews with the Warden and PREA Compliance Manager, and Human Resource staff verified the information for this standard. The PCM advised a staffing plan meetings are held various departments to determine any need for additional staff and/or additional video monitoring. The meeting minutes are forwarded to the Associate Warden and Warden for review.</p> <p>115.13(b)</p>	

The facility reported no deviations to the staffing plan were made in the past twelve months.

115.13(c)

An interview with the PREA Coordinator revealed that she is consulted for any assessments or and adjustments to the staffing plan in the last 12 months. She also advised that the staffing plan is developed in January of every year and is conducted in January every year with the approval taking place in February. This is secondary review of the plan every June. The Auditor was able to review the staffing plan during the audit process. In addition, the PREA Coordinator is always consulted on any adjustments to video monitoring systems and is an advocate to fight for the resources need to adhere to the staffing plan.

115.13(d)

Agency policy 1.1.C.2 Staff Supervision of Offenders was reviewed and addresses the requirements of this standard. Auditors found on page 6, "9. Supervision of Inmates in a DOC Facility: A. Supervisors will conduct and document unannounced rounds during all shifts to identify and deter sexual abuse of inmates. 1. Supervisors will not alert staff in advance of the supervisory rounds unless such announcement is related to the legitimate operation of the facility."

The facility provided numerous logs verifying that supervisory rounds are made at various times of the day and night for both weekdays and weekends.

Interviews verified that rounds are documented electronically and placed in the shift report and staff acknowledge that they are not surprised to see supervisors making rounds because they are always making rounds.

During the tour of the facility, the audit team observed numerous cameras in each of the areas toured along with adequate levels of supervisory staff present throughout.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.13.

<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents Reviewed:</p> <p>1) Facility Pre-Audit Questionnaire (PAQ)</p> <p>Interview Conducted:</p> <p>1) PREA Coordinator</p> <p>Based on information provided and confirmed during an interview with the PREA Coordinator, the facility does not house juvenile offenders.</p> <p>Staff Interviews and review of documentation provided; the facility meets all components associated with §115.14.</p>



115.15	<b>Limits to cross-gender viewing and searches</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>Area Reviewed During Tour:</p> <ol style="list-style-type: none"> <li>1) Shower Rooms</li> <li>2) Control Rooms</li> <li>3) Special Management Areas</li> <li>4) Inside Recreation Area</li> </ol> <p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) Facility Pre-Audit Questionnaire (PAQ)</li> <li>2) SDDOC Policy 1.3.A.5 Searches - Institutions</li> <li>3) SDDOC Policy 1.1.C.2 Staff Supervision of Offenders</li> <li>4) Staff Acknowledgement of Understanding form</li> <li>5) Lesson Plan for PREA Pre-Service</li> <li>6) PRC PowerPoint of Guidance on Cross-Gender and Transgender Pat Searches</li> <li>7) Pre-Service PREA PowerPoint</li> <li>8) 2022 Staff Training Roster</li> <li>9) 2021 Staff Training Roster</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Non-medical Staff Involved in Cross-Gender Searches</li> <li>2) Random Inmate</li> <li>3) Random Staff</li> <li>4) Transgender or Intersex Inmate</li> </ol> <p>115.15(a)</p> <p>Agency policy 1.3.A.5 Searches was reviewed and addresses the requirement of this standard. Policy states on page 6, "3. Strip Search Procedures, C.1. Strip searches will be conducted by staff who are the same sex as the inmate being searched except in exigent circumstances." The policy also outlines that opposite sex staff strip searches of an inmate; or occasional, inadvertent, incidental viewing of an unclothed inmate's breasts (female) buttocks, or genitals by a staff member of the opposite sex (including control room staff monitoring security cameras), must be documented on an Informational Report..."</p> <p>The facility reports no cross-gender strip or visual body cavity searches have been conducted in the past twelve months.</p> <p>An interview was conducted with a security staff member utilizing the Non-Medical Staff Involved in Cross-Gender Strip or Visual Searches revealed that cross-gender strip searches or visual body cavity searches would only be conducted in an emergency situation when it needs to happen without delay to restore order and preserve safety to staff, inmates, and others present. The staff member acknowledged cavity searches must be conducted off site by a health care professional and authorized by the Warden or designee.</p>	

115.15(b)

SDDOC Policy 1.3.A.5 Searches states that hand pat searches of inmates shall be conducted in accordance with the inmate's identified gender, except in exigent circumstances. Cross-gender pat searches that are inconsistent with an inmate's identified gender will be documented on an Informational Report. Documentation will include at a minimum the following information: the staff member conducting the search, the name of the inmate and reason for the exception. The report shall be forwarded immediately to the Warden and/or designee. C. An inmate's access to required programming, work, vocational training, medical appointments or attorney visits will not be restricted by the availability of same-gender staff to conduct a hand pat search."

The facility does not house female inmates. This provision is non-applicable to this facility.

115.15(c)

Agency policy outlines that strip searches will be conducted by staff who are the same sex as the inmate being searched except in exigent circumstances. Opposite sex staff strip searches of an inmate; or occasional, inadvertent, incidental viewing of an unclothed inmate's breasts (female) buttocks, or genitals by a staff member of the opposite sex (including control room staff monitoring security cameras), must be documented on an Informational Report..."

The facility only houses male inmates. This provision is non-applicable to this facility.

115.15(d)

The facility policy outlines that offenders do not have a right to complete privacy; however, it is a responsibility of each staff member to balance privacy interests with the staff member's responsibility and duty to properly perform their job. Preservation of safety and security shall remain the priority. The policy further indicates that security video monitoring cameras focused on individual housing cells/bunks or living areas where inmates are likely to be undressing or toileting, such as shower areas, bathrooms or designated rooms where strip searches occur, must be monitored by staff of the same sex as the inmate being viewed. In barracks type housing, opposite sex staff monitoring of cameras focused on common areas that include inmate bunks is permissible, provided inmates are given the opportunity or instructed to change clothing or disrobe in designated areas not directly monitored by security cameras. Opposite sex staff camera monitoring of an inmate in a specific housing cell on safety/suicide watch is permissible, provided the inmate has an approved means to avoid exposing himself or herself to opposite sex staff while showering, using the toilet or dressing. This may include a privacy curtain or substituting same sex staff monitoring of the inmate at designated and announced times.

There are procedures in place that requires the announcement of staff member of the opposite gender entering the unit.

When the status quo of the gender supervision of the housing unit changes from same gender to opposite gender, staff are required to verbally announce the change. Staff will also verbally announce when a opposite gender visitor or contractor enters the housing unit."

Interviews were conducted with both staff and inmates regarding this standard during the onsite phase of the audit with both random staff and inmates. Staff advised they generally feel that inmates are able to dress, shower, and use the toilet without being viewed by staff of the opposite gender. Inmates echoed the statements made by staff. Inmate interviews revealed that most inmates felt that they were never naked in full view of female staff members.

During this tour, several areas of concern regarding cross-gender viewing were detected. Cameras observed in several control rooms showed single cell views in the special management unit (SMU) to include toilet area where both male and female staff are assigned. Cameras were found inside shower rooms and in the changing area just outside of the shower rooms.

Interviews with the IT staff and upper level management advised only members of investigative staff as well as lieutenants or higher are allowed to view shower rooms. The facility has female staff in those roles and can view the inmates. Toilet facilities in the indoor recreation area were found to have no door obscuring the line of sight by opposite gender staff in the area. A communal urinal in the recreation area also allows opposite sex viewing of inmates. During the tour of the facility it was noted the audit team did not hear opposite gender viewing announcements when female was entering the units.

115.15(e)

On page 13 of policy states, "9. Transgender and Intersex Searches: A. Staff will not search or physically examine transgender or intersex inmates for the sole purpose of determining the inmate's genital status. If an inmate's genital status is unknown, this may be determined during conversations with the inmate, a review of the inmate's medical records, or as part

of a broader medical examination conducted by Health Service staff."

The facility reported no such searches have been conducted in the previous twelve month period.

Interviews with staff revealed that the majority of staff were aware of a policy that prohibited staff from searching transgender inmates for the sole purpose of determining the inmate's genital status. Of the few staff that were unaware the agency policy, each stated that they were not sure of a policy but it "just makes sense to not do that." Interviews of numerous transgender inmates were conducted utilizing the Transgender and Intersex Inmate protocol. Each advised that they had not been placed in a targeted housing unit, instead were each housed in a general population unit. Each inmate advised that they do not believe that they have not been strip searched for the sole purpose of determining their genital status.

115.15(f)

PowerPoint presentations created by the agency as well as the PREA Resource Center were uploaded to the OAS as proof of training for staff in reference to cross-gender searches and searches of transgender and intersex inmates. A computerized tracking log of all facility staff who have attended the training was attached. PowerPoints are complete and comprehensive in how to conduct proper searches and how to communicate professionally and effectively with transgender and intersex inmates.

Interviews with staff revealed that all staff received training on how to conduct cross-gender pat searches and searches of transgender and intersex inmates. Each of the staff members interviewed advised that they have received the training within the 2022 calendar year which was verified through the review of documentation.

Corrective Action Required:

115.15(d)

The facility must provide those inmates housed in the SMU cells the opportunity to use the toilet with a level of privacy. The facility has to change camera view, providing a shower curtain to obscure the toilet area when in use, or use of video technology to digitally obscure the area of the toilet. The facility shall provide to the Auditor photos of the camera view from the control rooms how the toilet area is obscured for inmate privacy within 60 days of this report.

The facility shall review the matrix of staff access for shower room cameras and limit those to only trained internal and external investigators, and senior facility and agency administrators who are responsible for conducting investigations or incident reviews. The facility shall provide a list of the staff who are approved for shower room camera access to the Auditor within 60 days of this report.

The facility must provide inmates a level of privacy from cross-gender viewing in communal toilet in the recreation areas. Photos of the obscured doorways leading into the indoor recreation room toilet areas shall be provided to the Auditor within 60 days of this report.

Corrective Action Completed:

The facility provided to the audit team screenshots of the confinement cells with obscuring technology in place to digitize the toilet area allowing inmates to toilet without being viewed.

The facility provided to the audit team National Institute of Corrections training certificates for all staff who have a need to view camera footage to begin investigations in areas where cameras are placed in shower rooms. All cross-gender viewing staff in the group outlined by the facility as those who have a need to view cameras have been trained as facility investigators pursuant to 115.34.

The facility provided to the audit team pictures of manufactured swing doors placed in the inside recreation room bathrooms to obscure the line of site that was noted in the audit report.

Based off of these corrective measures taken by the facility during the correction action phase, the facility is compliant with 115.15.

115.16	Inmates with disabilities and inmates who are limited English proficient
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Areas Reviewed During Facility Tour:</p> <ol style="list-style-type: none"> <li>1) Common Areas</li> <li>2) Housing Units</li> <li>3) Pheasantland Industries Braille Shop</li> </ol> <p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</li> <li>2) SDDOC Policy 1.1.E.7 Americans with Disabilities Act</li> <li>3) Language Line Services Agreement with South Dakota Department of Corrections</li> <li>4) Global Tel Link Agreement with South Dakota Department of Corrections</li> <li>5) SDDOC Americans with Disabilities Act Lesson Plan for Pre-Service Training</li> <li>6) Americans with Disabilities Act PowerPoint</li> <li>7) SDDOC "An Inmate's Guide – Sexual Abuse and Sexual Harassment Awareness" Pamphlet in English and Spanish</li> <li>8) PREA Notice Posters in English and Spanish</li> <li>9) Division of Criminal Investigations Posters in English and Spanish</li> <li>10) Staff Sign In Rosters for Americans with Disabilities Act Training</li> <li>11) Facility Completed Pre-Audit Questionnaire (PAQ)</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Agency Head or designee</li> <li>2) Inmates with Disabilities or Who are Limited English Proficient</li> <li>3) Random Staff</li> </ol> <p>115.16(a)</p> <p>SDDOC policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards was reviewed and addresses the requirement of this standard. Page 11 of the policy, "4. Inmate Education: C. 3. All inmates housed at a DOC facility will be offered comprehensive PREA Education and must sign an Acknowledgement of Prevention of Sexual Abuse/Harassment Information form upon receipt/offer of the education. D. The facilities will offer accommodations to provide PREA education and information to inmates who are limited English proficient, deaf, visually impaired, intellectually disabled, limited reading skills or have another communication disability, consistent with the American's With Disabilities Act (ADA) (See DOC policy 1.1.E.7 Americans with Disabilities Act (ADA)).</p> <p>The agency has a contract with LanguageLine Solutions translation services for inmates who are limited English proficient (LEP) at all facilities. Notices of the facility zero tolerance policy along with notices of how to report incidents of sexual abuse and sexual harassment to the Division of Criminal Investigations were observed during the facility tour and found to be both in English and Spanish. Inmate educational brochures given to new intakes were also observed and found to be both in English and Spanish. The facility also manufacture Braille materials in the prison industry. These materials are available for inmates who were blind or had limited vision and required assistance,</p> <p>An interview was conducted with the Agency Head's designee advised that SDDOC has assigned the PREA Coordinator to</p>

also serve as the Americans with Disabilities Act Coordinator. As the ADA Coordinator for the agency, she works to implement communication and opportunities for inmates who are identified with disabilities or who are LEP. Interviews were conducted with inmates with disabilities or who are limited English proficient who indicated staff were able to communicate information about sexual abuse and sexual harassment to them in a manner that they were able to understand.

115.16(b)

SDDOC policy 1.1.E.7 Americans with Disabilities Act was reviewed and addresses the requirement of this standard. Staff are required to follow policy and make appropriate steps to ensure communications with inmates with a communication disability are as effective as communications with other inmates (See 28 CFR §35.160). B. All facilities must have appropriate auxiliary aids and services available to afford an inmate with a communication disability equal opportunity to participate in and enjoy the benefits of services, programs or activities offered to inmates without a communication disability (See 28 CFR §35.160). Such aids and services will help facilitate effective communication.”

The facility has access to reasonable steps to prevent, detect, and respond to sexual abuse and harassment to inmates with who are identified as LEP, deaf, and/or blind. The Auditor verified through training documents that staff are provided ADA training.

115.16(c)

The facility reports that at no time in the past twelve months has inmate interpreters, readers, or other types of inmate assistants been used and there was no extended delay in obtaining an effective interpreter could compromise the inmate's safety or the

No limited English proficient inmates were identified as a member of the targeted inmates to be interviewed during the onsite phase of the audit. Random staff interviews revealed that staff were not aware of a time that inmate interpreters or readers had ever been used at the facility.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.16.

115.17	<b>Hiring and promotion decisions</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.1.C.3 Screening of Staff, Volunteers, and Contractors for Prior Sexual Abuse</li> <li>2) Randomly Selected Personnel Files – Hired and Promoted within Past 12 Months</li> <li>3) Randomly Selected Personnel Files – Existing Employees</li> <li>4) Randomly Selected Personnel Files – Contract Staff and Volunteers</li> <li>5) Facility Completed Pre-Audit Questionnaire (PAQ)</li> <li>6) SDDOC Policy 1.1.C.1 Staff Code of Ethics</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Administrative (Human Resource) Staff</li> </ol> <p>115.17(a)</p> <p>SDDOC Policy 1.1.C.3 Screening of Staff, Volunteers, and Contractors for Prior Sexual Abuse was reviewed and found to address all the requirements of the standard. Page 2 of policy, “IV. Procedures: 1. Criminal Records Checks: B. Supervisors or BHR representatives assigned to review the results of a criminal records check/background check, shall identify any convictions that exist within an individual’s record for engaging or attempting to engage in sexual offenses facilitated by force, overt or implied threats of force, coercion, of if the victim did not consent or was unable to consent or refuse. The reviewer shall have proper training and authorization to possess, access, interpret and review such criminal records. All charges, arrests, or convictions involving any sexual misconduct shall be noted and report to the Warden or designee. 1. Sexual offenses shall include all offenses contained within SDCL §22-24B-1 and chapter 22-22 Sex Offenses.”</p> <p>A review of personnel files revealed that all files contained a National Crime Information Center (NCIC) investigation form check completed. In addition, a Background Check Waiver which is a self-reporting form for staff to complete. The form covered all items required by the standard. Located on this form are the numerated items of this provision.</p> <p>The Agency has procedures in place to prohibit the hiring, promotion, use of contractors who have contact with inmates who have engaged in or convicted in any sexual assault behavior that violates the standards.</p> <p>115.17(b)</p> <p>Page 3 of policy 1.1.C.3 states, “A. During the promotion process, a staff member being considered for a promotion may be asked if they have had any personal involvement in institutional sexual abuse, sexual abuse in the community or sexual misconduct. The Supervisor and BHR representatives will review the personnel file of the staff member being considered for promotion for any reports or information supporting sexual misconduct and may make inquiry regarding any allegations of sexual misconduct and shall completely investigate any reports or investigations of sexual misconduct involving that individual... D. The supervisor must take into consideration the results of sections A, B, and C above in making a promotional offer to any staff member with a demonstrated history of sexual misconduct. No promotional offer may be extended to any staff member with a history of sexual misconduct since initially hired, unless so approved by the Secretary of Corrections or designee.”</p> <p>The Agency has procedures in place to prohibit the hiring, promotion, use of contractors who have contact with inmates who have engaged in or convicted in any sexual harassment behavior that violates the standards.</p> <p>115.17(c)</p> <p>Policy requires a criminal records check on all employees. A criminal records background check shall be conducted by the</p>	

SDDOC and Bureau of Human Resources (BHR) utilizing the NCIC III for all potential new hires and existing staff, volunteers, and contractors with unsupervised contact with inmates who is assigned to a DOC facility or considered for providing services within a DOC facility. The background will be completed for each person every five (5) years, beginning in the year 2012 and continuing every five (5) years." The self-reporting Background Check Waiver form signed by staff authorizes SDDOC to obtain and review any criminal background, employment records, wage records, and any other background information deemed necessary.

HR staff reported that a complete background check is conducted to include NCIC check, reference checks, prior employment checks, and if their names or telephone numbers appear on any visitor or phone lists for the facility. In addition, contact is made with all previous employers to seek information of any sexual misconduct while employed. No personnel are hired if the information received violates the standard.

115.17(d)

A background investigation is completed for each person, assigned to work within an institution housing DOC offenders, full or part time, every five (5) years, beginning in the year 2012 and continuing every five (5) years. This includes individuals under contract, employees of another State agency and student interns." Randomly selected files of contract staff were reviewed and revealed a completed Background Check Authorization Form.

The facility reports that in the past 12 months, 10 contract staff criminal background checks were conducted and cleared to provides service to the inmate population.

115.17(e)

Policy outlines that a criminal records background check shall be conducted by the SDDOC and Bureau of Human Resources (BHR) utilizing the NCIC III for all potential new hires and existing staff, volunteers, and contractors with unsupervised contact with inmates who is assigned to a DOC facility or considered for providing services within a DOC facility. The background will be completed for each person every five years, beginning in the year 2012 and continuing every five years." Review of the randomly selected employee files revealed completed five year subsequent background checks utilizing the same self-reporting Background Check Waiver form.

The review of files verified that background records check are conducted on all employees and contractors every five years.

115.17(f)

The Background Check Waiver Form provided to the audit team has four (4) self-reporting questions: 1. Have you ever been arrested, convicted of a crime, imprisoned, placed on probation, received a suspended sentence or forfeited bail for any offense in criminal or military court? 2. Have you ever engaged in any sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution? 3. Have you ever 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, of if the victim did not consent or was unable to consent or refuse? 4. Have you ever been civilly or administratively adjudicated to have engaged in the activities described in the previous question? The form advised that "If yes for any answer below, please explain in detail on the reverse of this form. Please include all incidents that have taken place prior to your employment. Also include all incidents that have taken place during your employment up to your current position."

HR staff advised that the facility does ask all applicants and employees who may have contact with inmates about previous misconduct described in this standard in written applications for hiring and promotions. All new employees and internal promotions must complete the form.

There are sanctions for employees who do not to disclose any such previous misconduct. Any staff member who has been arrested or charged, or who has reasonable knowledge they will be arrested or charged with any felony or misdemeanor crime, must report this information to their supervisor the next business day. Violation of criminal law, either on or off duty by a staff member, may be a breach of the code of ethics.

115.17(g)

Review of the Background Check Waiver Form also revealed above the employee's signature "I affirm that this document contains no misrepresentations or falsifications, omissions, or concealment of material fact and the information given by me is true and complete to the best of my knowledge and belief. I am aware that statements made by me on this form are subject

to later investigation. I am further aware that if any investigation discloses such misrepresentation, falsification, omission or concealment of material fact, it may disqualify me from my position with the State of South Dakota.”

115.17(h)

The interview with HR staff revealed that the facility does provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee. HR staff advised that this information would need to be requested by the law enforcement or corrections agency in which the employee is applying to. With this request, HR staff would send this request on to the PREA Coordinator or a PREA Compliance Manager who will advise if there have been any incidents of sexual abuse or sexual harassment perpetrated by the employee.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.17.



<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) South Dakota State Penitentiary Screenshots</li> <li>2) Facility Staffing Plan</li> <li>3) Facility Pre-Audit Questionnaire (PAQ)</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Agency Head or designee</li> <li>2) Warden or designee</li> </ol> <p>115.18(a)</p> <p>The agency/facility reports they have not acquired any new facilities. They have acquired existing facilities and that they bring in various management staff in order to discuss changes and modifications that maybe needed to give the facility the ability to protect inmates from sexual abuse.</p> <p>The Warden advised that a recent modification had been made at the Jameson unit in 2021 which expanded the medical section. The discussion was added to part of the staffing plan review.</p> <p>115.18(b)</p> <p>The facility provided screenshots of the facility were uploaded in the OAS which shows camera placement throughout the facility. Cameras are widespread throughout the facility spanning all areas.</p> <p>During the interview with the Agency Head's designee, he advised that the agency uses monitoring technology to enhance the protection of inmates from sexual abuse by way of adding additional lights and identifying where cameras may be added. A staff member has been added on the agency level in order to review cameras for a constant state of review on their placement. The interview with the Warden revealed that the facility considered placement of cameras in broader areas for wider scope to be able to respond to more incidents when staff considers using technology to enhance inmate's protection from sexual abuse.</p> <p>Staff Interviews and review of documentation provided; the facility meets all components associated with §115.18.</p>

115.21	<b>Evidence protocol and forensic medical examinations</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) Sexual Incident Protocol and Reference Book for the South Dakota Department of Corrections</li> <li>2) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment</li> <li>3) SDDOC Policy 1.4.E.10 Medical Services Copayments</li> <li>4) SDDOC Contract with Avera Health</li> <li>5) Compass Center Memorandum of Understanding</li> <li>6) Department of Corrections, Department of Social Services and Department of Health Memorandum of Understanding</li> <li>7) Outside Investigator Compliance with PREA Standards</li> <li>8) Facility Completed Pre-Audit Questionnaire (PAQ)</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Random Staff</li> <li>2) SAFE/SANE Medical Staff</li> <li>3) PREA Compliance Manager (PCM)</li> <li>4) Inmates who Reported a Sexual Abuse</li> </ol> <p>115.21(a)</p> <p>Review of the facility PAQ revealed that the facility is responsible for conducting administrative sexual abuse investigations including those that are inmate-on-inmate abuse and staff sexual misconduct. The facility is not responsible for conducting criminal investigations into sexual abuse including inmate-on-inmate and staff misconduct. Criminal investigations are completed by the Division of Criminal Investigation (DCI). DCI is a division of the South Dakota state government. The agency Sexual Incident Protocol and Reference Book was reviewed by the audit team.</p> <p>Random staff members were interviewed during the onsite phase of the audit. Most of the facility staff that were interviewed advised that they were aware of and understood the protocol for obtaining usable physical evidence if an inmate alleges sexual abuse. Some staff were able to go into detail and explain the proper packaging of physical evidence should they have the need to do. Staff were also knowledgeable that facility SIU staff conduct sexual abuse investigations.</p> <p>115.21(b)</p> <p>The Sexual Incident Protocol and Reference Book provide to the audit team for review was found to have an notation to this provision on the bottom cover of the booklet. Page 1 of the booklet states, "Acknowledgement: This protocol is based upon "A National Protocol for Sexual Assault Medical Forensic Examinations – Adults/Adolescents, second edition" April 2013, the South Dakota Department of Corrections Policies: Compliance with the Prison Rape Elimination Act and Response and Investigation of Sexual Abuse/Harassment Final Audit PREA Standards, South Dakota Department of Corrections policy and the NIC PREA Investigators Training for Trainers lesson plan."</p> <p>115.21(c)</p> <p>The facility PAQ reports that the facility does offer all inmate who experience sexual abuse access to forensic medical examination. SDSP does not offer forensic medical examinations onsite, inmates must be transported to the local Avera Hospital for examinations conducted by Sexual Assault Forensic Examiners (SAFE) or Sexual Assault Nurse Examiners</p>	

(SANE). Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment states on page 4, 3. b. If the sexual abuse occurred within a time period that allows for the collection of physical evidence, including forensic evidence, staff will ensure the alleged abuser does not take any actions that could destroy physical evidence, including as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating. c. Staff first responding to the scene/incident shall remain in the presence of inmate(s) involved and instruct the inmate not to take any actions that could destroy potential physical evidence." Page 5 of the same policy states, "B. Medical Response, 1. Health Service response, b. Health Services staff will examine and provide for emergent medical needs of victims of sexual abuse.

Health Service staff will not collect forensic evidence from the inmate. Inmates will be transported to an appropriate outside medical provider to facilitate the collection of any forensic evidence (See DOH policy P G 04 Therapeutic Relationship, Forensic Information, and Disciplinary Actions). 2. When not contraindicated by the inmate's welfare, preservation and collection of forensic evidence shall be performed by a qualified medical provider. a. If staff determine the alleged sexual abuse occurred less than one hundred and twenty hours prior to staff becoming aware of the incident, and there is reason/evidence to suggest the alleged sexual activity was not consensual, staff will: 1) With consent from the victim, make arrangements to immediately transport the victim to the nearest hospital or emergency room equipped to administer a sexual assault forensic exam (rape kit), consistent with DOC policy 1.3.A.7 Inmate Transport and Escort... c. Sexual assault examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) when and where possible. If SAFEs or SANEs cannot be made available, the examination may be performed by other qualified medical practitioners. The DOC will document its efforts to identify and access SAFEs or SANEs within proximity to each DOC facility housing inmates. 3. Responsive services will be provided without financial cost (including medical co-payment) to the victim (See DOC policy 1.4.E.10 Medical Services Copayments..."

A Consultant Contract/Letter of Agreement was reviewed between the State of South Dakota and Avera Health by a member of the audit team. The facility PAQ states that three (3) forensic medical exams have been conducted in the past twelve (12) months by SAFE/SANE staff at the Avera Medical Center.

115.21(d)

S DSP provided to the audit team a signed memorandum of understanding (MOU) between the facility and The Compass Center. The MOU states that it is effective March 1, 2013, and shall remain in effect until superseded or terminated by written mutual agreement. Page 1 of the MOU states, "It is the intent of the DOC/SDP and its Partner to: Provide a way for the victim's advocates reporting sexual abuse or sexual harassment of a DOC offender to the DOC/SDP verbally, in writing or through complaint form, allowing the offender to remain anonymous upon request. Provide offenders with confidential access to a qualified outside victim advocate providing them with emotional support and assisting them with the response to sexual abuse. Provide universal access to all offenders, including those with special needs and who are limited English proficient." A secondary MOU was provided to the audit team by the facility between SDDOC, The Department of Social Services and The Department of Health to provide mental health services to the facility if needed.

Interviews were conducted during the onsite phase of the audit with the PCM and Inmates who Reported a Sexual Abuse in correlation to this standard. The PCM advised the audit team member that the facility provides access to a victim advocate to alleged victims of sexual abuse. This is made possible through a signed MOU with The Compass Center. Three (3) inmates who reported a sexual abuse to the facility were interviewed by the audit team. All three advised that they had not been offered a victim advocate or allowed to contact anyone in response to services. It should be noted that a review of the investigative files was conducted for the three (3) inmates interviewed. Of the three (3) files reviewed, two (2) were reports of sexual harassment by staff members and the third was a complaint of an improper pat search by a staff member which was later deemed by investigative staff to be a proper search.

A telephonic interview was conducted by a member of the audit team with a representative of The Compass Center. The representative advised the audit team member that a signed MOU was in place with Compass and the facility. The representative advised that she has had numerous conversations between she and the PREA Coordinator in reference to planning of training for staff members. The representative advised that she and the PREA Coordinator have an open line of communication.

115.21(e)

SDDOC policy 1.3.E.6 states on page 6, "C. Victims' Advocates, 2. As requested by a victim, the advocate, qualified DOC staff or qualified community-based organization staff member, may accompany and support the victim through the medical examination process, testing, and investigatory interviews to provide emotional support, crisis intervention, information, and referral to the inmate victim."

The PCM stated during his interview with audit team members that The Compass Center provides victim advocate services

and is the only registered rape crisis center in South Dakota.

115.21(f)

SDDOC policy states on page 8 that, "C. Administrative investigations, 1. The Special Investigations Unit will investigate all reports of sexual incident involving inmates to determine (See Attachment 2) the following: a. If a reported sexual incident was an act of sexual abuse or sexual harassment. b. If the reported sexual incident was consensual inmate-with-inmate. This is a violation of institutional rules but may not be a case of sexual abuse. c. If the reported sexual incident was non-consensual and inmate-with-inmate. This is a violation of institutional rules and may be a case of sexual abuse. These cases may be referred to DCI for investigation. d. If the reported incident involved a sexual act between staff or other person employed within a correctional facility and an inmate. All such cases are considered non-consensual and shall be referred to DCI for investigation and possible prosecution (See SDCL § 24-1-26-1)." The facility provided documentation by way of letters and emails sent to DCI staff requesting that the responsible agency follow the requirements set forth in the provisions.

115.21(g)

The audit is not required to audit this provision.

115.21(h)

This provision of the standard is found to be non-applicable based on documentation that inmates housed at the facility have twenty-four/seven access to victim advocate services provided by The Compass Center. This was verified by review of the signed MOU set forth between the facility and The Compass Center and through conversation with the representative at The Compass Center.

Staff interviews and review of documentation provided; the facility meets all components associated with §115.21.

115.22	Policies to ensure referrals of allegations for investigations
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documentation Reviewed:</p> <ol style="list-style-type: none"> <li>1) Facility Pre-Audit Questionnaire (PAQ)</li> <li>2) SDDOC Policy 1.3.E.6 PREA Response and Investigating Sexual Abuse and Harassment</li> <li>3) Agency Website</li> <li>4) Investigative Files</li> <li>5) Investigations Tracking Log</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Agency Head</li> <li>2) Investigative Staff</li> </ol> <p>115.22(a)</p> <p>SDDOC policy 1.3.E.6 PREA Response and Investigations of Sexual Abuse and Harassment was reviewed and addresses the requirement of this standard. Page 8 states, "IV. Procedures, 2. Investigations, C. 1. The Special Investigations Unit (SIU) will investigate all reports of sexual incidents involving inmates to determine the following: a. If a reported sexual incident was an act of sexual abuse or sexual harassment. b. If the reported sexual incident was consensual inmate-with-inmate. This is a violation of institutional rules but may not be a case of sexual abuse. c. If the reported sexual incident was non-consensual and inmate- with inmate. This is a violation of institutional rules and may be a case of sexual abuse. These cases may be referred to DCI for investigations. d. If the reported incident involved a sexual act between staff or other person employed within a correctional facility and an inmate. All such cases are considered non-consensual and shall be referred to DCI for investigation and possible prosecution."</p> <p>The facility reported eighty-three (83) incidents of sexual abuse and/or harassment in the previous twelve months on the PAQ and three were referred for criminal investigation. The facility provided the audit team with an incident spreadsheet during the onsite phase, a total of eighty-five (85) incidents were found on the spreadsheet. A review of the spreadsheet also revealed that the facility has a fifth disposition of cases known as "Completed". Interview with the PC revealed that this category is used when an incident is reported to the facility as a PREA allegation but found not to meet the criteria at the conclusion of the investigation. The auditors reviewed 31 active files and found them to be completed in accordance with the standard. Of the 85 allegations, below is the disposition:</p> <p>Substantiated - 13</p> <p>Unsubstantiated - 47</p> <p>Unfounded - 4</p> <p>Open - Pending 2</p> <p>Completed - 19</p> <p>The Agency Head designee indicated the agency has a zero tolerance policy for sexual abuse and sexual harassment. All reports are taken seriously when reported and investigated thoroughly. A PREA checklist is available to staff to utilize for reporting sexual abuse and harassment to ensure that each step is completed. All agency staff have a duty to report incidents of abuse and harassment. The designee also advised that SIU staff are located at all facilities and are trained to conduct investigations in a confinement settings. Each step is documented in their Comms system (jail management system) and sent to Division of Criminal Investigations, if warranted.</p> <p>115.22(b)</p>

The Special Investigations Unit will refer incidents involving possible criminal violations to DCI." The SDDOC website was reviewed and found to have the necessary language required posted prominently on the site. The website can be viewed by the public at <https://doc.sd.gov/about/PrisonRapeEliminationAct.aspx>.

An interview was conducted with a member of the SIU and he was aware of a policy that requires that allegations of sexual abuse or harassment be referred for investigation to an agency with legal authority to conduct criminal investigations. The staff member stated that if he finds that a criminal investigation should be conducted that he refers the investigation to the state police Division of Criminal Investigations (DCI).

115.22(c)

The agency utilizes the State Division of Criminal Investigations to investigate all criminal investigations. The agency website outlines that all allegations of sexual assault/harassment will be investigated: "In adult institutions, the Office of Special Security investigates each and every allegation of sexual abuse or harassment. They will collaborate with DCI to determine when the case will be turned over for further DCI investigation and/or referral for prosecution."

115.22(d)

Auditor is not required to audit this provision.

115.22(e)

Auditor is not required to audit this provision.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.22.

115.31	<b>Employee training</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
Documents Reviewed:	
<ol style="list-style-type: none"> <li>1) SDDOC Policy 1.1.D.1 Staff Training Requirements</li> <li>2) SDSP Training Department 2022 Annual Training Agenda</li> <li>3) Acknowledgement of Understanding PREA Staff Training Form – Sample</li> <li>4) Acknowledgement of Understanding PREA Staff Training Form – Completed for Random Staff Selected</li> <li>5) SDDOC PREA Pre-Service PowerPoint</li> <li>6) SDDOC Policy 1.1.C.1 Staff Code of Ethics</li> <li>7) PRC PowerPoint – Guidance in Cross-Gender and Transgender Pat Searches</li> <li>8) 2022 Staff Tracking Log of Annual In-Service Training</li> <li>9) 2021 Staff Tracking Log of Annual In-Service Training</li> <li>10) 2020 Staff Tracking Log of Annual In-Service Training</li> </ol>	
Interview Protocol Utilized:	
<ol style="list-style-type: none"> <li>1) Random Sample of Staff</li> </ol>	
115.31(a)	
<p>SDDOC policy 1.1.D.1 Staff Training Requirements was reviewed and addresses the requirement of this standard. Page 2, “3. Pre-Service Training Content: A. 9. a. The pre-service Prison Rape Elimination Act (PREA) training shall apply to all staff members that may have contact with inmates. The training shall include: 1) Zero-tolerance policy for sexual abuse and sexual harassment. 2) How to fulfill staff responsibilities under DOC sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures. 3) Inmate’s right to be free from sexual abuse and sexual harassment. 4) The right of inmates and staff members to be free from retaliation for reporting sexual abuse and sexual harassment. 5) The dynamics of sexual abuse and sexual harassment in a confinement/correctional setting. 6) The common reactions of sexual abuse and sexual harassment victims, 7) How to detect and respond to signs of threatened and actual sexual abuse. 8) How to avoid inappropriate relationships with inmates. 9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex or gender conforming inmates. 10) How to comply with relevant laws related to mandatory reporting of sexual abuse to law enforcement.”</p>	
<p>The audit team reviewed the PowerPoint utilized for staff PREA training. The PowerPoint included each of the ten (10) numerated items required by the standard. The PRC’s PowerPoint “Guidance in Cross-Gender and Transgender Pat Searches” is provided to train staff on cross-gender and transgender pat searches. Training files for randomly selected staff were reviewed and found to contain signed “Acknowledgement of Understanding PREA Staff Training” forms.</p>	
<p>Staff interviews verified that they each received PREA training during the 2022 calendar year. Staff were asked to describe items covered in their training in which they all indicated the following: the agency’s zero tolerance policy, staff responsibilities on how to prevent/detect/report sexual abuse and sexual harassment, an inmate’s right to be free from sexual abuse and harassment, and how to avoid inappropriate relationships with inmates.</p>	
115.31(b)	
<p>SDDOC policy 1.1.D.1 was reviewed in reference to this provision. Policy was found to state on page 2, “3. Pre-Service Training Content, A. 9. b. Such training shall be tailored to the gender of the inmates at each DOC facility. Staff members shall receive additional training if the staff member is reassigned from a male facility to a female facility and vice versa.”</p>	
<p>SDSP is a male facility that the training guides utilized are tailored to the facility. Training records were reviewed and found</p>	

that files contained a signoff sheet indicating that the staff member had completed the initial training along with the date the training was conducted. All newly hired staff attend Pre-Service training and sign an "Acknowledgment of Understanding PREA Staff Training" form.

115.31(c)

The facility provided staff training spreadsheets on attendance for calendar years: 2020, 2021, and 2022. The facility provides PREA training annually in their annual refresher course.

115.31(d)

The audit team was able to verify that staff sign "Acknowledgment of Understanding PREA Staff Training" forms in each of the files chosen for review.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.31.



<b>115.32</b>	<b>Volunteer and contractor training</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) PREA Pre-Service PowerPoint Training</li> <li>2) Random Sampling of Training Records for Volunteers and Contractors</li> <li>3) Acknowledgement of Understanding PREA Staff Training Form</li> <li>4) Staff and Volunteer Staff Training Tracking Spreadsheet</li> <li>5) Facility Completed Pre-Audit Questionnaire (PAQ)</li> <li>6) PREA Pocket Guide for Staff</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Volunteer(s) or Contractor(s) who have Contact with Inmates</li> </ol> <p>115.32(a)</p> <p>The facility provided a PREA Pre-Service PowerPoint presentation used to train staff and volunteers. The PowerPoint training document consist of 28-pages and covers the following areas: background information on the PREA standards, definitions, the agency zero tolerance policy, staff responsibilities, inmates rights, free from retaliation, dynamics of sexual abuse/harassment, identifying common reactions in victims of sexual abuse, detection and response to incidents, inappropriate relationships between inmates and staff, understanding the LGBTI community, and mandatory reporting requirements for all staff.</p> <p>The facility reported they trained 1,128 volunteers and contractors who may have contact with inmates on the agency's policies and procedures regarding sexual abuse and sexual harassment, prevention, detection, and response.</p> <p>The audit team reviewed spreadsheets that verified the dates in which volunteers and contractors attended annual training for PREA as well as signed acknowledgements by each volunteer and contractor chosen of their understanding of the training presented.</p> <p>Interviews were conducted with selected volunteers and contractors. They indicated they received training from the facility regarding their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response.</p> <p>115.32(b)</p> <p>The Pre-Service PowerPoint that was reviewed and found to have information regarding the agency zero tolerance policy along with reporting or any information of sexual abuse and sexual harassment to the officer-in-charge.</p> <p>Volunteers and contractors that were interviewed by the audit team members advised that their training was on the same level as that of security staff in which they were trained at the same time during annual in-service training as the security staff. Volunteers and contractors that were interviewed advised that training consisted of inappropriate relationships between staff and inmates and how to report an incident to security staff if an inmate reported sexual abuse to them. During interviews, volunteers and contractors presented their PREA Pocket Guide for Staff that was presented to them during their PREA education.</p> <p>115.32(c)</p> <p>The audit team was able to review selected volunteer and contractor training files that had an Acknowledgement of Understanding PREA Staff Training form which were signed and dated by the volunteer or contractor. The form states, "I hereby certify that I have attended the South Dakota Department of Corrections Pre-Service/In-Service training on the Prison Rape Elimination Act and the accompanying standards." and "I acknowledge that I have received the training listed above.</p>	

Furthermore, I have had an opportunity to ask any questions pertaining to the training and I understand the training provided.”

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.32.

<b>115.33</b>	<b>Inmate education</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
Areas Reviewed During Tour:	
<ol style="list-style-type: none"> <li>1) Entrance Area for Facility – Visitor and Staff Entrance</li> <li>2) Intake Area</li> <li>3) Common Areas of Facility</li> <li>4) Housing Units</li> </ol>	
Documents Reviewed:	
<ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</li> <li>2) SDDOC Policy 1.1.E.7 Americans with Disabilities Act</li> <li>3) SDDOC Institution Assessment Status Report – PREA Admissions Class Attendance Roster</li> <li>4) “An Inmate’s Guide – Sexual Abuse and Sexual Harassment Awareness” Brochure - English</li> <li>5) “An Inmate’s Guide – Sexual Abuse and Sexual Harassment Awareness” Brochure – Spanish</li> <li>6) Facility “No Means No” Posters</li> <li>7) PREA Inmate Resource Card</li> <li>8) “Break the Silence Posters” – English and Spanish</li> <li>9) Facility Entrance Signs</li> <li>10) Just Detention International PREA Education Video for Inmates</li> <li>11) Facility Completed Pre-Audit Questionnaire (PAQ)</li> </ol>	
Interview Protocol Utilized:	
<ol style="list-style-type: none"> <li>1) Intake Staff</li> <li>2) Inmate Interview</li> </ol>	
<p>115.33(a)</p> <p>SDDOC policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards was reviewed and addresses the requirement of this standard. Page 10, “4. Inmate Education: A. During the initial PREA risk screen, inmates will receive information explaining DOC’s zero-tolerance of sexual abuse and sexual harassment and how to report incidents of sexual abuse or sexual harassment. This information is also discussed in the Inmate Living Guide, which is available to all inmates in printed form and electronically.”</p> <p>The audit team was able to tour the intake area and found brochures that are provided to each inmate at time of intake. The brochure titled “An Inmate’s Guide – Sexual Abuse and Sexual Harassment Awareness” was observed in English and Spanish. The brochure contained information about the facility zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. Inmates are also provided the “PREA – Break the Silence!” pocket guide at time of intake which advises ways to report sexual abuse or sexual harassment should they occur.</p> <p>The facility reported admitting 3,119 inmates in the past year and each have received training at time of intake on zero-tolerance and how to report sexual abuse or sexual harassment. Review of selected inmate files were reviewed by the audit and found to contain signed and dated “Acknowledgement of Prevention of Sexual Abuse/Harassment Information” forms.</p>	

Interviews with the intake staff indicated that they provide all new inmates with information regarding the PREA and the information is available in English and Spanish. At time of intake, staff indicated they cover an educational form with each inmate reference to PREA related information and the inmate is required to sign the educational form. Intake staff advised that the initial education is completed within seventy-two (72) hours of an inmate's arrival, but normally completed within twenty-four hours. Interviews with inmates verified that they received information about the facility's rules against sexual abuse and sexual harassment during intake.

115.33(b)

Each inmate file reviewed contained the "Acknowledgement of Prevention of Sexual Abuse/Harassment Information" again utilized for the required thirty (30) day comprehensive education documentation. The form contains a "Part 2" section that includes the inmate's acknowledgement of receiving education on their rights to be free from sexual abuse/sexual harassment and to be free from retaliation for reporting which was signed and dated.

The form also has a section for inmates to sign that the "Inmate was offered education and refused participation. Inmate was given PREA brochure." The audit team was able to observe the Just Detention International PREA education video being shown as part of the comprehensive education during the facility tour.

Interviews with intake staff advised that inmates receive initial educational material during intake, but comprehensive education is provided during the inmate's reassessment by case managers. Comprehensive education provided through a video that is shown to all inmates during their reassessment for vulnerability or risk of sexual abusiveness. Inmate interviews verified they received education regarding their right to not be sexually abused or harassed; how to report sexual abuse or harassment; and their right to not be punished for reporting sexual abuse or harassment.

Majority of the inmates interviewed advised that they had received this information within their first month at the facility. Some inmates indicated that they did not receive PREA education upon arrival, it was determined that the inmates arrived at the facility before the enactment of the PREA. They have since received education on the PREA standards.

115.33(c)

Policy 1.3.E.5 states on page 10, "C. Inmates who have not been offered education and information explaining DOC's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment, will be offered education and information during the inmate's case planning and review with unit staff..."

The facility reported that inmates who did not receive PREA education within thirty days of their intake; all inmates have been educated forty days. The information is tracked and is provided to each of the housing Case Managers. Case Managers would then work to provide the required education to the inmate listed.

Intake staff indicated that all inmates receive basic PREA education by way of a brochure during intake to include inmates transferring from another facility.

115.33(d)

Policy 1.3.E.5 states on page 11, "D. The facilities will offer accommodations to provide PREA education and information to inmates who are limited English proficient, deaf, visually impaired, intellectually disabled, limited reading skills or have another communication disability, consistent with American's With Disabilities Act. (ADA)..."

The audit team was able to review inmate education and found that it was in English and Spanish. Comprehensive educational video was found in English and Spanish along with accompanying subtitles. Facility posting throughout the facility were observed during the onsite facility tour and found to be in both English and Spanish. The facility has an onsite Braille printing facility through Pheasantland Industries and is able to print educational material onsite for those who are blind. "An Inmate's Guide – Sexual Abuse and Sexual Harassment Awareness" brochure is provided to all inmates in a larger print and phrased with easy to understand language.

115.33(e)

Review of selected inmate files found signed documentation of inmate PREA educational opportunities provided to each inmate. Documentation is completed at time of initial education as well as the thirty day comprehensive education. A review of the sign-in rosters verify that inmates participated and completed the class.

115.33(f)

During the onsite tour of the facility, the audit team was able to view numerous postings throughout the facility to include: the entrance into the facility for staff and visitors, common areas inside of the secure area, intake area, housing units, medical areas, and the cafeterias. Information is also available on each of the inmate's tablets provide to the inmates at the facility. It should be noted that the facility has a prison industry, Pheasantland Industries, print shop onsite which makes majority of the signage posted at the facility. Pheasantland can provide quick turn-around of printed materials should the facility find a need for additional posting or if one is destroyed and needs replacement.

Staff and Inmate Interviews and review of documentation provided; the facility meets all components associated with §115.33.

115.34	<b>Specialized training: Investigations</b>
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Documents Reviewed:

- 1) Approved Online Training for PREA Investigators Website Walk-Thru for NIC PREA Learning Center
- 2) COMS Reportable Incident Procedures Training
- 3) PREA Compliance Manager Training / PREA Investigator Training Sign in Sheets
- 4) DOC Policy and PREA Investigations – How Policy Impacts Investigative Procedures
- 5) Training Records for Investigative Staff
- 6) Facility Completed Pre-Audit Questionnaire (PAQ)

Interview Protocol Utilized:

- 1) Investigative Staff

115.34(a)

The facility provided in-house and third-party investigative training for investigators. One of training syllabus reviewed was the National Institute of Corrections (NIC) "Investigating Sexual Abuse in a Confinement Setting" and "Investigating Sexual Abuse in a Confinement Setting - Advanced Investigations". Also included were SDDOC training lesson plans for "PREA Investigation Procedure Review" and "DOC Policy and PREA Investigations – How Policy Impacts Investigative Procedures".

A SIU investigator was interviewed and stated that they received training specific to conducting sexual abuse investigations in confinement setting via online training courses through the NIC prior to doing any investigations at the facility.

115.34(b)

Training lesson plans and the material reviewed by the audit team revealed that training materials that investigators are provided cover interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative or prosecution referral.

A SIU investigator described in his interview the type of material covered in his training included how to conduct interviews with alleged victims, report writing, proper use of Miranda and Garrity warnings, evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative or prosecution referrals.

115.34(c)

Training files for investigators assigned to conduct investigations of sexual abuse and sexual harassment were requested by the audit team during the onsite phase of the audit. The facility provided training certificates for several investigators assigned to SIU. The training file of the SIU member that was selected for interview was reviewed and found to have a certificate from NIC for "PREA: Investigating Sexual Abuse in a Confinement Setting". Various other investigative training certificates were present in the documentation provided. The facility reported having three trained investigators who have completed the required training pursuant to this standard.

115.34(d)

The auditor is not required to audit this provision.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.34.

115.35	Specialized training: Medical and mental health care
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</li> <li>2) Facility Completed Pre-Audit Questionnaire (PAQ)</li> <li>3) Staff Training Rosters for Medical and Mental Health Staff</li> <li>4) South Dakota Correctional Behavioral Health PREA Training PowerPoint</li> <li>5) PREA Training: Specialized Medical Care Training Acknowledgement Form</li> <li>6) PREA for Medical in the South Dakota State Prison System – Medical Specialized Training for the Department of Health Correctional Health Care</li> <li>7) Randomly Selected Training Files for Medical and Mental Health Staff</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Medical and Mental Health Staff</li> </ol>
	<p>115.35(a)</p> <p>SDDOC policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards was reviewed and addresses the requirement of this standard. Policy is found to state on page 11, “5. Staff Training: D. Health Service and Behavioral Health staff will be informed of: 1. How to detect and assess signs of sexual abuse and sexual harassment, 2. How to preserve physical evidence of sexual abuse, 3. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and 4. How and to whom to report allegations or suspicion of sexual abuse and sexual harassment.”</p> <p>The facility reported there are eighty-seven medical and mental health care practitioners who work regularly at the facility and received training required by policy.</p> <p>Interviews were conducted with members with both medical and mental health and acknowledged they had received proper training as outlined in this standard to include: 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 victims of sexual abuse and sexual harassment, and how and to whom to report allegations or suspicions of sexual abuse or sexual harassment.</p>
	<p>115.35(b)</p> <p>This provision of the standard is considered non-applicable. The facility medical staff do not conduct forensic examinations at the facility.</p>
	<p>115.35(c)</p> <p>The audit team reviewed selected for both medical and mental health staff and it was found signed forms for PREA Training: Specialized Medical Care Training forms. The form states “I hereby certify that I have had the training and understand the following PREA standards § 115.35 Specialized training: Medical and mental health care as described below: 1. How to detect and assess signs of sexual abuse and sexual harassment, 2. How to preserve physical evidence of sexual abuse, 3. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and 4. How and to whom to report allegations or suspicion of sexual abuse and sexual harassment.”</p>
	<p>115.35(d)</p>



The auditors were provided staff rosters that verify that both medical and mental health attended basic PREA training for staff as described in §115.31.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.35.

115.41	<b>Screening for risk of victimization and abusiveness</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDO Policy 1.4.B.16 PREA Institutional Risk Screens</li> <li>2) Sample Acknowledgement of Prevention of Sexual Abuse/Harassment Information</li> <li>3) Sample PREA Risk Screen</li> <li>4) Facility Completed Pre-Audit Questionnaire (PAQ)</li> <li>5) Randomly Selected Inmate Intake Files to Include Risk Assessments</li> </ol> <p>Mechanism Tested:</p> <ol style="list-style-type: none"> <li>1) Mock PREA Risk Screening Conducted</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Staff Responsible for Risk Screening</li> <li>2) Inmate Interview</li> </ol>	
<p>115.41(a)</p> <p>SDDOC policy 1.4.B.16 PREA Institutional Risk Screens was reviewed and addresses the requirement of this standard. Page 2 of the policy was found to state, "2. Initial PREA Risk Screen: A. All inmates admitted to a DOC facility will have an Initial PREA risk screen completed within 72 hours of intake or transfer to another facility." PREA Risk Screen is found to be defined in the policy as "An assessment (screen) based upon the Final Adult PREA National Standards. The goal of this screening is to aid in determination of an inmate's potential for sexually abusing others (aggressor) or being sexually abused by others (victim).</p> <p>Staff interviews revealed they conduct screenings of inmates upon admission to the facility and transfer from another facility for risk of both sexual abuse victimization and sexual abusiveness towards other inmates. Interviews with inmates revealed that the majority remembered being asked assessment questions at time of their intake at the facility. Of those that answered they were not asked risk assessment questions were admitted to the facility prior to the initiation of the risk assessment process per the PREA standards.</p>	
<p>115.41(b)</p> <p>Policy 1.4.B.16, "Page 2 states, "2. Initial PREA Risk Screen: A. All inmates admitted to a DOC facility will have an Initial PREA risk screen completed within 72 hours of intake or transfer to another facility." Review of completed initial risk assessments were conducted by the audit team utilizing computerized spreadsheets of randomly selected inmates Computerized Offender Management System. Printed spreadsheets revealed that each initial risk assessment was completed within seventy-two hours of the inmate's arrival at the facility.</p> <p>Risk assessment screening staff advised that initial risk assessments are completed on all new intakes within seventy-two hours of the inmate's arrival. The inmates interviewed advised that a risk assessment had been conducted within the first couple of days of their arrival at the facility.</p>	
<p>115.41(c)</p> <p>A sample of the facility PREA Risk Screening instrument was reviewed by the audit team found a single page instrument utilizing "Yes" and "No" questions based of the risk criteria listed in §115.41(d) and (e). A "Yes" answer to certain facility</p>	

identified provisions are mandatory indicators of either potential victimization or potential abusive behavior. A numbered scaling system is then assigned to the rest of the provisions listed with a certain amount of "Yes" answers will then be found at possible risk. The form is found to be objective in the fact that screening staff would be able to make the same final decision of a single inmate independently based off the answers provided by the inmate.

During the tour of the facility, the audit team was unable to observe an inmate being screened utilizing the screening instrument. A member of the audit team was walked through a mock assessment utilizing the instrument tool by a staff member in charge of performing risk screenings. The staff member was able to articulate the different steps that would be taken when an inmate answered "Yes" to certain questions indicated on the screening form.

#### 115.41(d)

A review of the objective screening tool utilized by the facility was reviewed and found to contain all of the numerated items listed in the standard.

During interviews, the risk screening staff were asked to list some of the considerations on the risk screening form to which staff identified: possible abusers include any violent background, any sexual offenses, any institutional violence, while possible victims include prior victimization of sexual abuse, inmate's stature, and age. Staff stated that the process for completing the risk assessment is to have an inmate background completed and given to the intake staff for the assessment to be completed along with a formal interview of the inmate.

The staff were very knowable about their responsibility to inmates that may of risk of victimization and abusiveness.

#### 115.41(e)

The PREA Risk Screen instrument reviewed by the audit team was found to have the required items to this provision. The first section of the instrument tool is the risk assessment for possible sexually abusive inmates which screens for the following items: prior acts of sexual abuse, prior convictions for violent offenses, and history of prior instructional violence or sexual abuse.

Interviews with risk screening staff revealed that staff were able to name indicators of this section of the screening tool to include: any violent history, any sexual offense, and any institutional violence in an individual's background. The screening staff advised that a background is completed to include a National Crime Information Center (NCIC) database run for the inmate's criminal history and a face to face interview with the inmate to complete the screening form.

#### 115.41(f)

SDDOC policy 1.4.B.16 was reviewed by the audit team which indicated that: "All inmates admitted to the DOC will have a PREA risk screen administered by an A&O case manager trained to administer the screen within 30 days of arrival at the facility. 1. The PREA risk screen will include the inmate's demographics, results of a NCIC criminal background report, sentencing information and PSI (if available), classification and assessment information, documented/known institutional behavior and other relevant information."

Review of completed risk re-assessments were conducted utilizing computerized spreadsheets of randomly selected inmates in Computerized Offender Management System. Printed spreadsheets revealed that each risk re-assessment was completed within seventy-two hours of the inmate's arrival at the facility. Audit team members found that majority of risk re-assessments were completed within one (1) week of the initial assessment.

Risk assessment staff advised that risk re-assessments are also completed on all inmates utilizing the same screening instrument. Staff advised that risk re-assessments are completed within thirty (30) days of the initial intake. Inmate interviews revealed that most inmates stated that they were asked the assessment questions a second time within the first month of being at the SDSP.

#### 115.41(g)

Policy 1.4.B.16 states on page 3, "A. A PREA risk screen review will be completed on all inmates with an existing PREA screen when the following exists: 2. If there is a recorded incident of substantiated sexual abuse involving the inmate. a. Following the finding of guilt of an institutional rule violation, civil procedure or criminal proceeding involving sexual abuse. b. Following a report the inmate was the victim of sexual abuse."

Staff responsible for risk screening advised that either a staff member in their position or a case manager would conduct a reassessment of an inmate's risk level as needed due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of victimization or abusiveness.

115.41(h)

Policy 1.4.B.16 is found to say on page 3, "3. PREA Risk Screen, C. An inmate's answers/responses to the PREA risk screen may not be shared with unauthorized staff or other inmates. Information shall not be used to the inmate's detriment to staff. 1. Inmates are not subject to discipline for failing to respond to questions or failing to provide complete answers to the screening questions." While this provision is specific to a) whether or not the inmate has a mental, physical, or developmental disability; b) whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; c) whether or not the inmate has previously experienced sexual victimization; and d) the inmate's own perception of vulnerability, SDSP chooses not to discipline inmates for refusal to answer any of the questions asked on the screening instrument.

Screening staff acknowledged they are aware that inmates have the right to refuse to answer any of the questions on the risk screening instrument and not be punished for refusal to answer.

115.41(i)

The PREA Coordinator advised the audit team that the agency has outlined and put parameters on what staff members have access to completed risk assessment information in the computer system. The Coordinator also advised that only unit staff and those who complete the risk screening instrument have access to this information. The PREA Compliance Manager also stated that access to this information was limited to only those with a certain rank and position. Unit staff as well as those completing the risk assessments have access to the information for all inmates. The staff who complete risk assessments were interviewed and was unsure as to who all at the facility had access, but knew that they are able to have access to all completed risk assessments.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.41.

115.42	<b>Use of screening information</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.4.B.16 PREA Institutional Risk Screens</li> <li>2) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</li> <li>3) Sample PREA Risk Screen</li> <li>4) Acknowledgement of Prevention of Sexual Abuse/Harassment Information</li> <li>5) Transgender Housing Reassessment Documentation</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) PREA Coordinator</li> <li>2) PREA Compliance Manager</li> <li>3) Staff Responsible for Risk Screening</li> <li>4) Transgender/Intersex Inmates</li> </ol>	
<p>115.42(a)</p> <p>SDDOC Policy 1.4.B.16 PREA Institutional Risk Screens was reviewed and addresses the requirement of this standard. Policy is found to say on page 5, "6. Utilization of the PREA Risk Screen Score: A. An inmate's PREA risk screen score will be considered when assigning housing for the inmate to help separate inmates who are high risk being sexually victimized from inmates assessed as high risk of being sexually abusive." Computerized spreadsheets of inmate's completed risk assessments and re-assessment information was provided to the audit team. Review of these spreadsheets revealed a field that allows staff to place alert codes for internal notification to ensure the correct placement of inmates.</p> <p>The PREA Compliance Manager stated that the assessments are used to make sure that inmates are housed properly according to classification and PREA assessments. Assessments are utilized to make sure that inmates that are found to be at risk of victimization are not housed with inmates who are found to be possibly sexually abusive. The staff members who conduct risk screenings advised that the assessments help to identify those that may be at risk of sexual victimization and codes will be put into the computer system that will allow for alerts if staff attempt to house them with an individual who was found to be sexually abusive during a risk assessment. The screening is also used to assign inmates a bed, work, education and programs.</p>	
<p>115.42(b)</p> <p>Policy 1.4.B.16 states on page 5, "6. Utilization of the PREA Risk Screen score: A. An inmate's PREA risk screen score will be considered when assigning housing for the inmate to help separate inmates who are high risk for being sexually victimized from inmates assessed as high risk of being sexually abusive."</p> <p>Interviews with the staff who perform risk screening advised that decisions are made on a case-by-case basis to ensure the safety of inmates from possible victimization based off of their risk assessments. Staff advised that they apply the appropriate internal risk code in the computerized system and house the inmate accordingly making sure not to house an inmate at possible risk of victimization in the same cell with an inmate found to be at risk of being sexually abusive.</p>	
<p>115.42(c)</p> <p>Page 5 of policy 1.4.B.16 was found to state that, "6. Utilization of the PREA Risk Screen score: A. 2. Individualized facility, housing and programming decisions for transgender and intersex inmates must be made based on consideration of all information available at the time, including the inmate's PREA Risk Screen score and individualized assessment. Placement</p>	

shall be reviewed a minimum of twice a year and documented in COMS in the case notes.”

The PREA Compliance Manager advised during his interview that transgender hearings are done monthly in order to determine that the agency is considering whether a transgender inmate’s health and safety are in order and whether the placement of a transgender inmate would present a management or security problem in a particular housing unit.

Transgender inmates were interviewed and indicated that during their incarceration at SDSP staff had asked them questions about their safety in their current housing units. The transgender inmates did not believe that they had been put into a housing unit area only for transgender or intersex inmates. One gender-fluid (identifies both male and female, they/them pronouns) was interviewed and advised that they had not been housed in a dedicated transgender/intersex housing unit and was housed currently in a general population dorm.

115.42(d)

Documentation was provided by the PREA Compliance Manager of his noted biannual interviews with transgender and intersex inmates that are housed in his unit. Documents revealed computerized logs noting the PREA Compliance Manager has a face-to-face interview with transgender and intersex inmates short of every six months in order to discuss the inmates current housing, their safety and any possible threats that have been endured.

The PREA Compliance Manager advised during his interview that he conducts placement and programming assignment interviews with transgender and intersex inmates for review of any threats to safety every six months. These reviews are documented in the “COMS” system. The staff responsible for conducting risk screenings advised that they are not the staff members that complete the twice annual reviews with transgender and intersex inmates. Staff indicated that these interviews are conducted by the case managers in each of the housing units.

115.42(e)

The PREA Compliance Manager advised during his reviews with transgender or intersex inmates, the inmate’s view with respect to his or her own safety is given serious consideration in placement of housing and programming opportunities. Staff who complete risk screening instruments advised that transgender and intersex inmates own views are taken into consideration in placement and programming assignments. Each of the transgender inmates that were interviewed indicated that staff did ask their opinions of housing and programming decisions along with their perception of their safety in their housing units.

115.42(f)

Shower areas were observed in each of the housing units. Shower areas ranged from locker room style group shower rooms to individual shower cells. The facility staff advised during the tour of the audit team that transgender and intersex inmates would be allowed to utilize the individualized shower cells for their shower time.

The PREA Compliance Manager advised during his interview that transgender and intersex inmates are afforded the opportunity to shower separately from other inmates. He advised that transgender and intersex inmates must make a request for separate shower options. Once this request has been submitted and approved, the inmate will be moved to different shower areas during set hours of the day for gender non-conforming showers. Both of the risk screening staff advised that transgender and intersex inmates are afforded the opportunity to shower separately from other inmates and that they would not be required to utilize the gang shower rooms in some of the housing units. The transgender inmates that were interviewed advised that they were allowed to shower separately, away from other inmates. The one gender fluid inmate (identifies both male and female), they/them pronouns) that was interviewed advised that they were required to be approved by the Gender Non-Conforming (GNC) Coordinator in a hearing to be approved for the status will allow for them to use the GNC shower rooms.

115.42(g)

The inmates interviewed that were selected from roster provided to the audit team, revealed that inmates who had identified as lesbian, gay, bisexual, transgender, or intersex (LGBTI) had been housed throughout the housing units of the facility. No one dorm or housing unit was dedicated as LGBTI housing at SDSP.

The PREA Coordinator advised that SDSP does not have dedicated units LGBTI inmates moreover that housing was based off classifications and assessment codes. The PREA Compliance Manager advised that LGBTI inmates are not housed

strictly in one housing unit. Housing determinations are made off of classification scores.

Transgender and gay inmates were interviewed advised that they did not feel like they had been placed in a housing unit strictly for LGBTI inmates. All of the transgender and gay inmates that were interviewed advised the audit team that they had been placed in general population dorms.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.42.

115.43	<b>Protective Custody</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDO Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassments</li> <li>2) SDDO Policy 4.3.D.1 Protective Custody</li> <li>3) Facility Completed Pre-Audit Questionnaire (PAQ)</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Warden</li> <li>2) Staff Who Supervise Inmate in Segregated Housing</li> <li>3) Inmates in Segregated Housing for Risk of Sexual Victimization or Who Allege to Have Suffered Sexual Abuse (The audit team was unable to conduct this targeted protocol due to no inmates at SDSP in segregated housing for risk during the onsite phase of the audit)</li> </ol> <p>115.43(a)</p> <p>SDDOC policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassments was reviewed and addresses the requirement of this standard. Page 10, “3. Reaction to Incidents: A. Protective Custody, 1. Inmates determined to be at high risk of sexual victimization through completion of the PREA assessment or those who are alleged to have suffered from sexual abuse in the facility will not be placed in involuntary protective custody, unless an assessment of all available alternative means of separation from likely abusers. Such placement shall be temporary until suitable housing can be identified. If an assessment cannot be conducted immediately, the inmate may be held in involuntary protective custody for a period not to exceed twenty-four (24) hours while the assessment is completed.”</p> <p>The facility reported that there have been no inmate at risk of sexual victimization that were held in involuntary segregated housing in the past twelve months for one to twenty-four hours awaiting an assessment, therefore, there were no records to review.</p> <p>An interview was conducted with the Warden that he indicated that policy prohibits placing an inmate into involuntary segregated housing for being at risk for sexual victimization in lieu of other housing areas. The Warden further indicated that a temporary housing solution would be found until a more permanent arrangement could be made.</p> <p>115.43(b)</p> <p>Two staff members who supervise inmates in segregated housing were interviewed and indicated that an inmate placed into segregated housing for protection from sexual abuse or after alleging sexual abuse, they would still have some access to programs, privileges, education, and work opportunities. Some programs are restricted based on the location, but every effort is made to ensure they receive what they are entitled. Staff stated that any restrictions to an inmates out of cell opportunities would be documented by the officer-in-charge. The audit team was unable to interview any inmates in segregation for being at risk of sexual victimization or who have alleged to have suffered sexual abuse while at the facility as none were identified by the facility during the onsite phase of the audit.</p> <p>115.43(c)</p> <p>The facility reported that there have been no inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative housing placement in the past twelve months.</p> <p>The Warden indicated that inmates at high risk of sexual victimization or who have alleged sexual abuse are placed in involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged by staff. Staff who supervise inmates in segregated housing advised that ordinarily inmates placed in involuntary segregation as a</p>	



means of separation would be held there by investigations and have fifteen days to hold but usually do not last that long. Staff advised if an inmate is housed in involuntary segregation for long periods of time, reviews are conducted every thirty days to determine if continued placement in involuntary segregation is warranted.

115.43(d)

The facility reported there were no files of inmates at risk of sexual victimization who were held in involuntary segregation housing in the past twelve months, to include case files that hold both a statement for the basis for the facility's concern for safety and the reason why alternative means of separation could not be arranged. No inmates were placed into involuntary segregation during the last twelve months awaiting the risk assessments and therefore, there were no files to review.

115.43(e)

Policy 4.3.D.1 is found to state on page 4 that, "Protective Custody Reviews: A. The Unity Manager will review each inmate housed in Protective Custody at least every 30 days. 1. An inmate may be reviewed earlier than the 30 day interval if the conditions that warranted the placement have changed so that it appears Protective Custody may no longer be necessary.

Staff who supervise inmates in segregated housing indicated that once an inmate is assigned to involuntary segregated housing, the inmate's circumstances shall be reviewed every thirty days to determine if continue placement in segregated housing is still warranted. These reviews would be documented and kept on file. There were no files available to be reviewed.

It should be noted that while no inmates were found to be in involuntary segregation for risk of sexual victimization for the audit to review custody reviews, the audit team was able to review custody reviews of one offender had been housed in involuntary segregation. The case manager onsite advised that the inmate had been placed into involuntary segregation over a year ago due to behavioral issues in the facility and being at high risk of being sexually abusive. Thirty-day custody reviews were reviewed by the audit team during the onsite phase of the audit.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.43.

115.51	<b>Inmate reporting</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Area Reviewed During Tour:</p>	
<p>1) Full facility</p>	
<p>Documents Reviewed:</p>	
<p>1) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</p>	
<p>2) SDDOC Policy 1.3.E.6 PREA Response and Investigations of Sexual Abuse and Harassment</p>	
<p>3) SDDOC Policy 1.1.C.1 Staff Code of Ethics</p>	
<p>4) SDDOC Policy 1.1.D.1 Staff Training Requirements</p>	
<p>5) Inmate Living Guide (facility handbook)</p>	
<p>6) DCI Notices</p>	
<p>7) Outside Investigators - DCI</p>	
<p>8) Investigative Files</p>	
<p>Interview Protocol Utilized:</p>	
<p>1) Random Staff</p>	
<p>2) Random Inmate</p>	
<p>3) PREA Compliance Manager</p>	
<p>115.51(a)</p>	
<p>Policy SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards was reviewed and addresses the requirement of this standard. On page 15 of the policy it is stated that, "IV. Procedures: 8. Reporting of Incidents, A. The PREA Compliance Manager shall provide multiples ways for inmates to privately report sexual abuse, sexual harassment, retaliation by other inmates or staff for reporting sexual abuse or sexual harassment, and staff neglect or violations of staff responsibilities pertaining to PREA that may have contributed to sexual abuse or harassment of an inmate. The following are some of the ways that an inmate may report these concerns: 1. Verbal report by the inmate; 2. Written report (kite) by the inmate, 3. Anonymous kite to staff; or 4. Third party report, including from other inmates, the public or a victim advocacy entity."</p>	
<p>Staff interviews were conducted and staff were able to describe the various reporting methods that inmates could utilize when reporting incidents of sexual abuse or harassment. Staff indicated that inmates could report in writing via their tablets using the "kite" (written requests) system. Staff also indicated that inmates are able to report verbally to a staff member an incident of sexual abuse or harassment. Inmate interviews were conducted and inmates were aware of various ways to report sexual abuse or harassment should they have the need. Inmates identified that they would be able to report to staff verbally, write a "kite" or have someone else report for them.</p>	
<p>115.51(b)</p>	
<p>During the tour, the audit team identified posters for the Division of Criminal Investigations (DCI) as a third party reporting outlet with the mailing address. In addition, The Compass Center poster that also provided a mailing address. While touring housing units the audit team was able to locate posting near phones that indicated a speed dial number under the title "Report Sexual Abuse - Caller ID is logged, Conversations are not recorded." The agency name listed next to the speed dial number is that of the Compass Center.</p>	

The facility reports they do not hold inmates solely for immigration purposes.

State-paid postage for privileged/legal correspondence is limited to five (5) per week, per inmate. State-paid postage will not exceed fifteen dollars (\$15) per month, per inmate. The new month shall start with the first full week of the month. State-paid postage is limited to first class mail and does not include certified mail or any other additional fees/charges that may apply. Inmate who request additional mail services be applied to privileged/legal mail are responsible for those costs. There is no limit on the amount of privileged/legal mail an inmate may send out at their own expense." A review of the same policy also shows that on "Attachment 1: Definition of Privileged/Legal Correspondence", A. Incoming and outgoing correspondence from the following sources is considered privileged/legal: 13. South Dakota Division of Criminal Investigation, and 16. Organizations or entities which are known to provide rape crisis/ victim advocate services (such as Compass Center, Missouri Shores, Working Against Violence and River City Domestic Violence Center)." Notices found posted throughout the facility state that letters to DCI are free and confidential and will be considered outgoing privileged/legal correspondence.

#### 115.51(c)

Policy SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards was reviewed during the pre-site phase of the audit by the audit team. On page 15 of the policy it is stated that, "IV. Procedures: 8. Reporting of Incidents, A. The PREA Compliance Manager shall provide multiples ways for inmates to privately report sexual abuse, sexual harassment, retaliation by other inmates or staff for reporting sexual abuse or sexual harassment, and staff neglect or violations of staff responsibilities pertaining to PREA that may have contributed to sexual abuse or harassment of an inmate. The following are some of the ways that an inmate may report these concerns: 1. Verbal report by the inmate; 2. Written report (kite) by the inmate, 3. Anonymous kite to staff; or 4. Third party report, including from other inmates, the public or a victim advocacy entity." Page 5 of the Inmate Living Guide states " If you are not comfortable reporting sexual abuse or sexual harassment directly to a staff member, either in writing, verbally, or through an anonymous kite, you may report the abuse or harassment through the institutional telephone "hotline", or by contacting the South Dakota Division of Criminal Investigation...If you choose to report the sexual abuse or harassment to a friend or family member, they may report this information directly to the DOC or Division of Criminal Investigations..." The facility completed PAQ states that staff are required to document verbal reports to staff immediately. Investigative files were reviewed for this provision and found that several stated that the inmate reported in incident verbally to a staff member.

Random staff interviews with the audit team revealed that staff members were aware of the requirement to document verbal reports of sexual abuse or harassment made by inmates. Answers varied on the timeframe in which documentation was required. Answers ranged from, "immediately", "as soon as possible", "before the end of shift", and "within 24 hours".

Interviews with random inmates showed that all inmates interviewed were aware that they could make reports of sexual abuse and harassment in person and in writing and that a family member or friends could report on their behalf. Inmates also advised that they were aware that they could report without having to give their name.

#### 115.51(d)

Page 16 of SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards advises that "a. Immediate action includes: 1. Separate the alleged victim and potential abuser, 2. Direct notification of the risk to an OIC..." Page 4 of

IV. Procedures: Standards of Conduct, C. 2. DOC staff are required to directly report to their supervisor or human resource manager, any knowledge, suspicion, or information they have regarding the following: a. An incident of sexual abuse or sexual harassment that may have occurred involving a DOC staff member and offender, b. Any retaliation or adverse treatment that may have occurred against an offender or staff member who reported an incident of sexual misconduct or sexual harassment, c. Any staff member whose negligence or violation of duties, responsibilities, or failure to abide by the code of ethics, may have contributed to the sexual misconduct of sexual harassment." Staff are trained of this during annual in-service training of the PREA standards.

Staff interviews revealed that all staff interviewed were aware that they could report any knowledge or suspicion of sexual abuse to their supervisor. Staff members were aware that they were not required to report this information to their supervisor in the event that it was their supervisor involved in an incident but could report to another supervisor that they felt comfortable in talking with.

Staff and Inmate Interviews and review of documentation provided; the facility meets all components associated with §115.51

115.52	<b>Exhaustion of administrative remedies</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.2 Administrative Remedy for Inmates</li> <li>2) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</li> <li>3) Facility Completed Pre-Audit Questionnaire (PAQ)</li> <li>4) Grievances Filed Reference to Sexual Abuse by Inmates in the Previous Year</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Inmates Who Reported a Sexual Abuse</li> </ol> <p>115.52(a)</p> <p>SDDOC policy 1.3.E.2 Administrative Remedy for Inmates was reviewed and addresses the requirement of this standard. Page 5 of the policy is found to state, “D. The investigation procedures, conclusion or staff response pertaining to the inmate’s allegation of sexual abuse or sexual harassment. 1. There is no time limit for an inmate to file a request for administrative remedy regarding the investigation procedures, conclusion, outcome of the investigation or staff response to the inmate’s allegation of sexual abuse or sexual harassment... 2. Reports or requests for remedy involving sexual abuse or sexual harassment will be forwarded to the Special Investigative Unit (SIU) staff for investigation. A copy of the report should be sent to the facility PREA Coordinator. 3. An inmate’s request for remedy regarding the investigation procedures, conclusion, outcome of the investigation or staff response to an allegation of sexual abuse or sexual harassment, is NOT subject to informal resolution and shall be forwarded to the appropriate investigative authority...”.</p> <p>There were six grievances filed in the previous twelve months alleging sexual abuse that reached final decision within ninety days. The cases were investigated in accordance with policy.</p> <p>115.52(b)</p> <p>Policy 1.3.E.2 states on page 5, “D. The investigation procedures, conclusion or staff response pertaining to the inmate’s allegation of sexual abuse or sexual harassment. 1. There is no time limit for an inmate to file a request for administrative remedy regarding the investigation procedures, conclusion, outcome of the investigation or staff response to the inmate’s allegation of sexual abuse or sexual harassment...” and “3. An inmate’s request for remedy regarding the investigation procedures, conclusion, outcome of the investigation or staff response to an allegation of sexual abuse or sexual harassment, is NOT subject to informal resolution and shall be forwarded to the appropriate investigative authority...”.</p> <p>Inmates are not restricted from filing an administrative remedy regarding PREA allegations.</p> <p>115.52(c)</p> <p>Policy 1.3.E.2 states on page 2, “E. Staff who are the subject of an inmate’s request for administrative remedy will not be assigned to investigate or formally respond to that particular grievance or issue. Only impartial staff may be assigned to investigate, review and respond to the inmate’s request for remedy. Staff may be interviewed by investigating staff and provided an opportunity to relay their version of the incident, including pertinent facts and information.”</p> <p>Inmates are not obligated to submit a grievance to the employee that maybe subject of the allegation.</p> <p>115.52(d)</p> <p>The facility reported that the facility has a three tiered process for responses to grievances. Step 1: Unit staff have ten days to respond to a grievance. Step 2: The Warden’s staff have thirty days to review and answer the filed grievance. The</p>	

Warden's staff have up to a thirty day extension in needed circumstances to issue a final ruling. If the inmate appeals the decision of the Warden's staff, the inmate may make an appeal to the Secretary of Correction's Office which then has an additional thirty days to issue a decision. The process that is in place will issue a final ruling within ninety days of the filing of the grievance barring the ability for the inmate to appeal the facility's decision.

There were six grievances filed in the previous twelve months alleging sexual abuse that reached final decision within ninety days. The cases were investigated in accordance with policy.

#### 115.52(e)

Policy 1.3.E.2 was reviewed by the auditors and found on page 3, "Third party assistance in pursuing a request for remedy is permitted. Inmates may request a third-party assistant to help document their request and the grievance. The inmate requesting the remedy must sign the completed form (also referred to as the "Grievant"). The third-party preparer is required to sign the completed form/request." And "G. Inmates may not request or submit an administrative remedy on behalf of another inmate, unless the request is for the following: 1. Information provided in the request for remedy supports an inmate may be the victim of an incident of sexual abuse or sexual harassment. The information/request for remedy will be referred to the sexual abuse/harassment investigative grievance procedure... a. The inmate who is the alleged victim must provide a written statement or agreement accepting or declining to have the request proceed (PREA Standard 115.52 e-2, e-3)."

The PAQ states that there have been no grievances alleging sexual abuse filed by inmates in the past year in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline.

#### 115.52(f)

Policy 1.3.E.2 is found to have on page 4, "B. Emergency grievances or issues that require prompt action. 1. While not intended to be an inclusive list, examples of an emergency grievance or issue include: d. Information pertaining to or describing incidents of sexual abuse, sexual harassment, self-harm, suicide, assault or excessive force by staff." Policy goes on to state that "2. If staff determines the grievance or issue requires immediate response/action, the staff member will promptly address the grievance or issue. If the staff member does not have the authority or ability to respond or take action, they will forward the request without substantive review to the appropriate staff person."

The facility reported that no emergency grievances were filed by inmates in the past twelve months.

#### 115.52(g)

SDDOC policy 1.3.E.2 states on page 3, "J. The administrative remedy process prohibits reprisal of an inmate. Reprisal means any action or threat of action against an inmate, third party or non-inmate for the good faith use of or good faith participation in the administrative remedy process...". The facility PAQ states that no inmate grievances resulted in disciplinary actions against inmates for having filed the grievance in bad faith.

Staff and inmate Interviews and review of documentation provided; the facility meets all components associated with §115.52.

#### Recommendations:>

- 115.52(f) - While policy states that staff will "promptly address" an emergency grievance, it is the audit team's recommendation to put the forty-eight (48) hour response timeframe in policy.

<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Mechanism Tested During Tour:</p> <p>1) Phone Access to Outside Emotional Support Services</p> <p>Documents Reviewed:</p> <p>1) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</p> <p>2) Notice – Compass Center Postings (English and Spanish)</p> <p>3) Inmate Living Guide</p> <p>4) Facility Completed Pre-Audit Questionnaire (PAQ)</p> <p>5) SDDOC Policy 1.5.D.4 Inmate Access to Telephones and Tablets</p> <p>6) Compass Center Memorandum of Understanding (MOU)</p> <p>Inmate Protocol Utilized:</p> <p>1) Inmate Interview Questionnaire</p> <p>2) Inmates Who Reported a Sexual Abuse</p> <p>115.53(a)</p> <p>SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards was reviewed and addresses the requirement of this standard. On page 12 of policy it is found to state, “6. Victim Advocate/Rape Crisis Centers: A. Inmates shall have access to outside victim advocates. Inmates will be provided mailing addresses and telephone numbers (including toll-free hotline numbers, where available) of local, state or national victim advocacy or rape crisis organization.”</p> <p>The facility has a MOU between the facility and The Compass Center in which provides access to services. A review of the MOU and found the MOU has been in place since March 1st, 2013, and remains in effect. On page 1 of the MOU it is listed that The Compass Center will “Provide a way for the victims’ advocates reporting sexual abuse or sexual harassment of a DOC offender to the DOC/SDP verbally, in writing, or through complaint form, allowing the offender to remain anonymous upon request.” and “Provide offenders with confidential access to a qualified outside victim advocate providing them with emotional support and assisting them with the response of sexual abuse.”</p> <p>During the tour of the facility, the auditors observed postings for The Compass Center posted conspicuously in common areas of the facility. The postings were found to have a mailing address along with notation that states “This letter is free and confidential and will be considered Outgoing Privileged/Legal Correspondence.”. The facility PAQ states that the facility does not house inmate solely for immigration purposes therefore 115.53(a)(3) is non-applicable.</p> <p>Interviews with inmates who reported a sexual abuse while at the facility during the onsite phase of the audit by audit team members. Majority of the randomly selected inmates questioned did not know of outside services available for dealing with sexual abuse of inmates. Inmates went on to say that they were unsure of what types of services outside providers could offer. Of the inmates that did answer that they were aware of outside services available to victims of sexual abuse, few knew what services they actually provided. The audit team interviewed four inmates who reported a sexual abuse to the facility. Of those interviewed, two advised that they were provided mailing addresses and telephone numbers in order to obtain outside services such as advocacy services.</p> <p>A member of the audit team conducted tests of the phones inside two of the housing units and was able to make contact with The Compass Center utilizing the phone instructions and speed dial number that is located next to the phones. The audit team member conducting the phone tests was able to speak with a live operator and was able to place a mock report of sexual abuse. It should be noted that during the tour, the audit team was advised by the PREA Coordinator that each inmate at SDSP has a tablet provided to them which allows for inmates to make requests, read facility information, and provides</p>

telephone line to the inmate.

During the tour the audit team observed wall phones placed in common areas in each of the housing units. Tests of these wall phones by the audit team were found to be inoperable due to the phones being turned off. The audit team was advised that due to each inmate having a tablet which provides for phones, these phones had been turned off in the control centers. Once the wall phones were turned on, the audit team member was able to make a test call to The Compass Center utilizing the wall phone. In a different housing unit, the audit team member made contact with The Compass Center utilizing an inmate tablet.

115.53(b)

SDDOC policy 1.5.D.4 Inmate Access to Telephone and Tablets as reviewed by the audit team during the pre-onsite phase of the audit. On page 23 it is found to state, "Attachment 7: Definition of Privileged/Legal Correspondence, A. Incoming and outgoing correspondence from the following sources is considered privileged/legal: 16. Organizations or entities which are known to provide rape crisis/victim advocate services (such as Compass Center, Missouri Shores, Working Against Violence and River City Domestic Violence Center)." "An Inmate's Guide – Sexual Abuse and Sexual Harassment Awareness" brochure also provides on the inside tab, "All phone calls and reports will be kept confidential." The Inmate Living Guide is also found to contain on page 5, "If you are not comfortable reporting sexual abuse or sexual harassment directly to a staff member, either in writing, verbally or through an anonymous kite, you may report the abuse or harassment through the institutional telephone "hotline" or by contact the South Dakota Division of Criminal Investigations, 1302 East Hwy 14, Suite 5, Pierre, SD 57501-8505..."

Interviews with inmates revealed that the majority were either unsure of services available outside of the facility for dealing with sexual abuse or were uncertain if what they speak with to these outside agencies remains private. Several inmates that were interviewed were able to positively identify that there were services available and that the information that they provide is confidential to an extent (mandatory reporting laws). Of the inmates interviewed who had reported sexual abuse to the facility, three of the four advised that they were aware they could communicate either by phone or writing outside sources in a confidential way.

115.53(c)

The facility has a MOU between the facility and The Compass Center in which provides access to services. A review of the MOU and found the MOU has been in place since March 1st, 2013, and remains in effect.

A telephonic interview was conducted with a representative of The Compass Center during the pre-onsite phase of the audit by an audit team member. The interview with the representative revealed a positive working relationship between the facility and The Compass Center. The representative advised that she has had numerous conversations with the PREA Coordinator in reference to services provided to the inmates at SDSP and the possibility of The Compass Center being part of staff training in the coming year's In-Service.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.53.

Recommendations:>

- The audit team observed wall phones throughout the facility but were found to be turned off in through the control rooms due to inmates each having been assigned tablets with phone accessibility. The audit team recommends that the wall phones be turned on during waking hours in order inmates to make contact with friends and family as well as to provide an additional avenue for inmates to contact outside support services if their tablet becomes non-functioning.

<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>Documentation Reviewed:</p> <p>1) Agency Website - <a href="https://doc.sd.gov/about/PrisonRapeEliminationAct.aspx">https://doc.sd.gov/about/PrisonRapeEliminationAct.aspx</a></p> <p>2) Division of Criminal Investigation Postings</p> <p>115.54(a)</p> <p>The audit team was able to review the agency website and found the following: "To report an incident of sexual abuse or harassment of an inmate or juvenile offender, the public may use the following contact information: DOC-Adult Division, PREA COORDINATOR, PO Box 5911, Sioux Falls, SD 57117, (605) 367-4496, DOC.ADULTPREA@state.sd.us" Posting were also found during the facility tour advising inmates the ability to write to the Division of Criminal Investigations at 1302 E Hwy 14, Suite 5, Pierre, South Dakota, 57501-8505. It should be noted that during the pre-onsite phase of the audit the audit team emailed a mock report to the email address provided on the website. A response to the email mock notification was received from the PREA Coordinator within a matter of hours from first sending. After the initial response from the PREA Coordinator, several investigative staff also responded that they had received the mock notification.</p> <p>Based on interviews, documentation reviewed, and the agency/facility exceeded the requirements with the readily available information on their website exceeds the standards associated with §115.54.</p>



115.61	<b>Staff and agency reporting duties</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.1.C.1 Code of Ethics</li> <li>2) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</li> <li>3) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment</li> <li>4) Completed Investigative Files</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Random Staff</li> <li>2) Medical and Mental Health Staff</li> <li>3) Warden or Designee</li> <li>4) PREA Coordinator</li> </ol> <p>115.61(a)</p> <p>SDDOC policy 1.1.C.1 Code of Ethics was reviewed and addresses the requirement of this standard. Policy is found to state on page 4, “IV. Procedures: 1. Standards of Conduct: C. 2. DOC staff are required to directly report to their supervisor or human resource manager, any knowledge suspicion or information they have regarding the following: a. An incident of sexual abuse or sexual harassment that may have occurred involving a DOC staff member and offender. b. Any retaliation or adverse treatment that may have occurred against an offender or staff member who reported an incident of sexual misconduct or sexual harassment. c. Any staff member whose negligence or violation of duties, responsibilities, or failure to abide by the code of ethics, may have contributed to the sexual misconduct or sexual harassment.</p> <p>Staff interviews were conducted and staff acknowledged that they were aware of the policy and their requirement to report any knowledge, suspicion, or information regarding incidents of sexual abuse or sexual harassment, retaliation against inmates and staff who reported an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident. Staff advised that they report any information their officer-in-charge or any staff member they feel comfortable to report the information in a confidential matter.</p> <p>115.61(b)</p> <p>SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment was reviewed by the audit team during the pre-onsite phase of the audit. Policy is found to state on page 9, “IV. Procedures: 2. Investigations: C. Administrative Investigations: 8. The sharing of confidential information pertaining to a sexual abuse incident shall be limited to those who must know. Sharing information regarding the victim or incident shall be conducted in a manner that is in accordance with all applicable policies, statutes, regarding confidentiality, victim rights, and professional licensure and ethics standards.”</p> <p>Staff interviews revealed they were aware of the policy and that incidents of sexual abuse and sexual harassment of offenders are on a “need to know” basis. Only supervisors in charge of the scene, investigative staff members, medical staff, and command staff should have access to information of sexual abuse and sexual harassment incidents.</p> <p>115.61(c)</p> <p>Interviews with members of medical and mental health staff revealed that all inmates are notified of the limitations of confidentiality and the medical staff’s duty to report. Medical staff advised that they are aware of the requirement to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to a supervisor immediately</p>	

upon learning of it. Three (3) of the (4) medical staff interviewed advised that they were made aware of such incidents and reported promptly to a supervisor.

115.61(d)

Interviews with the Warden and PREA Coordinator confirmed that no offenders under the age of eighteen (18) are housed at SDSP. Inmates considered as vulnerable adults who report sexual abuse or sexual harassment would be investigated in the same way as those of other victims. Reports would be sent to the SIU in which those cases would be turned over to Division of Criminal Investigations (DCI) for possible criminal prosecution.

115.61(e)

A review of investigative files found that several alleged incidents were reported via a third-party (another inmate housed at the facility or volunteer/contract staff).

The Warden advised all allegations of sexual abuse and sexual harassment including those reported via a third-party and anonymously are investigated by facility investigators.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.61.

<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) Facility Pre-Audit Questionnaire (PAQ)</li> <li>2) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</li> <li>3) Facility Email Reference to Imminent Risk</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Agency Head or Designee</li> <li>2) Warden</li> <li>3) Random Staff</li> </ol> <p>115.62(a)</p> <p>Agency policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards was reviewed and addresses the requirement of this standard. Page 15 policy states, "IV. Procedures, 8. Reporting of Incidents, C. 1. If staff has reasonable belief an inmate is at risk of being sexually abused, staff will take immediate action to protect the inmate. a. Immediate action includes: 1) Separate the alleged victim and potential abuser, 2) Direct notification of the risk to the OIC, 3) Placing inmate participants on IP status in Disciplinary Housing, pending an investigation, 4) Additional actions, as deemed appropriate and in the best interest of the inmate's safety."</p> <p>The facility reported one inmate was found to be at imminent risk during the previous twelve months. A copy of an email between a facility investigator and a case manager detailed the steps taken to relieve any potential risk. The inmate in question was located to a different housing unit away from all parties in which the inmate listed felt credible fear from.</p> <p>Interviews with the Agency Head's designee, the Warden, and other staff revealed that when the facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, they respond using the procedures outlined in policy.</p> <p>The procedures include immediately separating the potential victim from other inmates, notify the officer in charge, consider special housing, and turn the information over to SIU (facility investigators) for investigation. final disposition. During the interview with the Warden, he advised that the potential victim would be removed from the area and placed in a safe location. All information would be turned over to SIU for follow-up investigation.</p> <p>Based off of documentation provided and interviews conducted, the facility meets all components associated with §115.62.</p>

<b>115.63</b>	<b>Reporting to other confinement facilities</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) Facility Completed Pre-Audit Questionnaire (PAQ)</li> <li>2) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Agency Head or Designee</li> <li>2) Warden or Designee</li> </ol> <p>115.63(a)</p> <p>SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards was reviewed and addresses the requirement of this standard. Page 16 states “D. Upon receiving information alleging an inmate was sexually abused while confined at facility outside of the DOC (i.e. jail or contract facility), the Warden or his/her designee will notify the head of the facility or appropriate office of the agency where the alleged sexual abuse of the inmate occurred.”</p> <p>The facility reported that two inmates provided information that they were abused at another institution in the past twelve months. The incidents were investigated as prescribed by policy.</p> <p>115.63(b)</p> <p>Page 16 of policy states “D.1. Notification will be provided by the Warden or designee to the facility as soon as possible but no later than 72 hours after receiving the allegation.”</p> <p>Staff interviews verified that notifications are made as soon as possible, but no longer than 72 hours.</p> <p>115.63(c)</p> <p>Page 16 of policy states “D. 2. The Warden or designee will document the information has been reported. A copy of the notification and/or documentation shall be attached to the initial report alleging the abuse and sent to the DOC facility PREA Compliance Manager and the DOC PREA Coordinator.”</p> <p>Staff verified that all notifications are documented.</p> <p>115.63(d)</p> <p>Policy states on page 16, “A. The DOC will respond to all allegations of sexual abuse and sexual harassment received, including third-party reporting and anonymous reports. All allegations will be promptly, thoroughly, and objectively investigated by SIU staff.</p> <p>The Agency Head’s designee advised that reports of sexual abuse or sexual harassment received from other agencies or facilities would be referred to Division of Criminal Investigations and investigated thoroughly.</p> <p>Staff verified one such incident where an inmate reported sexual abuse at another facility while the inmate was housed in a facility in Minnesota. The inmate refused to cooperate with the investigation and the case was closed. The facility staff indicated that all investigations are conducted in accordance with policy.</p> <p>Staff Interviews and review of documentation provided; the facility meets all components associated with §115.63.</p>	

<b>115.64</b>	<b>Staff first responder duties</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) Completed Facility Pre-Audit Questionnaire (PAQ)</li> <li>2) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment</li> <li>3) Investigative Files</li> <li>4) Staff PREA Pocket Guide for First Responders</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Security Staff and Non-Security Staff First Responders</li> <li>2) Inmates Who Reported a Sexual Abuse</li> <li>3) Random Sample of Staff</li> </ol> <p>115.64(a)</p> <p>SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment was reviewed and addresses the requirement of this standard. Page 4 states, “IV. Procedures: A. Staff Duties, 2. a. The staff member witnessing the incident will separate the victim and abuser...3. Staff will preserve and protect any potential crime scene and evidence, in accordance with policy and approved practices, procedures and directives until appropriate steps can be taken to process the scene and collect evidence... b. If the sexual abuse occurred within a time period that allows for the collection of physical evidence, including forensic evidence, staff will ensure the alleged abuser does not take any actions that could destroy physical evidence, including as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, drinking or eating. c. Staff first responding to the scene/incident shall remain in the presence of the inmate(s) involved and instruct the inmate not to take any actions that could destroy potential physical evidence.”</p> <p>The facility reported eighty-five allegations of sexual abuse in the previous twelve months. Of those eighty-five, sixty-four incidents required responding security staff separated the alleged victim and abuser. Three incidents where staff were notified within a time period that still allowed for the collection of physical evidence. All three times the first security staff member to respond, preserved and protected the crime scene until appropriate steps could be taken to collect any evidence.</p> <p>Review of investigative files revealed that staff first responders took appropriate actions as outlined in the standard. The facility provides all staff a PREA pocket guide that outline actions to be taken by staff first responders to include, but not limited to, immediately report the incident to the officer-in-charge, assess victim’s need for immediate care for life-threatening or serious injuries, address safety needs of victims and others on the scene, preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, seek basic information from victims about the abuse, and separate the abuser and victim to include sight and sound separation. First responder interviews revealed that staff were familiar with the process to be taken if an inmate reports sexual abuse to them.</p> <p>The inmate interviews revealed that most inmates felt that staff responded quickly once they reported being sexually abused. One inmate interviewed advised that there was two weeks between the incident and the time staff came to speak with him about his complaint. A review of that investigative file showed the complaint of alleged sexual harassment was on a Sunday and reported to on Monday. Investigative staff began their interviews two weeks later. All targeted inmates interviewed utilizing this protocol advised that first responding staff members separated the inmate from other inmates and completed the investigation as outlined in the standard.</p> <p>115.64(b)</p> <p>Page 4 states, “IV. Procedures: A. Staff Duties, 2. Upon learning such information/receiving the complaint or information, the staff member will promptly report the complaint or information to the Officer in Charge (OIC) or his/her supervisor... 3. Staff will preserve and protect any potential crime scene and evidence, in accordance will policy and approved practices,</p>	

procedures and directives until appropriate steps can be taken to process the scene and collect evidence.”

Interviews with non-security staff revealed that they were aware of their roll if they were the first person to be alerted that an inmate had allegedly been the victim of sexual abuse. They outlined their role to secure the victim in a safe place, securing the crime scene, advising the alleged victim not to brush teeth/shower/toilet to save any physical evidence present, notify the officer-in-charge, advise medical staff, and separate the alleged abuser if one was identified.

Interviews and review of documentation provided; the facility meets all components associated with h §115.64.

*Audit Teams Recommendations:*

- Staff pocket reference guide should include "Request that the alleged victim and alleged abuser, if identified, 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."

<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.6 PREA Response and Investigations of Sexual Abuse and Harassment</li> <li>2) SDDOC PREA Protocol Reference Book</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Warden</li> </ol> <p>115.65(a)</p> <p>SDDOC Policy 1.3.E.6 PREA Response and Investigations of Sexual Abuse and Harassment was reviewed and addresses the requirement of this standard. The policy is twenty-one (21) pages and includes the intended responses by first responders, medical staff, ongoing medical care, victim advocates, and possible prosecution. The South Dakota Department of Corrections Sexual Incident Protocol and Reference Book was also reviewed by members of the audit team. This document is a comprehensive booklet of forty-five (45) pages and fully outlines the responses of each of the multidisciplinary team to include: first responder, correctional health services, correctional behavioral health, DOC investigators, Division of Criminal Investigation (DCI) Investigators, victim advocates, Sexual Assault Nurse Examiner (SANE), DCI Forensic Lab, and county/state prosecutors. The coordinate response is a guide for staff members that includes sexual incident definitions, officer-in-charge responsibilities, evidence procedures for staff, forensic exam preparation and transport of victims, documentation and evidence overview, and more.</p> <p>The Warden indicated there is a coordinated multidisciplinary response plan in place for reports of sexual abuse. This plan is reviewed annually by members of the multidisciplinary team for any possible revisions.</p> <p>Based off of documentation provided and interviews conducted, the facility exceeds the components associated with §115.65.</p>

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documentation Reviewed:</p> <p>1) Facility Completed Pre-Audit Questionnaire (PAQ)</p> <p>Interview Protocol Utilized:</p> <p>1) Agency Head or designee</p> <p>115.66(a)</p> <p>The facility reported that the agency and facility has not entered or renewed any collective bargaining agreement or other agreement since the last PREA audit.</p> <p>SDDOC is non-union and there have been no collective bargaining agreements entered into or renewed.</p> <p>115.66(b)</p> <p>The auditor is not required to audit this provision.</p> <p>Interviews and review of documentation provided; the facility meets all components associated with §115.66.</p>



115.67	<b>Agency protection against retaliation</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse/Harassment</li> <li>2) Facility Completed Pre-Audit Questionnaire (PAQ)</li> <li>3) Computerized Inmate Logs Used for Retaliation Monitoring</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Agency Head or designee</li> <li>2) Warden</li> <li>3) Designated Staff Member Charged with Monitoring Retaliation</li> <li>4) Inmates In Segregated Housing for Risk of Sexual Victimization or Who Allege to Have Suffered Sexual Abuse – Protocol not utilized due to no inmates in this target area were identified by the facility</li> <li>5) Inmates Who Reported a Sexual Abuse</li> </ol> <p>115.67(a)</p> <p>SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse/Harassment was reviewed and addresses the requirement of this standard. Audit team members found on page 11, “C. Protection Against Retaliation: 1. At the completion of the investigation, the Special Investigations Unit will complete the initial protection measures and contact the PREA Compliance Manager for information and follow-up. All such initial monitoring and status checks will be documented on the COMS Reportable Incident Recording (See Attachment 2) by the Special Investigations Unit. a. The monitoring shall begin immediately after an allegation of sexual abuse or staff on inmate sexual harassment incidents are made and will terminate if the allegation is determined by the investigation to be unfounded by the PREA Compliance Manager.”</p> <p>The facility PCMs are the designated staff members that are charged with monitoring retaliation.</p> <p>115.67(b)</p> <p>A PCM was interviewed acknowledge that he meets with staff and inmates every thirty days for retaliation monitoring. He advised that he interviews staff and inmates who have cooperated with investigations and then reports to SIU for investigation, if needed. The PCM advised the reviews are conducted every thirty days. Three inmates were interviewed who had reported sexual abuse or harassment to the facility and they indicated that they did feel protected enough against possible retaliation from staff and other inmates since they reported their incident.</p> <p>115.67(c)</p> <p>Page 12 of policy 1.3.E.6 states, “C. 2. For a minimum of 90 days following the report of the alleged sexual abuse or staff on inmate sexual harassment incidents, the facility PREA Compliance Manager shall monitor inmates or staff who report sexual abuse or staff on inmate sexual harassment... a. Reports of retaliation by either staff or inmates will be reported directly to the Special Investigations Unit for investigation. b. Staff shall take appropriate measures to protect inmates against retaliation, including: 1) Changes in unit or facility housing assignments for victims or abusers; 2) Removal of alleged staff or inmate abusers from contact with victims; and 3) Providing victims information and free confidential access to emotional support services.”</p> <p>The facility reported that there have been no instances of retaliation occurring in the facility in the past twelve months. Samples of the PCM’s completed retaliation monitoring logs were reviewed during the onsite audit.</p>	

115.67(d)

The PCM indicated that during his reviews for retaliation, he conducts periodic checks with the inmate and asks the inmate if they feel comfortable and if there has been any behavioral changes noted since the last review such as disciplinary write-ups, housing changes, removal from worker status.

115.67(e)

The Agency Head's designee and Warden both indicated advised that if other individuals cooperate with an investigation and express a fear of retaliation, the agency will work with that individual to move them away from the perpetrator and disciplinary sanctions may be imposed to the abuser.

115.67(f)

The auditor is not required to audit this provision.

Interviews and review of documentation provided; the facility meets all components associated with §115.67.

<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment</li> <li>2) SDDOC Policy 4.3.D.1 Protective Custody</li> <li>3) Facility Completed Pre-Audit Questionnaire (PAQ)</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Warden</li> <li>2) Staff Who Supervise Inmates in Segregated Housing</li> <li>3) Inmates in Segregated Housing for Risk of Sexual Victimization (Protocol not utilized due to no inmates identified by the facility for this targeted protocol)</li> </ol> <p>115.68(a)</p> <p>Page 10 of policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment states, “3. Reaction to Incidents: A. Protective Custody, 1. Inmates determined to be at high risk of sexual victimization through completion of PREA assessment or those who are alleged to have suffered from sexual abuse in the facility will not be placed in involuntary protective custody, unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. Such placement shall be temporary until suitable housing can be identified. If an assessment cannot be conducted immediately, the inmate may be held in involuntary protective custody for a period not to exceed twenty-four (24) hours while the assessment is completed... 5. At a minimum, staff shall afford each inmate on involuntary protective custody a status review every thirty (30) days. The purpose of the review is to determine whether there is a continuing need for the inmate’s separation from the general population and to verify no other less restrictive housing options can be identified.”</p> <p>The facility reports that there have been no inmates who have alleged to have suffered sexual abuse who were held in involuntary segregated housing in the past twelve months.</p> <p>Interviews with the Warden and staff who supervise inmates in the SMU acknowledges that policy prohibits placing an inmate at high risk for sexual victimization or who has alleged sexual abuse in involuntary segregated housing in lieu of other housing areas unless an assessment has determined there are no available alternative options. The Warden indicated that he was unaware of any instances in the past twelve months in which an inmate was placed into involuntary housing for protective custody.</p> <p>The staff members interviewed advised that if the facility did restrict access to out of cell opportunities, the facility would document why the activity was limited, the duration of the limitations, and the reasons for the limits imposed.</p> <p>Interviews and review of documentation provided; the facility meets all components associated with §115.68.</p>

115.71	<b>Criminal and administrative agency investigations</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment</li> <li>2) Completed Investigative Files for Sexual Abuse and Sexual Harassment</li> <li>3) Investigative Staff Training Files</li> <li>4) Facility Completed Pre-Audit Questionnaire (PAQ)</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Investigative Staff</li> <li>2) Warden</li> <li>3) PREA Coordinator</li> <li>4) PREA Compliance Manager</li> </ol> <p>115.71(a)</p> <p>SDDOC PREA Investigation Policy, page 3 of policy states, "A. Staff Duties, 1. Complaints or information provided to staff describing risk of sexual abuse of an inmate or information that an inmate is the victim of sexual abuse while in the DOC facility requires prompt action by the staff member receiving the complaint or information." Page 7 of policy states, "A. Allegations, 1. All allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, will be promptly, thoroughly, and objectively investigated by designated staff, including but not limited to SIU staff."</p> <p>Investigative files were reviewed determined that investigations were began promptly after learning of an abuse or harassment, thoroughly to include interviews and review of camera footage if available, and objectively by investigative staff members. Of the investigative files reviewed, some were found to be the result of a third-party report (other inmate reported the abuse, family member reported abuse to the facility, etc.). No reports reviewed by the audit team were found to have been reported anonymously.</p> <p>An interview was conducted with a member of the Special Investigations Unit (SIU) revealed that investigations into a PREA allegations are done promptly, thoroughly, and objectively to include third party and anonymous reports.</p> <p>115.71(b)</p> <p>Training files of SIU staff members found certificates for courses to include National Institute of Corrections (NIC) – Sexual Abuse Investigations in Confinement Settings.</p> <p>The SIU investigator verified he had received online training through NIC prior to conducting any investigations. The SIU investigator indicated his training class included, but not limited to, how to conduct interviews, proper report writing, techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, sexual abuse evidence collection, and the criteria and evidence required to substantiate a case for administrative or prosecution referral.</p> <p>115.71(c)</p> <p>The SIU investigator confirmed that the investigative protocol includes, but not limited to, collect any type of physical evidence that is still present before contamination, start interviews with the alleged victim/witnesses/alleged abuser if one is identified, contact the officer-in-charge for an initial briefing on the incident, and review any documentation that has been gathered. The evidence collected would include any physical evidence such as clothing, sheets, towels, and sexual assault kits for possible DNA evidence. Electronic evidence would consist of video camera footage, phone calls, requests, and text messages, and review any prior complaints of reported sexual abuse involving the suspected perpetrator if any were made.</p>	

Reviewed investigative files contained all appropriate documentation of evidence found to include video footage.

115.71(d)

The SIU investigator indicated if evidence supported a prosecutable crime may have occurred, the investigation is turned over to Division of Criminal Investigations (the state agency responsible for criminal investigations for SDDOC).

One case file was provided to the audit team of a staff member that had committed a sexual abuse against an inmate and was criminally charged and convicted. The case file was provided to the audit team member for review.

115.71(e)

The facility staff acknowledged that they assess the credibility of a witness on an individual basis is not determined by the person's status as an inmate or staff. In addition, inmates alleging sexual abuse will not be required to submit to a polygraph examination.

115.71(f)

The SIU investigator stated that administrative investigation includes his efforts to determine if staff actions or failure to act contributed to the sexual abuse. All administrative investigations are 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

115.71(g)

The Warden verified that all criminal investigations are conducted by the Division of Criminal Investigations (the state agency responsible for criminal investigations for SDDOC). The investigative report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

115.71(h)

SDDOC policy 1.3.E.6 states on page 8, "C. Administrative Investigations, 4. The Special Investigations Unit will refer incidents involving possible criminal violations to the DCI."

The facility reported no substantiated allegations of conduct that appears to be criminal were referred for prosecution in the past twelve months. One case file was provided to the audit team that occurred March of 2021, in which a staff member had committed sexual abuse against an inmate and was criminally charged and convicted. The case file was reviewed by the audit team.

The SIU investigator indicated that if an allegation appeared to be criminal in nature, he would refer the case to DCI where they would make the final determination if the case should be referred for prosecution.

115.71(i)

SDDOC policy 1.3.E.6 states on page 9, "7. SIU will ensure any written reports/files or evidence under its control and authority is kept in a secure location and not accessible to unauthorized persons. Reports/files and evidence related to sexual abuse incidents shall be retained for as long as the alleged abuser is incarcerated. If the incident involves a staff member, the report/file shall be retained for as long as the staff member is employed by the DOC, plus five years."

115.71(j)

SDDOC policy 1.3.E.6 states on page 9, "The departure of the abuser or victim from employment or custody will not be used as the basis for terminating an active investigation into a sexual abuse incident."

The SIU investigator revealed that investigations would not cease if a staff member alleged to have committed sexual abuse terminates employment prior to a completed investigation. The SIU investigator also indicated that he would work with parole officers to keep in contact with the alleged victim or abuser if more information was needed.

115.71(k)

The auditor is not required to audit this provision.

115.71(l)

Interviews were conducted the Warden, PREA Coordinator, and PREA Compliance Manager, and a SIU investigator indicated that would cooperate with outside investigators and endeavor to remain informed about the progress of the investigation. The SIU investigator also indicated that he would provide DCI with all of his case files and any evidence that had been collected. He would work with DCI with any interviews that they needed to conduct inside of the facility as well as provide any camera footage, messages, and phone calls that DCI may request.

Interviews and review of documentation provided; the facility meets all components associated with §115.71.

115.72	<p><b>Evidentiary standard for administrative investigations</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment</li> <li>2) Investigative Files</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Investigative Staff</li> </ol> <p>115.72(a)</p> <p>SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment was reviewed and addresses the requirement of this standard. Page 8 of policy is found to state, "C. Administrative Investigations, 3. SIU will impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated."</p> <p>A review of selected investigative files found that the evidence standard stated in policy was utilized in the cases reviewed.</p> <p>The SIU investigator indicated that the standard of evidence that he requires to substantiate an allegation of sexual abuse or sexual harassment is the preponderance of evidence, or 51%.</p> <p>Interviews and review of documentation provided; the facility meets all components associated with §115.72.</p>
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115.73	<b>Reporting to inmates</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment</li> <li>2) Sample of Notice of PREA Investigation Determination</li> <li>3) Completed Investigative Files of Sexual Abuse and Sexual Harassment by SIU</li> <li>4) Completed Investigative File of Sexual Abuse from DCI</li> <li>5) Facility Completed Pre-Audit Questionnaire (PAQ)</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Warden</li> <li>2) Investigative Staff</li> <li>3) Inmates Who Reported a Sexual Abuse</li> </ol> <p>115.73(a)</p> <p>SDDOC policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment was reviewed and addresses the requirement of this standard. Review of the policy was conducted by the audit team and found to state on page 10, "B. Reporting to Inmates, 1. Following an investigation into an inmate's allegation he/she suffered sexual abuse or sexual harassment in a DOC facility, SIU staff or staff designated by the Warden, will inform the inmate as to the results of the investigation into the allegation. Information shared with the inmate shall not jeopardize the legitimate penological interests of the DOC. a. Sexual abuse and sexual harassment victim notifications shall be documented in the PREA investigation packet and scanned into COMS under the Offenses in custody:/ scanned PREA information. b. In addition, sexual abuse victim notifications shall also include a written notice to the alleged victim (See Attachment 6: Notice of PREA Investigation Determination form)."</p> <p>The facility reported that there were ten criminal and/or administrative investigations of alleged inmate sexual abuse completed within the previous twelve months. Of the ten, all alleged victims were notified at the conclusion of the investigation which was documented in the file showing the disposition of the investigation (substantiated, unsubstantiated, or unfounded). Inmates acknowledge by signature that received the notice of disposition.</p> <p>115.73(b)</p> <p>An investigations completed by DCI, are returned to the facility with the disposition and a notice of disposition is provided to the inmate, if required.</p> <p>115.73(c)</p> <p>Page 11 of SDDOC policy 1.3.E.6 is found to state, "3. If the incident involves a staff member committing sexual abuse against an inmate, staff will inform the inmate whenever: a. The staff member is no longer assigned to a post in the inmate's unit. b. The staff member is no longer employed at the facility where the inmate is housed. c. The staff member has been indicted on a charge related to sexual abuse within the facility. d. The staff member has been convicted of a charge related to sexual abuse within the facility." Reviews were conducted of staff-on-inmate sexual abuse investigative files and found to contain the written notifications to inmates the disposition of the incident (substantiated, unsubstantiated, or unfounded). The forms found in substantiated case files state "Staff will contact you with additional information about the case and to follow-up on how you are doing."</p> <p>The facility acknowledged that a staff member that was found to violate the inmates in any way that violated the PREA, the</p>	



inmate is notified that the employee was removed and prosecuted, as appropriate.

115.73(d)

Policy 1.3.E.6 was found to state on page 10, "B. Reporting to Inmates, 1. Following an investigation into an inmate's allegation he/she suffered sexual abuse or sexual harassment in a DOC facility, SIU staff or staff designated by the Warden, will inform the inmate as to the results of the investigation into the allegation. Information shared with the inmate shall not jeopardize the legitimate penological interests of the DOC. a. Sexual abuse and sexual harassment victim notifications shall be documented in the PREA investigation packet and scanned into COMS under the Offenses in custody:/ scanned PREA information. b. In addition, sexual abuse victim notifications shall also include a written notice to the alleged victim (See Attachment 6: Notice of PREA Investigation Determination form)."

The facility reported that SDDOC did not have any staff that were prosecuted in last 12 months.

115.73(e)

Policy 1.3.E.6 was found to state on page 10, "a. Sexual abuse and sexual harassment victim notifications shall be documented in the PREA investigation packet and scanned into COMS under the Offenses in custody:/ scanned PREA information. b. In addition, sexual abuse victim notifications shall also include a written notice to the alleged victim (See Attachment 6: Notice of PREA Investigation Determination form)."

The facility reported eighty-two inmate notifications had been made in the past twelve months as to the disposition of their alleged sexual abuse or sexual harassment. A spreadsheet of all sexual abuse and sexual harassment cases for the past twelve months audit and found to have eighty-five cases on the spreadsheet.

115.73(f)

The auditor is not required to audit this provision.

Staff Interviews and review of documentation provided; the facility meets all components associated with §115.73.

Recommendations:>

- 115.73(c) – Inmate notification forms should be updated to include the outcome of the staff abuser as to this provision compared to the notation on the form "Staff will contact you with additional information about the case...".

<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
Documents Reviewed:	
<ol style="list-style-type: none"> <li>1) SDDOC Policy 1.1.C.1 Staff Code of Ethics</li> <li>2) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment</li> <li>3) Facility Completed Pre-Audit Questionnaire (PAQ)</li> <li>4) Completed Investigative Files</li> </ol>	
Interview Protocol Utilized:	
1) None Utilized	
115.76(a)	
<p>SDDOC policy 1.1.C.1 was reviewed and addresses the requirement of this standard. The audit team found on page 4 that, "C. 1. Any sexual abuse or sexual harassment involving a DOC staff member and an offender is expressly forbidden and a violation of DOC policy. Additionally, sexual abuse involving a staff member and offender may constitute a violation of state law (See Section F. of this policy)." Page 13 of SDDOC policy 1.3.E.6 states that, "2. Staff who commit sexual abuse of sexual harassment may be considered to be in violation of DOC policy 1.1.C.10 Staff Anti- Harassment and Discrimination Policy, DOC policy 1.1.C.1 Staff Code of Ethics and DOC policy 1.1.C.2 Staff Supervision of Offenders, in addition to other applicable state statutes and policies (BHR Handbook), and may be subject to disciplinary action, up to and including termination of employment. a. Termination shall be presumptive disciplinary sanction for staff found to have engaged in sexual abuse of an inmate or engaged in sexual contact with an inmate."</p>	
115.76(b)	
<p>SDDOC policy 1.3.E.6 says on page 13, "a. Termination shall be presumptive disciplinary sanction for staff found to have engaged in sexual abuse of an inmate or engaged in sexual contact with an inmate."</p>	
<p>There were four contract staff members have been terminated or resigned prior to termination for staff misconduct involving an inmate.</p>	
115.76(c)	
<p>SDDOC policy 1.3.E.6 page 13, "3. Disciplinary sanctions for persons violating DOC policies relating to sexual abuse or sexual harassment (other than actual engaging in sexual abuse), shall be commensurate with the nature and circumstances of the acts committed, the person's disciplinary history, and the sanctions imposed for comparable offenses by others with similar histories."</p>	
<p>The facility reported that six staff members have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies.</p>	
<p>Discussion with the PREA Coordinator revealed that disciplined ranged from written reprimands up to disciplinary suspension without pay.</p>	
115.76(d)	
<p>SDDOC policy 1.3.E.6 page 13 was found to say, "4. All terminations for violation or resignation in lieu of termination for committing sexual abuse of an inmate or having sexual contact with an inmate shall be reported to DCI and to any relevant licensing bodies, unless the activity is determined not to be criminal."</p>	

While the facility reported that no staff members from the facility have been reported to law enforcement or licensing boards following their termination for violating agency sexual abuse or sexual harassment policies in the previous twelve months, an internet search and through interviews revealed that one security staff, who had been criminally charged from an incident as SDSP in March of 2021. A review of investigative file found that a staff member had perpetrated sexual abuse against an inmate, was terminated from employment at the facility and criminally charged. The staff was sentenced to jail time for this incident.

Interviews and review of documentation provided; the facility meets all components associated with §115.76.

115.77	<b>Corrective action for contractors and volunteers</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment</li> <li>2) SDDOC Policy 1.1.C.1 Staff Code of Ethics</li> <li>3) SDDOC Policy 1.1.C.13 Screening of Staff, Volunteers and Contractors for Prior Sexual Abuse</li> <li>4) Facility Completed Pre-Audit Questionnaire (PAQ)</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Warden</li> </ol> <p>115.77(a)</p> <p>SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment was reviewed and addresses the requirement of this standard. Page 13 of policy states, "E. Disciplinary Sanctions for Staff, Volunteers or Contractors, 2. Staff who commit sexual abuse or sexual harassment may be considered to be in violation of DOC policy 1.1.C.10 Staff Anti-Harassment and Discrimination Policy, DOC policy 1.1.C.1 Staff Code of Ethics and DOC policy 1.1.C.2 Staff Supervision of Offenders, in addition to other applicable state statutes and policies (BHR handbook), and may be subject to disciplinary action, up to and including termination or employment. a.</p> <p>Termination shall be the presumptive disciplinary sanction for staff found to have engaged in sexual abuse of an inmate or engaged in sexual contact with an inmate. 3. Disciplinary sanctions for persons violating DOC policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse), shall be commensurate with the nature and circumstances of the acts committed, the person's disciplinary history, and the sanctions imposed for comparable offenses by others with similar histories. 4. All terminations for violations or resignation in lieu of termination for committing sexual abuse of an inmate or having sexual contact with an inmate shall be reported to DCI and to any relevant licensing bodies, unless the activity is determined not to be criminal." Page 3 of policy 1.3.E.6 defines staff member as "For the purposes of this policy, a staff member is any person employed by the DOC, full or part time, including an individual under contract assigned to the DOC, an employee of another State agency assigned to the DOC, authorized volunteers and student interns."</p> <p>The facility reports that in the past twelve (12) months there have been no contractors or volunteers reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.</p> <p>115.77(b)</p> <p>SDDOC policy 1.3.E.6 states "3. Disciplinary sanctions for persons violating DOC policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse), shall be commensurate with the nature and circumstances of the acts committed, the person's disciplinary history, and the sanctions imposed for comparable offenses by others with similar histories."</p> <p>The Warden indicated that in the case of any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, the contractor or volunteers' access would be controlled and would be handled on a case by case basis and the remedial measures, and consider whether to prohibit further contact with inmates.</p> <p>Interviews and review of documentation provided; the facility meets all components associated with §115.77.</p>

115.78	<b>Disciplinary sanctions for inmates</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment</li> <li>2) SDDOC Policy 1.3.C.2 Inmate Discipline System</li> <li>3) Inmate Living Guide</li> <li>4) Disciplinary Report from Incident</li> <li>5) Facility Completed Pre-Audit Questionnaire (PAQ)</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Warden</li> <li>2) Medical and Mental Health Staff</li> </ol> <p>115.78(a)</p> <p>SDDOC policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment was reviewed and addresses the requirement of this standard. Policy was stated on page 12, "D. Disciplinary Sanctions for Inmates, 1. Inmates found guilty through an administrative findings or engaging in inmate-on-inmate sexual abuse or engaging in a consensual act are subject to disciplinary sanctions, pursuant to DOC policy 1.3.C.2 Inmate Discipline System...". SDDOC policy 1.3.C.2 Inmate Discipline System was also reviewed during the pre-onsite phase stated on page 11, "7. Disciplinary Sanctions: A. When it is determined by the UDC or DHO, upon preponderance of the evidence, that some evidence exists to support a finding the inmate is guilty of committing an offense in custody, the UDC or DHO may impose a sanction...The finding of guilt must be documented by a written statement by the DHO on the report and a copy provided to the inmate. The reasons must point out the essential fact upon which the inferences were based, including what evidence or summary reference to the evidence which was relied upon to reach the decision...The DHO may suspend the execution of any sanction, or a portion of the sanction...".</p> <p>The facility reported that six administrative investigations were conducted for inmate-on-inmate sexual abuse at the facility within the past twelve months. Of the six, two were for inmate-on-inmate touching (one unsubstantiated and one substantiated), and four were inmate-on-inmate penetration (all of which were deemed unsubstantiated).</p> <p>There have been no criminal findings of guilt of inmate-on-inmate sexual abuse occurring at the facility within the past twelve months.</p> <p>115.78(b)</p> <p>Policy 1.3 E.6, page 12, "2. Sanctions will be commensurate with the nature and circumstances of the violation committee, the inmate's disciplinary history, and sanctions imposed for comparable offenses committed by inmates with similar histories."</p> <p>The Warden indicated that in-house disciplinary sanctions are imposed on inmates who are found to violate an administrative or criminal finding that they perpetrated an inmate-on-inmate sexual abuse. The Disciplinary Hearing Officer may impose sanctions including confinement in disciplinary housing units and the sanctions are proportionate to the nature and circumstances of the abuses committed, the inmate's disciplinary history, and the sanctions imposed for similar offenses by other inmates with similar histories.</p> <p>115.78(c)</p> <p>Policy 1.3.E.6 states on page 12 that, "3. The Disciplinary Hearing Officer or Unit Disciplinary Committee will consider</p>	

whether an inmate's mental disabilities or mental illness may have contributed to his/her behavior, and if so, consult with Behavioral Health Services about an appropriate response."

The Warden indicated that an inmate's mental disability or mental illness will be considered when determining any sanctions. Behavioral Health Services would be consulted prior to issuing any disciplinary sanctions to the alleged abuser.

115.78(d)

Facility policy 1.3.E.6 page 6 to state, "h. As deemed appropriate by Sex Offender Management Program staff, a mental health evaluation will be offered to all known inmate-on-inmate abusers within 60 days of staff learning of such abuse. Programming and treatment may be offered, depending on the inmate's release date..."

Medical and Mental Health staff indicated that services are available and are coordinated through the Sex Offender Management Program. The alleged abuser would be referred to mental health at the direction of the Sex Offender Management Program and therapy, services, and other intervention would be based of the alleged abuser's needs as determined by mental health. Medical and mental health staff advised during their interviews that the alleged abuser's participation is not a condition for accessing other programming or benefits.

115.78(e)

There are sanctions for inmates was disciplined for sexual contact with staff only upon a finding that the staff member did not consent to such contact

115.78(f)

SDDOC policy 1.3.E.6 was found to state on page 12, "5. For the purpose of disciplinary action, a report of sexual abuse made in good faith by an inmate which is based upon a reasonable belief the alleged conduct occurred, shall not constitute false reporting of an incident and shall not result in the inmate being charged with Offense in Custody L-42."

115.78(g)

The Inmate Living Guide (Inmate Handbook) describes in detail that 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.

Interviews and review of documentation provided; the facility meets all components associated with §115.78.

115.81	<b>Medical and mental health screenings; history of sexual abuse</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Area of Facility Toured:</p> <ol style="list-style-type: none"> <li>1) Medical Section</li> <li>2) Medical Records</li> </ol> <p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</li> <li>2) SDDOC Policy 1.4.B.16 PREA Institutional Risk Screens</li> <li>3) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment</li> <li>4) SDDOC Policy 1.4.E.1 Inmate Health Care Services</li> <li>5) SD Department of Health Correctional Health Services Policy P-G-04 Therapeutic Relationship, Forensic Information and Disciplinary Actions</li> <li>6) SD Department of Health Correctional Health Services Policy P-F-06 Response to Sexual Abuse</li> <li>7) SD Department of Health Correctional Health Services Policy P-G-05 Informed Consent and Right to Refuse</li> <li>8) Mental Health Referral Logs</li> <li>9) Sex Offender Management Program (SOMP) List Referral</li> <li>10) Facility Completed Pre-Audit Questionnaire (PAQ)</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Inmates Who Disclosed Sexual Victimization at Risk Screening</li> <li>2) Staff Responsible for Risk Screenings</li> <li>3) Medical and Mental Health Staff</li> </ol>	
<p>115.81(a)</p> <p>SDDOC policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards was reviewed and addresses the requirement of this standard. The audit team found on page 10, "E. Medical and Behavioral Health. 1. If the PREA risk screen administered at the time of the inmates' admission indicates the inmate has either previously perpetrated sexual abuse, or has been the victim of sexual abuse, either in an institutional setting or the community, staff will ensure the inmate is offered a follow-up meeting with Behavior Health staff within 14 days of the screening. The inmate may be referred for a sexual behavior issue assessment." Policy 1.4.B.16 was also provided to the audit team and found to have on page 3, "F. Medical / Mental Health referral. 1. IF the screening indicates as inmate has previously perpetrated sexual abuse, whether this occurred in an institutional setting or in the community, staff will ensure the inmate is offered a follow-up meeting with Sex Offender Management Program (SOMP) staff within 14 days of the intake screening. 2. If the intake screening indicates an inmate has experienced prior sexual victimization, whether this occurred in an institutional setting or in the community, staff will ensure the inmate is offered a follow-up meeting with medical or behavioral health staff within 14 days of the intake screening."</p> <p>The facility reported that one hundred percent (100%) of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. A review of logs showed referrals of inmates to both medical and mental health along with the Sex Offender Management Program (SOMP) who is responsible for enrolling inmates in programs who have perpetrated sexual abuse at a facility or in the community. SOMP lists contained same format as medical and mental health with documentation of inmates who had been referred for their services.</p>	

Interviews with two staff members who are responsible for conducting risk screenings indicated that an inmate who experienced prior sexual victimization, a follow-up meeting with medical and mental health are offered. The facility identified an inmate who had reported sexual abuse during the time of his screening, and he indicated that he was offered a chance to meet with medical and mental health within a couple of days after reporting. The inmate advised that he still currently sees mental health and has been prescribed medication for his mental health issues.

115.81(b)

Policy 1.4.B.16 was provided to the audit team and found to have on page 3, "F. Medical / Mental Health referral. 1. If the screening indicates as inmate has previously perpetrated sexual abuse, whether this occurred in an institutional setting or in the community, staff will ensure the inmate is offered a follow-up meeting with Sex Offender Management Program (SOMP) staff within 14 days of the intake screening. 2. If the intake screening indicates an inmate has experienced prior sexual victimization, whether this occurred in an institutional setting or in the community, staff will ensure the inmate is offered a follow-up meeting with medical or behavioral health staff within 14 days of the intake screening." SOMP referral lists were provided to the audit team for review in correlation with this provision.

Staff members responsible for conducting risk assessments indicated that if a screening indicates that an inmate previously perpetrated sexual abuse, a follow-up meeting is offered with mental health practitioner. An inmate who admits to previously perpetrated sexual abuse would be referred to SOMP who would then refer the inmate mental health and other programs provided by SOMP.

115.81(c)

This provision is non-applicable as SDSP is a male department of corrections prison facility.

115.81(d)

SDDOC policy on page 9, "9. The sharing of confidential information pertaining to a sexual abuse incident shall be limited to those who must know. Sharing information regarding the victim or incidents shall be conducted in a manner that is in accordance with all applicable policies, statutes, regarding confidentiality, victim rights, and professional licensure and ethics standards."

The medical units in the facility were toured and office computers were turned away from doorways in order to obscure the line of site from those entering or walking by from seeing any electronic files. Paper medical files were observed to be stored in a chain link caged area with a padlock sealing access from non-medical staff. Medical staff were observed during the tour entering the medical file room utilizing their key.

115.81(e)

Correctional Health Services Policy P-G-05 Page 2 states, "C. Consent Form: 1. Before a procedure is started, and after a procedure has been fully explained to the inmate, the inmate will be required to sign the Procedural Consent Form. 2. Additionally, a witness is required to sign the form. The Procedural Consent Form will be placed in the inmate's medical record."

Medical and mental health staff indicated that an informed consent is always received from inmates before reporting about prior sexual victimization that did not occur in an institutional setting. The informed consent forms were on file in the records reviewed. Medical and mental health staff advised that inmate under the age of eighteen (18) are not held at SDSP.

Interviews and review of documentation provided; the facility meets all components associated with §115.81.



115.82	<b>Access to emergency medical and mental health services</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>Documents Reviewed:</p>	
<ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment</li> <li>2) SD Department of Health Correctional Health Services Policy P-G-04 Therapeutic Relationship, Forensic Information and Disciplinary Actions</li> <li>3) SD Department of Health Correctional Health Services Policy P-F-06 Response to Sexual Abuse</li> <li>4) SD Department of Health Correctional Health Services Policy P-G-05 Informed Consent and Right to Refuse</li> <li>5) Completed Investigative Files of Sexual Abuse Allegations</li> </ol>	
<p>Interview Protocol Utilized:</p>	
<ol style="list-style-type: none"> <li>1) Medical and Mental Health Staff</li> <li>2) Inmates Who Reported a Sexual Abuse</li> <li>3) Security Staff and Non-Security Staff First Responders</li> </ol>	
<p>115.82(a)</p>	
<p>SDDOC policy 1.3.E.6 was reviewed by the audit team and found to have stated on page 5, "B. Medical Response, 1. Health Service response. a. Victims of sexual abuse will receive timely, unimpeded access to medical treatment and crisis intervention services; the nature and scope of which shall be determined by Health Services and Behavioral Health Services staff, consistent with professional judgement and best practices..."</p>	
<p>Two medical staff interviewed indicated that if an inmate alleges a sexual abuse, the alleged victim receives timely unimpeded access to emergency medical treatment and crisis intervention services. This normally done within one hour of being notified of the alleged abuse. The nature and scope of these services are based on the patient reports and the staff observing signs and symptoms during the initial medical exam for emergent injuries.</p>	
<p>115.82(b)</p>	
<p>Two security staff were interviewed who indicated that they were trained in the PREA protocols on how to respond to incidents of alleged sexual abuse or sexual harassment. They would separate the victim from the alleged abuser, if they were still in the area; instruct the victim not to destroy any physical evidence by brushing his/her teeth, bathing, or toileting until instructed otherwise by medical or investigative staff; and contact their officer-in-charge so that the OIC may contact medical staff and investigative staff to the incident. One staff member advised that he has acted as a first responder to an allegation of sexual abuse to which he completed the listed items above and documented all of his actions in a report and on an Officer in Charge Checklist.</p>	
<p>Investigative files included Officer-in- Charge Checklist forms which contained information is a checklist format to ensure all information is gathered.</p>	
<p>115.82(c)</p>	
<p>South Dakota Department of Health Correctional Health Services Policy P-F-06 Response to Sexual Abuse was also provided to the audit team and found to state on page 2, "E. Prophylactic treatment and follow-up care for sexually transmitted or other communicable diseases (e.g., HIV, hepatitis B) is offered to all victims, as appropriate."</p>	
<p>Two medical staff indicated that inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.</p>	

115.82(d)

Policy 1.3.E.6 was reviewed by the audit team and found to have stated on page 5, "3. Responsive services will be provided without financial cost (including medical co-payment) to the victim (See DOC policy 1.4.E.10 Medical Services Copayments). If convicted or upon entering a plea of guilt, the inmate abuser may be assessed the cost of the victim's medical examination, as set by the physician, hospital, clinic or Health Services."

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. This was confirmed by staff interviews.

Interviews and review of documentation provided; the facility meets all components associated with §115.82.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Documents Reviewed:
	1) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment
	Interview Protocol Utilized:
	1) Medical and Mental Health Staff
	2) Inmates Who Reported a Sexual Abuse
	115.83(a)
	SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment was reviewed and addresses the requirement of this standard. The policy was found to say on page 6, "4. a. Health Services and Behavioral Health Services will offer evaluation, testing, and treatment as determined appropriate to inmates in DOC custody who are victims of sexual abuse while in any DOC facility, jail, contract facility or juvenile facility. b. The evaluation, testing, and treatment of victims will include as appropriate, follow-up services, treatment plans, and when necessary, referrals for continued care following transfer to, or placement at other facilities."
	115.83(b)
	SDDO policy 1.3.E.6 states on page 6, "b. The evaluation, testing, and treatment of victims will include as appropriate, follow-up services, treatment plans, and when necessary, referrals for continued care following transfer to, or placement at other facilities."
	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 as verified during staff interviews
	115.83(c)
	Staff indicated that medical and mental health services offered are consistent with community level of care. A mental health staff provider added that correctional medical/mental health care is sometimes of a higher standard of care due to the level of access to providers onsite and the availability to twenty-four hour a day, seven day a week access to medical care by inmates, if needed.
	115.83(d)
	SDDOC policy 1.3.E.6 on page 6, policy states, "4. Ongoing Medical Care, d. Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests."
	The SDSP is an all-male facility and this section is non-applicable.
	115.83(e)
	SDDOC policy 1.3.E.6 on page 6, policy states, "If pregnancy results from the sexual abuse, the victim shall receive timely and comprehensive information about available medical services and access to all lawful and licensed pregnancy medical services."
	The SDSP is an all-male facility and this section is non-applicable.

115.83(f)

Policy 1.3.E.6 page 6, "4. Ongoing Medical Care, f. Victims of sexual abuse will be offered tests for sexually transmitted infections/disease (STDs) as deemed medically appropriate, and in accordance with state statutes regarding the rights of victims and alleged perpetrator (See SDCL §23A-35B-4 and DOC policy 1.4.E.8 Blood- Borne Pathogens and Infectious Disease Management)."

Of the inmates utilizing the targeted protocol, answers were again split between "yes" and "no" if offered tests for sexually transmitted infections. It should be noted that of the four inmates interviewed three reported sexual harassment to the facility and the fourth reported sexual abuse by a staff member revealed to be a pat search conducted by a male staff of a transgender female inmate.

115.83(g)

Page 6 of SDDOC policy 1.3.E.6 states, "g. Treatment services, testing and follow-up care will be provided to victims by Health Services without financial costs to the victims, and regardless of whether the victim names the abuser/perpetrator or cooperates with the investigation arising out of incident."

All of the targeted inmates interviewed for this provision advised that they were not charged for any medical or mental health services associated with their report.

115.83(h)

Page 6 of SDDOC policy states, " As deemed appropriate by Sex Offender Management Program staff, a mental health evaluation will be offered to all known inmate-on-inmate abusers within 60 days of staff learning of such abuse.

Programming and treatment may be offered, depending on the inmate's release date...".

Mental health staff indicated that inmate-on-inmate abusers are required to be sent to the Sex Offender unit to be interviewed by staff. Once the alleged abuser was seen by the Sex Offender unit, the member of the unit would encourage the alleged abuser the usage of mental health staff. Once the referral is received from the Sex Offender unit, an evaluation would be conducted, and mental health staff would discuss any available treatment options.

Interviews and review of documentation provided; the facility meets all components associated with §115.83.

115.86	<b>Sexual abuse incident reviews</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
Documents Reviewed:	
<ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</li> <li>2) SDDOC Policy 1.3.E.6 PREA Response and Investigation of Sexual Abuse and Harassment</li> <li>3) Sample Sexual Incident Review Form</li> <li>4) Completed Sexual Incident Review Forms in Investigative Files</li> <li>5) Facility Completed Pre-Audit Questionnaire (PAQ)</li> <li>6) Facility Reportable Incidents Spreadsheet of Sexual Abuse and Sexual Harassment Reports</li> </ol>	
Incident Protocol Utilized:	
<ol style="list-style-type: none"> <li>1) Warden</li> <li>2) PREA Compliance Manager</li> <li>3) Incident Review Team Member</li> </ol>	
115.86(a)	
<p>SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards was reviewed and addresses the requirement of this standard. Policy was found to state on page 18, "E. A sexual incident review will be completed at the conclusion of all sexual incident investigation where an allegation of inmate sexual abuse concluded in a substantiated or unsubstantiated result"</p>	
<p>The facility reported that in the past twelve months, ten criminal and/or administrative investigations of alleged sexual abuse were completed at the facility, excluding only "unfounded" incidents. A sample Sexual Incident Review Form was reviewed by the audit team.</p>	
115.86(b)	
<p>Completed investigative files reviews revealed that such reviews were conducted within thirty (30) days of the conclusion of the sexual abuse investigation.</p>	
115.86(c)	
<p>Policy 1.3.E.5 page 18, "E. 2. c. The review team will include at a minimum, the facility PREA Coordinator or PREA Compliance Manager (Team Leader), the Warden, designated supervisors, SIU staff and a representative from Behavioral Health Services and Health Services, as appropriate."</p>	
<p>Review of completed Incident Reviews found that the completed form had a section that included the team members present along with their titles. Usually this team consist of the PREA Coordinator, PREA Compliance Managers, Security Supervisor, Investigator(s), Unit/Program Manager, Medical Representative, Mental Health Representative, and Other Staff.</p>	
<p>The Warden indicated that the facility does have an incident review team established. Members of the team include the PREA Coordinator, Mental Health, Medical, the Warden, Associate Warden, SIU, line supervisors, and Classification staff.</p>	
115.86(d)	
<p>Agency policy 1.3.E.5 states on page 18, "E. 3. The review team shall complete the Sexual Incident Review (See Attachment</p>	

4). The review team will consider the following: a. Whether the investigation supports a need to revise or implement policy or practice to better prevent, detect, or respond to sexual abuse incidents (such recommendation must be communicated to the Policy and Compliance Manager); b. Whether the incident or allegation of sexual abuse was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification; status or perceived status; gang affiliation; or motivated or otherwise caused by other group dynamics at the facility; c. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers or obstructed view or lack of supervision and/or video monitoring in the area may enable abuse; d. Assess the adequacy of staffing levels (staffing plan) in the area where the incident occurred and at the time of the incident occurred; e. Assess whether video or other electronic monitoring technology should be deployed or augmented; and f. Prepare a report of findings, including but not limited to, determinations made pursuant to this policy and any recommendations for improvement. The report will be submitted to the Warden and PREA Coordinator. The Warden may forward this report as deemed appropriate.” Review of the completed Incident Reviews that were selected by the audit team revealed that each of the provisions set forth in this section were covered and addressed in the reviews.

The Warden indicated that four provisions set forth in the standard are reviewed in each incident review. The team uses the reviews to discuss if there should have been further action taken by a member during the incident (front line staff, SIU, medical staff, etc.). The team also discusses if any policy changes are warranted. The meetings are documented and forwarded to the Warden.

115.86(e)

Policy 1.3.E.5 is found to state on page 19, “4. The Warden or their designee shall consider the recommendations for improvement and/or document reasons for not implementing the recommendations.”

The Warden indicated that any recommendations from the committee are taken seriously and implemented if appropriate. One example of recommendation that has been implemented are “blind spots” identified in freezers in the kitchen to which cameras were recommended. The cameras were purchased and installed to eliminate the blind spots.

Interviews and review of documentation provided; the facility meets all components associated with §115.86.

115.87	Data collection
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</li> <li>2) South Dakota Department of Corrections 2021 Annual Prison Rape Elimination Act Report</li> <li>3) SDDOC Website – <a href="https://doc.sd.gov/about/PrisonRapeEliminationAct.aspx">https://doc.sd.gov/about/PrisonRapeEliminationAct.aspx</a></li> <li>4) Facility Complete Pre-Audit Questionnaire (PAQ)</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) No Protocols Utilized for this Standard</li> </ol>
	<p>115.87(a)</p> <p>SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards was reviewed and addresses the requirement of this standard. The team found on page 19 of policy, “11. Reporting Incidents: A. The DOC will collect accurate, uniform data for every allegation of sexual abuse or sexual harassment at facilities under its direct control using a standardized instrument and set of definitions. 1. SIU will document the incident investigations. a. The PREA Coordinator will aggregate the incident-based sexual incident data at least annually. b. The incident-based data collected will 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. c. The PREA Coordinator will maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual incident reviews. d. The PREA Coordinator will obtain incident-based and aggregated data from every private facility with which it contacts for the confinement of its inmates. e. Upon request, the PREA Coordinator will provide all such data from the previous calendar year to the Department of Justice no later than June 30.”</p> <p>The South Dakota Department of Corrections 2021 Annual Prison Rape Elimination Act Report is a ten (10) page comprehensive document with statistical data from all facilities. 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.</p>
	<p>115.87(b)</p> <p>SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards was reviewed by the audit team during the pre-onsite phase of the audit. The team found on page 19 of policy, “11. Reporting Incidents: A. The DOC will collect accurate, uniform data for every allegation of sexual abuse or sexual harassment at facilities under its direct control using a standardized instrument and set of definitions. 1. SIU will document the incident investigations. a. The PREA Coordinator will aggregate the incident-based sexual incident data at least annually.” The SDDOC website was found to have several previous years of the aggregated data report prominently placed on the page.</p>
	<p>115.87(c)</p> <p>Page 19 of policy 1.3.E.5 states, “b. The incident-based data collected will 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.”</p> <p>Review of the data report found to have 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.</p>
	<p>115.87(d)</p> <p>On page 19 of policy 1.3.E.5 the audit team found, “c. The PREA Coordinator will maintain, review, and collect data as</p>

needed from all available incident-based documents, including reports, investigation files, and sexual incident reviews.”

This was verified by the review of documentation and an interview with the Agency PREA Coordinator.

115.87(e)

Page 19 of policy 1.3.E.5 is found to contain, “d. The PREA Coordinator will obtain incident-based and aggregated data from every private facility with which it contacts for the confinement of its inmates.”

The facility reports that data from private facilities complies with SSV reporting regarding content.

115.87(f)

The facility reported that the agency has provided the Department of Justice (DOJ) with data from the previous calendar year upon their request.

Interviews and review of documentation provided; the facility meets all components associated with §115.87.



115.88	<b>Data review for corrective action</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) 2017 SDDOC PREA Report</li> <li>2) 2018 SDDOC PREA Report</li> <li>3) 2019 SDDOC PREA Report</li> <li>4) 2020 SDDOC PREA Report</li> <li>5) SDDOC Website - <a href="https://doc.sd.gov/about/grants/prea.aspx">https://doc.sd.gov/about/grants/prea.aspx</a></li> <li>6) SDDOC Policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards</li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) Agency Head or designee</li> <li>2) PREA Coordinator</li> <li>3) PREA Compliance Manager</li> </ol> <p>115.88(a)</p> <p>The audit team reviewed four years worth of data which were published on the agency website which showed comparisons of aggregated data that was collected from each facility within the agency. These data reviews contain a section in the report that details each facility and identifies any problem areas that may have been identified, corrective action that is ongoing or should be taken, and discusses any audits that have been conducted on the facility within the previous calendar year to include any corrective action that was identified.</p> <p>Interviews verified that the command staff for the facility meets monthly to discuss and review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas incidents of sexual abuse and sexual harassment.</p> <p>The PREA Coordinator reviews data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse program. All data collected is stored on an agency intranet with special permissions granted by the agency IT department for those with a "need to know" to be able to review. The PREA Coordinator preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole follows up to ensure that corrective action on any ongoing basis based off of the data collected.</p> <p>115.88(b)</p> <p>Review of the annual reports revealed that the agency includes 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.</p> <p>115.88(c)</p> <p>The audit team was able to easily find and review the report along with reports from previous years. The annual report is approved by the agency head by their signature affixed to the bottom of the last page of the report.</p> <p>The interview with the Agency Head's designee revealed that the Agency Head does review and approve all annual reports written pursuant to this standard.</p>	

115.88(d)

SDDOC policy 1.3.E.5 states on page 19 that, "11. Recording Incidents: B. 3. c. The DOC shall redact personally identifying information from the reports and other information, that if released, presents a clear and specific threat to safety and security (See chapter 1-27).

The agency indicates 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. This was confirmed through the review of documents and staff interviews

Interviews and review of documentation provided; the facility meets all components associated with §115.88.

<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents Reviewed:</p> <ol style="list-style-type: none"> <li>1) SDDOC Policy 1.3.E.5 PREA Compliance with the Prison Rape Elimination Act Standards</li> <li>2) Agency Website - <a href="https://doc.sd.gov/about/PrisonRapeEliminationAct.aspx">https://doc.sd.gov/about/PrisonRapeEliminationAct.aspx</a></li> </ol> <p>Interview Protocol Utilized:</p> <ol style="list-style-type: none"> <li>1) PREA Coordinator</li> </ol> <p>115.89(a)</p> <p>Agency policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards was reviewed and addresses the requirement of this standard. The audit team found notation on page 20, "IV. Procedures: 11. Recording Incidents, C. 3. The DOC will maintain sexual incident data collected for at least ten (10) years after the date of the initial collection."</p> <p>The agency ensures that data collected pursuant to § 115.87 are securely retained. This was verified through interviews with the PREA Coordinator.</p> <p>115.89(b)</p> <p>A review of the agency website was conducted revealed the aggregated data reviews for 2013 through 2021.</p> <p>115.89(c)</p> <p>Agency policy 1.3.E.5 PREA Compliance with Prison Rape Elimination Act Standards Page 20, "IV. Procedures: 11. Recording Incidents, C. 2. Before making aggregated sexual abuse data publicly available, the DOC will remove all personal identifiers in accordance with state laws."</p> <p>The data reviewed by the audit team only included basic information pertaining to incidents happening inside of the facility. No personal information identifiers (PII) were observed in the report. This was verified through an interview with the PREA Coordinator.</p> <p>Interviews and review of documentation provided; the facility meets all components associated with §115.89.</p>

115.401	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

Areas Reviewed During Tour:

- 1) All areas of the facility
- 2) Mail Room

Documents Reviewed:

- 1) Prior PREA Audits for Facility
- 2) Audit Notices
- 3) Agency Website - <https://doc.sd.gov/about/PrisonRapeEliminationAct.aspx>

115.401(a)

The South Dakota State Penitentiary (SDSP) is under the supervision of the South Dakota Department of Corrections. A review of the agency website shows all completed PREA audits for the agency including those conducted on SDSP. Completed audits of SDSP were done in 2016 and 2019.

115.401(b)

SDSP is completing the current audit report in the third year of the three year cycle.

115.401(h)

The audit team conducted a tour of the facility to which included, but not limited to, intake and release area, medical, kitchen area, all housing units, program areas, recreation areas, holding cells, and administrative offices.

115.401(i)

During all three phases of the audit, the audit team requested documentation from the PREA Coordinator. Requested documents were provided to the audit team in a timely manner. The audit team was able to request, observe, and retain all requested documentation.

115.401(m)

All interviews were conducted with inmates housed at SDSP were conducted using various offices or conference rooms. The audit team were allowed full use of the rooms and was provided tables and chairs to conduct the interview with inmates. The rooms provided were secluded from normal staff viewing and provided a door which was allowed to stay closed during interviews to afford additional privacy for inmate interviews.

115.401(n)

During the pre-onsite phase of the audit, an audit notice was provided to the facility with the auditors mailing information in both English and Spanish. Audit notices were observed in general areas of the facility along with each of the housing areas. An interview with the Mail Room Supervisor revealed that any and all mailing pertaining to this audit were treated as privileged mail by staff. Prior to the audit, three (3) letters were received from inmates housed at SDSP. During the post onsite phase, one (1) letter was received from the facility.

Interviews and review of documentation provided; the facility meets all components associated with h §115.401.

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documentation Reviewed:</p> <p>1) Agency Website</p> <p>115.405(f)</p> <p>A review of the agency website was conducted during both the pre-onsite and post onsite phases of the audit. The agency website is found to be inclusive and informative with PREA information for friends and family members of inmates housed in SDDOC. A review of the website found that all final PREA reports are posted on the webpage. The webpage can be found at <a href="https://doc.sd.gov/about/PrisonRapeEliminationAct.aspx">https://doc.sd.gov/about/PrisonRapeEliminationAct.aspx</a>.</p> <p>Based off of documentation reviewed, the facility meets all components associated with §115.405.</p>

<b>Appendix: Provision Findings</b>		
<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes



<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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

<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes



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

<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
<b>115.42 (a)</b>	<b>Use of screening information</b>	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

<b>115.42 (d)</b>	<b>Use of screening information</b>	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

<b>115.43 (b)</b>	<b>Protective Custody</b>	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
<b>115.43 (c)</b>	<b>Protective Custody</b>	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d)</b>	<b>Protective Custody</b>	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
<b>115.43 (e)</b>	<b>Protective Custody</b>	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
<b>115.51 (a)</b>	<b>Inmate reporting</b>	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

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

<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes



<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	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
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	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
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	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
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes



<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	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

<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	
	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
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	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
<b>115.87 (d)</b>	<b>Data collection</b>	
	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
<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
<b>115.87 (f)</b>	<b>Data collection</b>	
	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

<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	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
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	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
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	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
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	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
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	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

<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	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
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	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