

# PREA Facility Audit Report: Final

**Name of Facility:** Weber County Correctional Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 04/13/2026

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input 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 type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Lori M. Fadorick	<b>Date of Signature:</b> 04/13/2026

AUDITOR INFORMATION	
<b>Auditor name:</b>	Fadorick, Lori
<b>Email:</b>	lfadorick@gmail.com
<b>Start Date of On-Site Audit:</b>	03/03/2026
<b>End Date of On-Site Audit:</b>	03/05/2026

FACILITY INFORMATION	
<b>Facility name:</b>	Weber County Correctional Facility
<b>Facility physical address:</b>	1400 Depot Drive, Ogden, Utah - 84404
<b>Facility mailing address:</b>	

Primary Contact
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<b>Name:</b>	Andrew Flatt
<b>Email Address:</b>	aflatt@webercountyutah.gov
<b>Telephone Number:</b>	7025574658

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Terance Lavelly
<b>Email Address:</b>	tlavelly@webercountyutah.gov
<b>Telephone Number:</b>	8017786707

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	Toni Paine
<b>Email Address:</b>	tpaine@webercountyutah.gov
<b>Telephone Number:</b>	(801) 399-8188

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Monica Lobato
<b>Email Address:</b>	mlobato@webercountyutah.gov
<b>Telephone Number:</b>	0177866999

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	888
<b>Current population of facility:</b>	635
<b>Average daily population for the past 12 months:</b>	720
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>What is the facility's population designation?</b>	Both women/girls and men/boys

<b>Age range of population:</b>	various adult ages
<b>Facility security levels/inmate custody levels:</b>	Minimum, medium and maximum
<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>	235
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	5
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	122

#### AGENCY INFORMATION

<b>Name of agency:</b>	Weber County Sheriff's Office
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	1400 Depot Drive, Ogden, Utah - 84404
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

#### Agency Chief Executive Officer Information:

<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

#### Agency-Wide PREA Coordinator Information

<b>Name:</b>	Andrew Flatt	<b>Email Address:</b>	aflatt@webercountyutah.gov
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## Facility AUDIT FINDINGS

### Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

#### Number of standards exceeded:

1

- 115.13 - Supervision and monitoring

#### Number of standards met:

44

#### Number of standards not met:

0

## POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2026-03-03
2. End date of the onsite portion of the audit:	2026-03-05

#### 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:	Weber County Victim Advocacy

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	888
15. Average daily population for the past 12 months:	720
16. Number of inmate/resident/detainee housing units:	5
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**

<b>23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	658
<b>25. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	1
<b>26. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	1
<b>27. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>28. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>29. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	122
<b>30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>	6

<p><b>31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>1</p>
<p><b>32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>12</p>
<p><b>34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b></p>	<p>The facility has a large population of LEP inmates, but many of them are able to speak enough English that they do not need interpretive services.</p>
<p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>	
<p><b>36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b></p>	<p>192</p>
<p><b>37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>117</p>

<b>38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	31
<b>39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b>	None
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
<b>40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	15
<b>41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>	<input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
<b>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b>	The auditor reviewed roster and selected based upon the above factors. Inmates were randomly selected by choosing inmates from each housing unit, as well as ensuring a representative sample based on race, gender, ethnicity and length of time in the facility.

<b>43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	The auditor was provided a list of inmates, both alphabetical and by housing unit. The auditor selected three inmates from each housing block, including segregation by using a random number generator.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	15
<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>	
<b>47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1

<p><b>49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></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>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).</b></p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates.</p>
<p><b>50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></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>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).</b></p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates.</p>

<p><b>51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>2</p>
<p><b>52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>6</p>
<p><b>53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>1</p>
<p><b>54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></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>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).</b></p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates.</p>

<p><b>55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>6</p>
<p><b>56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></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>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).</b></p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates.</p>
<p><b>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>The auditor was provided a list of inmates in the specialized categories. There was a total of 15 inmates selected, and no inmates refused to be interviewed. The inmates in the specialized categories were selected based upon housing location, length of time in the facility, race and age to ensure a representative sample across the facility.</p>

## Staff, Volunteer, and Contractor Interviews

### Random Staff Interviews

**58. Enter the total number of RANDOM STAFF who were interviewed:**

12

**59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)**

- Length of tenure in the facility
- Shift assignment
- Work assignment
- Rank (or equivalent)
- Other (e.g., gender, race, ethnicity, languages spoken)
- None

**60. Were you able to conduct the minimum number of RANDOM STAFF interviews?**

- Yes
- No

**61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):**

Random staff were selected from all shift assignments and various duty posts throughout the facility, both male and female. There were no barriers to completing the random interviews.

### Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

**62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):**

20

**63. Were you able to interview the Agency Head?**

- Yes
- No

<b>64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>65. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>66. Were you able to interview the PREA Compliance Manager?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" 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)

**67. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)**

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff
- Intake staff

	<input checked="" type="checkbox"/> Other
<b>If "Other," provide additional specialized staff roles interviewed:</b>	Training
<b>68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>	1
<b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	5
<b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

<b>70. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	None
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**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.

<b>71. Did you have access to all areas of the facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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**Was the site review an active, inquiring process that included the following:**

<b>72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<b>73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<b>74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<p><b>75. Informal conversations with staff during the site review (encouraged, not required)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b></p>	<p>The Auditor had full, unimpeded access to all areas of the facility. During the review of the physical plant, the Auditor observed the facility layout, staff supervision of offenders, security rounds, interaction between staff and offenders, shower and toilet areas, placement of PREA posters, observation of availability of PREA information located adjacent to and in the inmate housing areas, observation of communication in general population housing areas, as well as restrictive housing cells, search procedures, and availability and access of medical and mental health services. The Auditor observed and made note of the video monitoring system and camera placement throughout the facility, including reviewing the monitors in the control room.</p>
<p><b>Documentation Sampling</b></p>	
<p>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.</p>	
<p><b>77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

**78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).**

The Auditor conducted a document review of employee and inmate files, and a spot check of documents that were previously provided to the auditor along with the PAQ, including log books and other institutional forms. The Auditor reviewed a random sampling of personnel files to determine compliance related to standards on hiring and promotion and background check procedures for officers and contract staff. The auditor reviewed the annual PREA training rosters maintained by the training staff and cross referenced the staff files with the training rosters to ensure training was verified. The training coordinator explained the process for relaying the mandated PREA information to new hires, as well as the procedure for annual refresher training. Random offender case files were reviewed to evaluate intake procedures, including screening and subsequent housing decisions, and verify offender PREA education. In addition, the intake and receiving procedures were observed and intake screenings are conducted in private. The Auditor requested additional supporting documentation to include: training records, randomly chosen inmate medical records, randomly chosen inmate classification records, volunteer records, contractor records, and staff personnel files including PREA disclosure forms for hiring and promotions. Investigative files for the previous 12 months were reviewed for compliance to applicable standards.

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

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

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual abuse</b>	6	0	6	0
<b>Staff-on-inmate sexual abuse</b>	2	1	1	2
<b>Total</b>	8	1	7	8

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual harassment</b>	2	0	2	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	2	0	2	0

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
<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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	0	0	5	1
<b>Staff-on-inmate sexual abuse</b>	0	1	1	0
<b>Total</b>	0	1	6	1

### Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	2	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	2	0

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

**Sexual Abuse Investigation Files Selected for Review**

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

8

<p><b>86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></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 sexual abuse investigation files)</p>
<p><b>Inmate-on-inmate sexual abuse investigation files</b></p>	
<p><b>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>6</p>
<p><b>88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></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 abuse investigation files)</p>
<p><b>89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></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 abuse investigation files)</p>
<p><b>Staff-on-inmate sexual abuse investigation files</b></p>	
<p><b>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>2</p>
<p><b>91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></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 abuse investigation files)</p>

<p><b>92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></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 abuse investigation files)</p>
<p><b>Sexual Harassment Investigation Files Selected for Review</b></p>	
<p><b>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>2</p>
<p><b>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p><b>Inmate-on-inmate sexual harassment investigation files</b></p>	
<p><b>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>2</p>
<p><b>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" 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>97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></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>

<b>Staff-on-inmate sexual harassment investigation files</b>	
<b>98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	Auditor reviewed the allegations for the audit period.
<b>SUPPORT STAFF INFORMATION</b>	
<b>DOJ-certified PREA Auditors Support Staff</b>	
<b>102. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No

**Non-certified Support Staff**

<p><b>103. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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**AUDITING ARRANGEMENTS AND COMPENSATION**

<p><b>108. Who paid you to conduct this audit?</b></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><b>Identify the name of the third-party auditing entity</b></p>	<p>ACA</p>
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<b>Standards</b>
<p><b>Auditor Overall Determination Definitions</b></p> <ul style="list-style-type: none"> <li>• Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>• Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>• Does Not Meet Standard (requires corrective actions)</li> </ul>
<p><b>Auditor Discussion Instructions</b></p> <p>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.</p>

<b>115.11</b>	<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>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606 PREA</li> <li>3. WCCF Organizational Chart</li> <li>4. PREA Coordinator Job Description</li> <li>5. Interviews with Staff including the following: <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> </ol> </li> <li>6. Interviews with Inmates</li> <li>7. Observations during on-site review</li> </ol> <p>Findings:</p> <p>The Auditor reviewed the Weber County Correctional Facility Policy. The WCCF has a comprehensive PREA policy which clearly mandates a zero-tolerance policy on all forms of sexual abuse and harassment. The language in the policy provides definitions of prohibited behaviors in accordance with the standard and includes</p>

	<p>notice of sanctions for those who have been found to have participated in prohibited behaviors. The definitions contained in the policy are consistent and in compliance with PREA definitions. The policy details the facility’s overall approach to preventing, detecting, and responding to sexual abuse and harassment. The policy provides for employee, volunteer, contractor, inmate worker, and inmate training regarding zero tolerance for sexual abuse and sexual harassment. This policy also informs the staff how to fulfill their responsibilities toward prevention, detection, reporting, and response. The zero-tolerance mandate is clearly communicated to the staff at the facility and this is reflected in the staff interviews.</p> <p>The WCCF has designated an upper-level PREA Coordinator. The PREA Coordinator’s position is a Sergeant. The PREA Coordinator answers to the Administrative Lieutenant, which is part of Command Staff. A review of the organizational chart reflects these positions in the organizational structure. The PREA Coordinator reports that she has sufficient time and by virtue of her position, the authority to develop, implement and oversee the facility’s efforts to comply with PREA standards. The position is a dedicated duty, responsible for all aspects of the PREA program at the facility.</p> <p>There appears to be an open line of communication between all levels of staff at the facility and the PREA Coordinator stated she is involved in the implementation efforts, as well as handling and reviewing individual offender issues and investigations. Interviews with all levels of staff indicated that they were trained in and understood the zero-tolerance policy established by the WCCF. As evidenced by interviews, they understand their role regarding prevention, detection, and response procedures for incidents of sexual misconduct.</p> <p>The WCCF has only one facility, and is not required to designate a PREA Compliance Manager. However, the facility has also designated a PREA Manager position to assist the PREA Coordinator with management of the PREA program at the facility.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. Interviews with Staff including the following: <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> </ol> </li> </ol>

	<p>b. Facility Administrator</p> <p>Findings:  The agency does not contract with other entities for the housing of their inmates therefore the Weber County Correctional Facility does not have any responsibility to enter or maintain contracts for confinement of inmates with other agencies or jurisdictions.  The Weber County Correctional Facility has not entered into any agreement or contract for the confinement of inmates housed at the facility. This was verified by information on the PAQ, as well as interviews with staff.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.13</b>	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Staffing Plan 2026</li> <li>4. Staffing Plan Review</li> <li>5. Supervisory Walk-thru Inspection Reports</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Facility Administrator</li> <li>• Administrative Lieutenant</li> <li>• Random Staff</li> <li>• Supervisors Responsible for Conducting Unannounced Rounds</li> </ul> <p>Observation of the following:</p> <ul style="list-style-type: none"> <li>• Observation of unannounced rounds by supervisors as well as auditors during the site review</li> <li>• Observation of supervisors documenting rounds in the daily logbooks on the duty post during the site review</li> <li>• Observation of camera placement and monitors</li> </ul> <p>Findings:</p> <p>The WCCF has a comprehensive staffing plan that addresses all required elements of</p>

the standard. The staffing plan addresses staffing in each area, staffing ratios, programming, facility layout, composition of the inmate population, video monitoring, and other relevant factors. The Auditor reviewed the WCCF's most current staffing plan for adherence to the standard and found it to be sufficient. The facility staffing is based upon a formula to determine the number of staff needed for essential positions. The formula is based upon the number of beds the facility is rated for and provides for administrative, civilian, and sworn staff in all areas of the jail, and on all shifts.

The WCCF staffing plan states that, "The Jail Commander shall ensure that a staffing plan conforming to the class type and size of this facility is prepared and maintained as described in the following section. The plan should detail all custody personnel assignments, including work hours and weekly schedules, and should account for holidays, vacations, training schedules, and other atypical situations."

At minimum, the staffing plan will include the following:

- Facility administration and supervision
- Facility programs, including exercise and recreation
- Inmate supervision and custody
- Support services including medical, food services, maintenance and clerical
- Other jail-related functions such as escort and transportation of inmates

The auditor reviewed the staffing plan for 2026 and found that the total positions supporting PREA Standards and Compliance are:

1 Chief

5 Lieutenants

10 Sergeants

22 Corporals

117 Deputy Sheriffs

37 Civilians

The jail's staffing plan was created in 2026 in preparation for the facility's PREA Audit. Per the PAQ, the average daily population is 720. Per the staffing plan, the Weber County Correctional Facility has a rated capacity of 888 and an average daily population of 720. The facility is composed of four pods: two contain a total of six housing units each, one contains five housing units, and one contains seven housing units. The housing units consist of either double-occupancy cells or dormitory-style housing. Each unit is two stories and includes an open dayroom equipped with fixed tables with chairs, a television viewing area, telephones, and wall mounted kiosks.

Each pod includes a control room arranged in a horseshoe configuration, allowing for direct observation of the housing areas. Corrections Assistants (civilian staff) are assigned to pod control rooms and maintain a general view of activity within the housing units. They monitor the housing units through direct observation from the control room as well as through camera monitors.

Per the staffing plan, communication between incarcerated persons and the deputies assigned to the unit occurs through oral, written, and electronic means (e.g., request slips, grievances, and tablets). Safety and security within the area are maintained by

corrections deputies conducting thorough, random, and unannounced security checks of the housing areas.

The staffing plan states that, "There shall be, at all times, sufficient staff designated to remain in the facility for the supervision and welfare of inmates, to ensure the implementation and operation of all programs and activities, as required by Minimum Jail Standards, and to respond to emergencies when needed. Such staff must not leave the facility while inmates are present and should not be assigned duties that could conflict with the supervision of inmates."

The auditor reviewed the facility's current staffing plan. In the staffing plan, they have documented that they have considered all the elements from standard 115.13 (a) (1-15) as part of the review. During interviews with several command staff, the auditor verified that the Sheriff, or designee, the Jail Administrator, reviews and approves the annual staffing plan. In addition, the facility considers the use of CCTV and told the auditor that the facility was always looking for ways to upgrade and enhance the camera system and placement within the facility. If there were an instance where the facility did not comply with their staffing plan, that instance would be reported to the command staff. Overtime and/or personnel from support positions would be used to ensure the facility meets minimum staffing requirements for operation. However, according to the PAQ, there were no instances where they were out of compliance with the staffing plan. The Jail Chief stated that they normally did not have any issues ensuring that posts were covered.

During the on-site portion of the audit and review of the on-duty personnel, the auditor found them to be following the staffing plan. The staffing plan provides adequate supervisory coverage in correlation with the inmate and staff compositions. The staffing plan will be discussed throughout the year and changes are necessitated as required.

The staffing plan took into consideration all elements enumerated within PREA Standard §115.13. Additionally, the staffing plan review revealed that all available resources are being utilized to ensure adherence to the staffing plan.

During the on-site review, the auditor reviewed the deployment of CCTV monitoring. The facility has a camera surveillance system comprised of multiple monitors located in the control room. These screens are monitored by staff at all times. The staffing plan indicated the video monitoring system and placement of cameras were reviewed. Per the staffing plan, the facility is equipped with 198 cameras positioned throughout the interior and exterior of the jail. The system does not have sound recording capabilities, except for the Echo-5 door and Pre-booking. Central Control monitors all camera systems, and each housing pod has dedicated cameras assigned to that post to support effective supervision. Programs and Classifications staff also actively monitor areas where educational programs, religious services, and visitation occur. Video surveillance is not used as a substitute for staff supervision; rather, it serves as a valuable tool for investigations, staff accountability, and regulatory compliance. Cameras are not installed in areas where inmates are required to undress, perform bodily functions, or shower. Camera system upgrades are included

in the facility equipment budget each fiscal year.

The staffing plan notates that the staff have identified blind spots within the kitchen refrigeration and freezer units, and in mop closets located throughout the facility. During the auditor's interview with the jail chief, he stated that they had looked at the whole jail to ensure there was line of sight and/or a camera in all areas. He indicated that they had added cameras in the past year and had taken PREA into consideration when placing them. He also stated that they had ordered full windows for all the mop closets.

The staffing plan requires any deviations be documented and justified. Notations and daily deviations from the regular staffing plan are notated on the shift roster by the shift supervisor. The shift supervisor ensures that staffing does not fall below the minimum required. According to the PAQ and verified through staff interviews, there have been no instances of non-compliance with the staffing plan.

The staffing plan appears satisfactory in the agency's efforts to provide protection against sexual abuse and harassment. The Auditor observed cameras in all areas of the facility. There appeared to be open communication between staff and inmates. Inmates seemed to be comfortable approaching staff with questions and Auditor observed formal and informal interactions between staff and inmates.

In the PAQ, the agency reports that they conduct unannounced rounds on all shifts. A review of the WCCF policies indicated that policy requires that supervisors will conduct and document unannounced rounds each shift, and that there is a prohibition against staff altering other staff of the rounds. During the pre-audit phase, the jail provided the auditor a sample of logs with record of unannounced rounds. This documentation sampling verified that unannounced supervisory rounds were conducted during all shifts and documented appropriately. During the on-site portion of the audit, the auditor reviewed logs that verified that unannounced rounds were recorded on the officers' duty posts. It is clear through observation that supervisors and administrators are conducting unannounced rounds. Inmate interviews revealed that the offenders are comfortable approaching and speaking with staff during rounds. Interviews with shift supervisors, facility administrators, as well as line staff and inmates indicate that the rounds are unannounced and random and that there is no way for the staff to alert each other when the supervisors are coming through because there is no pattern or routine to the rounds.

During the site review, the auditor informally spoke with staff and asked about unannounced rounds.

All the staff formally interviewed told the auditor that supervisors came on the duty post and they never knew when they were going to show up.

Based upon the staffing plan, documentation review, observation of camera placement, and interviews with staff, the auditor found that the facility is doing a commendable job in meeting the provisions of the standard, being comprehensive, thorough, and proactive. After a review, the Auditor determined that the facility exceeds the requirements of the standard.

	Corrective Action: None
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<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Review of population report on the day of the audit as well as population reports from the previous 12 months</li> <li>4. Interviews with Staff</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> </ul> <p>Observation of the following:</p> <ul style="list-style-type: none"> <li>• Site Review</li> </ul> <p>Findings:</p> <p>Per the PAQ, the facility does not place youthful inmates in the same housing unit as adults.</p> <p>Per the PAQ, in the past 12 months, the number of youthful inmates placed in SAME HOUSING UNIT as adults at this facility: 0</p> <p>Facility staff confirmed the information in the PAQ.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 513 - Searches</li> </ol>

3. Lesson Plan for Searches
4. Documentation of Training

Interviews with the following:

- PREA Coordinator
- Random Staff
- Medical Staff
- Random Inmates

Observation of the following:

- Observation of inmate housing area with individual showers with modesty curtains
- Observation of CCTV coverage of housing areas and individual protective cells
- Observation of staff announcing the presence of opposite gender staff during site review

Findings:

The WCCF does not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. Agency policy states:

Except in emergencies, all pat-down searches will be conducted by a member of the same gender as the inmate. Absent the availability of a member of the same gender, it is recommended that a witnessing member be present during a Pat-down search of an individual of another gender. All cross-gender pat-down searches shall be documented (28 CFR 115.15).

Per the PAQ, in the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of inmates: 0

Interviews with staff, including medical personnel indicate operational practice is consistent with this policy. The facility reports in the PAQ and verified through staff interviews that no cross-gender strip searches or visual body cavity exams have occurred.

WCCF policy prohibits the pat down search of female inmates by male staff members absent exigent circumstances and any such search shall be documented through an incident report. The facility does not restrict female inmates' access to programming or other out-of-cell opportunities. During the on-site review, the auditor observed female inmate movement in the facility. Female staff are available and on post in the female housing units.

Facility staff confirmed no pat-down searches of female inmates had been performed by male staff to include exigent circumstances during the audit period.

Per the PAQ, the number of pat-down searches of female inmates that were conducted by male staff: 0

The number of pat-down searches of female inmates conducted by male staff that did not involve exigent circumstance(s): 0

WCCF policy states the facility shall document all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat down searches of female inmates. There is not a prohibition against female officers patting down male offenders, however, this does not occur on a regular basis. The facility holds both male and female inmates, but predominately male offenders. In the case where female inmates are detained in the jail, they are searched and supervised by female deputies. The facility administrators ensure there is always at least once female deputy assigned and on duty for each shift. During the regular, daytime hours, there are also daylight female deputies and supervisory staff available if needed. During the evening and nighttime hours, female patrol officers could be utilized in an emergency if needed for searching. Female offenders' access to programming and out of cell opportunities are not limited due to a lack of female staff. Interviews with staff and offenders confirm that there have been no instances of cross-gender strip searches, cross-gender visual body cavity searches, or cross-gender pat down searches of female inmates. During the on-site portion of the audit, logs maintained verified that during the audit period, there were no instances where female inmates were pat searched by male staff.

The WCCF policies prohibit cross-gender strip searches and cross-gender visual body cavity searches except when performed by medical personnel. The facility reports on the PAQ and verified through interviews that no cross-gender strip searches, or cross-gender visual body cavity searches have occurred.

Agency policy states the following:

Unless conducted by a qualified health care professional or in case of an emergency, a modified strip search or strip search shall be conducted by members of the same gender as the person being searched. Any cross-gender modified strip searches and cross-gender strip searches shall be documented (28 CFR 115.15).

Whenever possible, a second member of the same gender should be present during the search for security purposes and to witness the discovery of evidence. Except in exceptional circumstances, the number of members present during a search shall not exceed three.

The member conducting a strip search shall not touch the breasts, buttocks, or genitalia of the person being searched except and only to the extent necessary to safely remove a prohibited item or contraband from the exterior of the person being searched. These areas may be touched through the clothing during a modified strip search.

Inmates are able to shower, change clothes and perform bodily functions without nonmedical staff of the opposite gender viewing their breasts, buttocks or genitalia, except in exigent circumstances or incidental to routine cell checks.

The auditor, during the site review, noted that each housing unit had individual shower stalls with modesty curtains. The toilet areas also had modesty curtains or other modesty shielding. Every housing unit has showers located on both the upper and lower tiers. The showers are equipped with partitions that provide appropriate privacy while still allowing staff to monitor activity and ensure the safety of incarcerated individuals within each unit.

	<p>The auditor also reviewed a sample of CCTV placements in housing area and verified that there was not CCTV coverage of the interior of general population cells where inmates would be changing clothes. A review of CCTV coverage in common areas and individual protective cells revealed that the cameras were pointed away from toilet areas or covered.</p> <p>Interviews with staff and inmates did not indicate viewing of this nature or any issues in this area.</p> <p>The WCCF required that staff of the opposite gender shall announce their presence when entering an inmate housing unit. Deputies can supervise opposite gender housing units. Inmate interviews indicated that there is not an issue with them being able to change clothes, shower or perform bodily functions without officers of the opposite gender seeing them undressed. Despite not all inmates reporting that announcements were made, all the inmates interviewed stated there were no issues with privacy. Staff interviews also indicate the offenders' privacy from being viewed by opposite gender staff is protected. Shower curtains and partitions afford offenders appropriate privacy while still affording staff the ability to appropriately monitor safety and security. Cameras are placed appropriately so that shower and toilet areas are not in view.</p> <p>The facility has signs placed in all housing areas that state that, "This office employs both male and female staff members. Please keep this in mind when conducting your daily activities."</p> <p>The WCCF requires all sworn staff to be trained to conduct proper pat down searches on inmates to include cross-gender searches. During the pre-audit portion of the audit, the auditor reviewed the training presentation that is provided to employees regarding how to conduct cross-gender pat down searches. According to the PAQ, 100% of all employees hired in the last 12 months received the required training. During the on-site document review of employee files, the auditor verified the documents in the employee files provided during the pre-audit phase. Staff indicated that they are trained to do cross-gender searches. The Auditor reviewed the training outline, as well as reviewed training rosters showing all staff had been trained. During the random staff interviews, all employees interviewed recalled being provided training on how to perform cross-gender pat down searches.</p> <p>After a review, the Auditor determined the facility substantially meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard

## **Auditor Discussion**

Evidence Relied upon to make Compliance Determination:

1. WCCF Completed PAQ
2. WCCF Policy 606
3. Forms and pamphlets in English and Spanish
4. Documentation of language line usage
5. Employee training rosters for the past 12 months
6. PREA Training Video in English and Spanish and with subtitles
7. Information regarding commercial interpreter service

Interviews with the following:

- PREA Coordinator
- Random Staff
- Classification Staff
- Intake Staff
- Inmates who have disabilities
- Inmates identified as LEP

Observation of the following:

- Observation of posted PREA information in Spanish

Findings:

The WCCF takes appropriate steps to ensure that offenders with disabilities, including those who are deaf, blind or have intellectual limitations have an equal opportunity to participate and benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and harassment.

WCCF policy is written in accordance with the standard and indicates that the agency has established procedures to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the efforts to prevent, detect, and respond to sexual abuse and sexual harassment. During intake, offenders determined to have disabilities will have accommodations made to ensure that materials are received in a format or through a method that ensures effective communication.

Interviews with the PREA Coordinator and Intake staff indicate that the WCCF has not received any offenders with significant disabilities that required any special accommodations in the past year.

Staff stated that if the WCCF were to receive an offender with a disability that required any accommodations in order ensure they were able to fully participate and benefit from all aspects of the facility's efforts to prevent and/or respond to sexual abuse and harassment, Intake would alert the PREA Coordinator and she would ensure all necessary accommodations and notification to the other staff.

Interviews with staff, including supervisory staff and intake officers confirm that they have a process in place to ensure that all inmates, regardless of disability would have

equal access to PREA information. Multiple staff interviews indicated that they did not currently have any offenders with disabilities or special needs that would require accommodations to have access to the PREA information and protections. The Auditor observed PREA informational posters throughout the facility in both English and Spanish. Spanish is the prevalent non-English language in the area. During both formal and informal interviews with staff responsible for intake and classification, when asked how they ensured that inmates with disabilities were provided access to the PREA program, staff indicated that they have options on a case-by-case basis. Some staff suggested using the telephone based interpretive service for LEP inmates. When asked how they would respond to the needs of an individual with a cognitive disorder or severe mental illness, staff told the auditor that it would depend on the level of impairment and the specific communication needs of the inmate and they would consult with mental health as needed.

WCCF policy indicates that offenders who are limited English proficient have access all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and harassment, including providing interpreters. The Auditor determined through staff interviews that the WCCF has interpreters available for limited English proficient offenders through the use of a telephone-based interpreter service. The WCCF has secured the services of LanguageLine. Interviews with multiple staff indicate that on the occasion they have an offender that does not speak English, they also have several staff members that can speak Spanish, as well as other languages.

During the on-site portion of the audit, the Auditor was able to speak with one inmate with a physical disability. During the targeted interview, the inmate was able to answer the auditor's questions and was aware of PREA. Their disability is not severe enough that they need any special accommodations to participate in the PREA program at WCCF. The Auditor was also able to speak with one inmate with a cognitive disability. During the targeted interview, the inmate was able to answer the auditor's questions and was aware of PREA. Their disability is not severe enough that they need any special accommodations to participate in the PREA program at WCCF. The interviews did not reveal any cause for concern with this standard.

The Auditor interviewed two limited English proficient inmates identified by the facility. A staff member served as an interpreter for the interviews. The inmates were able to answer the auditor's questions and were aware of PREA. The interviews did not reveal any cause for concern with this standard.

The auditor reviewed documentation showing the agency's use of the interpretive service many times. Staff stated there were Spanish speaking staff available or they would check with their supervisor if they needed interpreter services.

The WCCF policy prohibits the use of inmate interpreters except in instances where a significant delay could compromise the offender's safety. Interviews with staff indicate that offenders are not and would not be used as interpreters. During the random staff interviews, no staff member said it was appropriate to use an inmate interpreter when responding to allegations of inmate sexual abuse. According to a targeted interview with the PREA Coordinator, there were no instances of the use of

	<p>an inmate interpreter even in exigent circumstances. Agency policy states that, “Should an investigation involve inmates who have disabilities or who have limited English proficiency, the first responder shall not rely on inmate interpreters, inmate readers or other types of inmate assistants, except in limited circumstances where an extended delay in obtaining an interpreter could compromise inmate safety, the performance of first responder duties or the investigation of sexual abuse or sexual harassment allegations (28 CFR 115.16).”</p> <p>The WCCF has multiple safeguards in place to ensure that inmates with disabilities are able to fully participate in the PREA program at the facility.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.17 Hiring and promotion decisions</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 107, 305</li> <li>3. WCCF Hiring Background Packet</li> <li>4. PREA Acknowledgement</li> <li>5. Interview questions</li> <li>6. Criminal History Record Check</li> <li>7. Review of employee, contractor, and volunteer files</li> <li>8. Background Information on Contract Employees hired within the last 12 months</li> <li>9. Interviews with PREA Coordinator and Background Supervisor</li> </ol> <p>Findings:</p> <p>The WCCF does not hire any sworn staff that has engaged in sexual abuse or harassment as stipulated in the standard. The language in the policy is written consistently with that in the standard. Policies 107 and 305 state: The Weber County Sheriff's Office shall not promote, assign or transfer any member to a position that may allow contact with inmates if the member has (28 CFR 115.17):</p> <ol style="list-style-type: none"> <li>(a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution as defined in 42 USC§ 1997.</li> <li>(b) Been convicted of engaging or attempting to engage in sexual activity that was facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent or was unable to consent or refuse.</li> <li>(c) Been civilly or administratively adjudicated to have engaged in the activity</li> </ol>

described in paragraph (b) of this section.

The Auditor reviewed the background process used by the WCCF and found that they are asking these questions during the interview process to determine if they are hiring anyone who has engaged in prohibited conduct. Interviews with staff confirm that they are asking these questions during the interview process for applicants for sworn positions. The background supervisor stated that the background investigation thoroughly vets any prospective employee and asks directly about previous misconduct as required by the standard. The document review on-site and interviews with the PREA Coordinator and Background Supervisor confirmed that they have complied with this policy and no employee with such a history has been hired during the audit period.

WCCF policy 305 states that:

The Office shall actively strive to identify a diverse group of candidates who have in some manner distinguished themselves as being outstanding prospects. Minimally, the Office should employ a comprehensive screening, background investigation, and selection process that assesses cognitive and physical abilities and includes review and verification of the following:

- (a) A comprehensive application for employment (including previous employment, references, current and prior addresses, education, military record)
- (b) Driving record
- (c) Reference checks
- (d) Employment eligibility, including U.S. Citizenship and Immigration Services (USCIS) Employment Eligibility Verification Form 1-9 and acceptable identity and employment authorization documents. This required documentation should not be requested until a candidate is hired. This does not prohibit obtaining documents required for other purposes.
- (e) Information obtained from public internet sites
- (f) Financial history. consistent with the Fair Credit Reporting Act (FCRA) (15 USC§ 1681 et seq.)
- (g) Local, state, and federal criminal history record checks
- (h) Polygraph or voice stress analyzer examination (when legally permissible)
- (i) Medical and psychological examination (may only be given after a conditional offer of employment)

The background supervisor stated that the WCCF uses Guardian software, which automatically sends out inquiries.

Per the PAQ, in the past 12 months, the number of persons hired who may have contact with inmates who have had criminal background record checks: 315

In addition, 16 background checks were completed for staff covered under contracts for services that may have contact with inmates.

The policy indicates that the WCCF will consider any instances of sexual harassment in determining whether to hire or promote anyone, or enlist the services of contractors who may have contact with inmates.

A targeted interview with the background supervisor stated that instances of sexual harassment would be a factor when making decisions about hiring and promotion. Every employee and contractor undergo a background check and is not offered employment if there is disqualifying information discovered. He stated that if information regarding sexual harassment was found during a background investigation, it would normally be a “deal breaker.”

There is a written policy that requires inquiry into a promotional candidate’s history of sexual abuse or harassment. Documentation reviewed supports compliance with the standard in accordance with facility policy. During the on-site portion of the audit, the Auditor reviewed files of employees that were hired in the last 12 months. All the employees’ files contained background checks and pre-employment questionnaires where employees were asked the questions regarding past conduct, and their answers were verified by a background investigation.

WCCF policy requires inquiry into the background of potential contract employees regarding previous incidents of sexual assault or harassment. Consistent with WCCF policy, all employees and contractors must have a criminal background records check prior to employment. Staff at the WCCF complete criminal background checks for all prospective applicants and contractors, prior to being offered employment.

Staff verified this information in interviews discussing the background process. In addition, the WCCF uses a checklist for the background process, which verifies all steps have been completed, including the criminal history check. Staff stated that if a prospective applicant previously worked at another correctional institutional, they make every effort to contact the facility for information on the employee’s work history and any potential issues, including allegations of sexual assault or harassment, including resignation during a pending investigation. The background supervisor stated that they will always try to review the personnel file from the previous facility if possible.

WCCF policy requires background checks be conducted on facility staff and contract staff a minimum of every five years. Documentation of background checks was provided by the facility and reviewed by the auditor. The Weber County Correctional Facility states that:

The Office shall either conduct criminal background records checks at least every five years on members or contractors who may have contact with inmates or have in place a system for otherwise capturing such information.

Employees who may have contact with inmates shall disclose any conduct described above in written applications or interviews for promotion or assignments. The background supervisor stated they do an updated background when someone changes positions.

Staff was very clear about the fact that an employee engaging in any type of misconduct such as listed in the standard would not be retained.

The WCCF asks applicants for sworn positions and contractors directly about misconduct as described in the standard using a Self-Declaration form during the

	<p>application process. These forms are maintained in their respective personnel file. The Auditor reviewed random files and verified that this is being completed. Interviews with staff indicated that the forms are being completed as required by the standard and WCCF policy. WCCF policy stipulates a continuing affirmative duty to disclose any PREA related misconduct. All current and new staff are trained on the PREA policy, as well as annual refresher training. Training records verifying that employees acknowledge that they have read and understand the policy were reviewed by the auditor.</p> <p>In accordance with the standard, WCCF policy stipulates that material omissions regarding such conduct, or the provision of materially false information shall be grounds for termination. Interviews with staff verified that the WCCF would and has terminated employees for engaging in inappropriate behavior with inmates, upon learning of such misconduct. WCCF policy 305 states that: The Office shall ask all candidates who may have contact with inmates to disclose any conduct described above in written applications or interviews. Material omissions regarding such misconduct, or the provision of material! false information, are grounds for termination.</p> <p>WCCF policy indicates that the facility shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer and a signed release of information. Staff indicated they would share information upon request from another facility regarding a former employee.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. Schematic of facility</li> <li>3. Staffing Plan 2026</li> <li>4. Electronic Security Contract</li> <li>5. Interviews with PREA Coordinator and Facility Administrator</li> <li>6. Observation of camera placement and footage</li> </ol> <p>Findings:</p>

	<p>WCCF staff stated that if there were to be any substantial expansion or modification of existing facilities, the agency would consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse. The staff confirmed no substantial expansions or modifications were performed within the audit cycle.</p> <p>According to the WCCF PAQ and targeted interviews with the PREA Coordinator and Facility Administrator, the WCCF has added several cameras to the interior and exterior of the facility over the last 3 years. They currently have a total of 236 cameras.</p> <p>The staffing plan review for indicates that the upgrades to the camera system is adequate at this time. The video monitoring system in the facility is monitored twenty-four (24) hours a day in Central Control. The current video monitoring system is adequate for the supervision of inmates. Recognized blind spots have been addressed by the facility.</p> <p>A targeted interview with multiple staff stated that the camera system is a vital tool in the prevention and detection of sexual assault issues, as well as a measure to assist in investigations.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Verification of PREA Training for Investigators</li> <li>4. Review of incident logs</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Agency Administrator</li> <li>• Medical personnel</li> <li>• Investigator</li> </ul> <p>Findings:</p> <p>The WCCF is responsible for conducting both administrative and criminal sexual</p>

abuse and sexual harassment investigations.

The facility follows a uniform protocol for investigating allegations of sexual abuse that maximizes the possibility of collecting usable evidence and trains facility staff who may be first responders in this protocol. The evidence protocol is specified was described and confirmed by the Investigator, who is able to fully articulate investigative procedures for a sexual assault in a jail setting. Interviews with staff indicate that they are trained and familiar with the evidence protocol and what to do if they are the first responder to a sexual assault.

The WCCF does not hold youthful offenders. However, the evidence protocol is developmentally appropriate for youth. Evidence collection shall be based on a uniform evidence protocol that is developmentally appropriate for youth, if applicable, and adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011 (28 CFR 115.21 ).

WCCF policy stipulates that all victims of sexual abuse shall be offered a forensic medical exam, without financial cost including prophylactic testing/treatment for suspected STIs, and pregnancy testing as applicable. There is an on-call Clinical Forensic Nurse through NUSAFE (Northern Utah Sexual Assault Forensic Examiners). These exams would be performed at the Sheriff's Office in the medical department. Examinations will be conducted by qualified SANE/SAFE experts. Pursuant to the MOU, persons performing these exams will be qualified and possess training and/or certification in the Sexual Assault Nurse Examination. The availability of these services was confirmed by the Auditor with facility staff. Per the HSA, the facility always has a SANE/SAFE nurse available 24 hours per day and 7 days per week and there would be no charge to the victim for this exam.

The WCCF reported on the PAQ there had been no have been no forensic exams conducted during this audit period. This was confirmed by jail staff and the HSA. The Auditor reviewed the MOU and found that they agree to the following services:

1 .1 NUSAFE will provide forensically trained, skilled clinical personnel including at least one nurse practitioner (the "Clinical Director"), hereinafter referred to as "Nurses" to provide, on an as needed basis, the following types of services for patients seeking evaluation/treatment for acute sexual assault:

- Response to Sheriff's Office within 60 minutes of notification
- Appropriate forensic examination
- Interview of suspected victims of sexual assault
- Accession of appropriate patient informed consent
- Obtaining and preserving potential forensic evidence
- Generating and maintaining confidential records of the forensic examination
- Appropriate communication with law enforcement officers and agencies
- Testimony In any court proceedings as a result of forensic examination

WCCF policy indicates they will make a victim advocate from a rape crisis center available to an abused inmate. A local rape crisis center is available to serve as a

	<p>victim advocate to victims of sexual assault at the WCCF. Per the MOU, the sheriff's office is responsible to contact NUSAFE directly for consultation and response if the sexual assault victim refuses to cooperate with law enforcement but wishes to proceed with evidence collection. The Sheriff's Office staff will also contact the local advocacy group at Your Community Connection (YCC).</p> <p>WCCF policy stipulates these services are available. There have been no instances of sexual abuse that have required services in the past 12 months. A targeted interview with the PREA Coordinator also confirmed that the MOU was in place, but no advocacy services had been utilized during the audit period.</p> <p>The Weber County Correctional Facility will refer to an outside agency to investigate criminal matters involving staff. The WCCF will conduct parallel administrative investigations for any cases of sexual assault referred to an outside agency. Per the PAQ, WCCF referred one allegation involving staff to Roy City. This was determined to be unfounded.</p> <p>Per the PAQ, there have been no forensic medical exams conducted during the past 12 months.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. PREA Investigative Checklist</li> <li>4. Review all investigative files for allegations of sexual abuse or harassment for the past 12 months</li> <li>5. Website</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Agency Administrator</li> <li>• Investigator</li> </ul> <p>Findings:</p> <p>The WCCF policy is written in accordance with the standard and requires that an</p>

investigation is completed for all allegations of sexual abuse and harassment. Policy also dictates that allegations are referred for a criminal investigation, if warranted. The supervisors and PREA Coordinator work very closely together to ensure that all allegations of sexual abuse and harassment are investigated promptly and thoroughly. If an offender alleges a sexual assault or sexual harassment has taken place, the staff member will notify the supervisor, who will take the initial report and refer it to the PREA Coordinator for further action and investigation. The Investigator coordinates with the PREA coordinator and Jail supervisors to determine the course of action.

The WCCF completes both administrative and criminal investigations of sexual assault and sexual harassment.

Information is posted on the agency website under the PREA section.

Targeted interviews with the Investigator, PREA Coordinator and Jail Administrator verified that all allegations of sexual abuse or harassment are investigated. They described the process for investigations, which is a collaborative approach. According to the staff, once an allegation is received, it is referred for investigation based upon the type of allegation. In the case of a sexual abuse allegation, the first responders and supervisory personnel would initially take action to separate the alleged victim and perpetrator and takes steps to preserve any evidence. The on-duty supervisor would brief the PREA Coordinator and depending on the situation initiate a criminal investigation. All reports of sexual abuse or harassment are evaluated by the first responders and supervisors, in coordination with the PREA Coordinator and a determination is made whether to initiate a criminal investigation. If there is no exigency and no evidence that a crime has occurred, the agency initiates an administrative investigation. The incident is investigated and if during the investigation, it is determined that there is evidence to support a crime was committed, the investigators will consult with the County Attorney's Office as necessary. If there is no evidence that a crime was committed, then the investigation is completed as an administrative investigation.

Interviews with staff indicate they are aware of their responsibility to investigate every allegation, refer the allegation if it involves criminal behavior and notify the PREA Coordinator of all allegations.

A review of the investigative files for allegations of sexual abuse or harassment in the past 12 months indicate that the allegations were promptly and thoroughly investigated. The investigations were initiated immediately by the PREA Investigator, the report included all essential elements required within the standard, credibility assessments were conducted for staff and inmates, and staff actions were considered within the final report. There is a standardized template utilized by the investigator to ensure all required elements of the standard are met. There was one allegation that warranted referral for criminal investigation. This was an allegation against staff, and the investigation was conducted by an outside agency.

WCCF requires that all sexual assault allegations that involve evidence of criminal

	<p>behavior be referred for criminal prosecution.</p> <p>The auditor reviewed the WCCF website and the agency policy is posted and publicly available. During an interview with the investigator, he verified that investigations that revealed criminal behavior would be referred for prosecution. The Jail Administrator confirmed this information.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606, 310</li> <li>3. Annual Training</li> <li>4. PREA Lesson Plan</li> <li>5. Review of Training Files</li> <li>6. Interviews with Random Staff, PREA Coordinator and Training Coordinator</li> </ol> <p>Findings:</p> <p>The WCCF policy is written in accordance with the standard and includes all required topics and elements of the standard. Policy includes a zero tolerance toward sexual abuse and sexual harassment policy relating to staff training. This policy includes training requirements on how to fulfill their responsibilities for prevention, detection, reporting, and response. This policy includes all elements listed in section 115.31 (a) 1-10. Policy 310 states:</p> <p>All staff, volunteers and contractors who may have contact with inmates shall receive office approved training on the prevention and detection of sexual abuse and sexual harassment within this facility. The Training Manager shall ensure that the staff receives training and testing in prevention and intervention techniques, that they have sufficient knowledge to answer any questions the arrestees and inmates may have regarding sexual assault or abuse, and that they are familiar enough with the reporting process to take an initial report of a sexual assault or abuse. The Training Manager shall be responsible for developing and administering this training, covering at minimum (28 CFR 115.31; 28 CFR 115.32:</p> <ol style="list-style-type: none"> <li>(a) The zero-tolerance policy for sexual abuse and sexual harassment and how to report such incidents.</li> <li>(b) The dynamics of sexual abuse and sexual harassment in confinement.</li> </ol>

- (c) The common reactions of sexual abuse and sexual harassment victims.
- (d) Prevention and intervention techniques to avoid sexual abuse and sexual harassment in the correctional facility.
- (e) Procedures for the investigation of a report of sexual abuse and/or sexual harassment.
- (f) Individual responsibilities under sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures.
- (g) An individual's right to be free from sexual abuse and sexual harassment.
- (h) The right of inmates to be free from retaliation for reporting sexual abuse and sexual harassment.
- (i) How to detect and respond to signs of threatened and actual sexual abuse.
- (j) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex or gender non-conforming inmates.
- (k) How to comply with relevant laws related to mandatory reporting of sexual abuse and sexual harassment to outside authorities.
- (l) How to avoid inappropriate relationships with inmates.

Training shall be tailored according to the sex of the inmates at the facility. Staff should receive additional training on security measures and the separation of male and female populations in the same facility if the staff has been reassigned from a facility that houses only male or female inmates.

Training should include written testing to validate knowledge and understanding of the material. The Training Manager shall document, through signature or electronic verification, that staff, volunteers and contractors have received and understand the training. The Professional Standards Unit will maintain training records on all those receiving training in accordance with procedures developed by the Training Manager.

The Training Manager shall ensure that members undergo annual refresher training that covers the office's sexual abuse and sexual harassment policies and related procedures (28 CFR 115.31).

Policy requires that all employees, contractors, volunteers and civilian staff member who have contact with inmates receive training. According to the policy, mental health and medical personnel receive specialized training. The training is tailored to both male and female inmates, as the facility holds both. The facility provides PREA training annually to each employee to ensure they remain up to date on the WCCF policies and procedures regarding sexual abuse and harassment. Each employee completes this training electronically with a unique login and completion is verified by electronic signature.

The Auditor reviewed the training curriculum and verified it included all information and each element required by the standard. The Training Manager verified that training was completed annually for all facility staff.

The Auditor reviewed the training rosters, as well as random training files to verify and ensure all employees are receiving the training. The facility trained 100% of staff in the last 12 months. During the pre-audit period the Auditor reviewed the training documentation submitted by the facility. In addition, during the on-site portion of the

	<p>audit, the auditor verified the training of staff by making spot checks of training files. Furthermore, the auditor reviewed the entire training logs for all employees who had received training for the current year. New staff are given PREA training during their orientation before assuming their duties and sign a verification acknowledging they have received the information. During interviews with the PREA Coordinator and Training Manager, they confirmed that no employee is permitted to have contact with inmates prior to receiving PREA training during orientation.</p> <p>The Auditor conducted formal interviews with random and specialized staff. All staff interviewed indicated that they had received training and were able to articulate information from the training. During the staff interviews, all the random employees recalled having annual PREA training. During the random staff interviews, the auditor asked the employees if they recalled being trained on each required element of the PREA training. None of the employees interviewed remembered all elements of the training, but staff appear to understand their responsibilities regarding the standards. The staff are appropriately trained, and all documentation is maintained accordingly.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Annual Training</li> <li>4. New Contractor PREA Training</li> <li>5. Review of Training Files</li> <li>6. Volunteer orientation</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Contract Staff</li> <li>• Training Coordinator</li> </ul> <p>Findings:</p> <p>The WCCF policy is written in accordance with the standard and includes all required topics and elements of the standard. The policy explains the zero-tolerance standard and the facility also provides information regarding their responsibilities under the</p>

agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response to all volunteers and contractors. The auditor reviewed the information provided and it includes the zero-tolerance policy, requirements for preventing, reporting, detection, and response, and the discipline imposed for violations of this policy. WCCF policy requires that all staff receive training regarding PREA. This training is required to be completed in person prior to contact with any inmates. The training is tailored to both male and female inmates, as the facility holds both. The facility maintains documentation of all training.

The facility provides PREA training annually to each contract employee to ensure they remain up to date on the WCCF policies and procedures regarding sexual abuse and harassment. The staff briefly reviewed with the Auditor a typical training session. The documentation provided by the facility indicates the volunteer and contractor signature understanding the training they have received.

Policy states: All staff, volunteers and contractors who may have contact with inmates shall receive office approved training on the prevention and detection of sexual abuse and sexual harassment within this facility. The Training Manager shall ensure that the staff receives training and testing in prevention and intervention techniques, that they have sufficient knowledge to answer any questions the arrestees and inmates may have regarding sexual assault or abuse, and that they are familiar enough with the reporting process to take an initial report of a sexual assault or abuse.

The Auditor reviewed the training curriculum and verified it included all information required by the standard. The Auditor reviewed the training rosters, as well as random training files to verify and ensure all contracted employees are receiving the training. New contractors and volunteers are given PREA training during their orientation before assuming their duties and sign a verification acknowledging they have received the information. During the document review, the auditor was able to verify that the contractors who had been trained were required to sign an acknowledgement that they had received and understood the PREA training. The auditor reviewed the files of newly hired contract employees and verified that the signed training acknowledgement form is retained in their files. In addition, during targeted interviews with the PREA Coordinator and Training Coordinator, they verified that training acknowledgements were retained in the files.

The Auditor conducted interviews with contract staff. During targeted interviews with contract staff members, each of the interviewees told the auditor that they recalled having the PREA training and knew of the WCCF's zero-tolerance policy against sexual abuse and harassment. In addition, while they could not remember all the aspects of the training, they could articulate what to do is an inmate reported to them. When asked what would be the consequence if they violated the PREA policy, they stated they would be terminated and removed from the facility. The contract staff were knowledgeable regarding the PREA information they had received. Staff appear to understand their responsibilities regarding the standards. The WCCF is providing training in accordance with the standard. The documentation is maintained accordingly.

The facility reported on the PAQ that they have trained 122 volunteers and

	<p>contractors in the last 12 months. The auditor was able to interview a volunteer. They verified receipt of training from the facility.</p> <p>The auditor reviewed both the volunteer orientation and the volunteer agreement, both of which contain information on PREA and the volunteers' duties and responsibilities.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.33</b>	<b>Inmate education</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. ID card - back</li> <li>4. PREA Video - English and Spanish</li> <li>5. Inmate Handbook</li> <li>6. Posters and Informational Material</li> <li>7. PREA Acknowledgement</li> <li>8. Review of inmate training materials</li> <li>9. Review of inmate training documentation</li> <li>10. Inmate Handbook</li> <li>11. Sampling of inmate files comparing intake date, the date of initial screenings, and the date of comprehensive screening</li> <li>12. Logs of Completion of inmates provided Comprehensive Education</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Random Inmates</li> <li>• Intake Staff</li> </ul> <p>Observations of the Following:</p> <ul style="list-style-type: none"> <li>• PREA informational Posters throughout the facility in inmate housing and common areas</li> <li>• Inmate Intake Process</li> </ul> <p>Findings:</p> <p>The WCCF ensures that Inmates receive information at time of intake about the zero-</p>

tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. This information, along with the inmate handbook and informal posters provides offenders with information regarding sexual abuse and assault, the agency's zero tolerance policy and how to report incidents of sexual abuse or harassment. There are several reporting methods available to the inmates which is discussed in the inmate handbook.

The WCCF PAQ reported that during the last year 19419 persons were committed to jail and all of the inmates were given the initial PREA information in accordance with the standard. Offenders will receive PREA information at intake. This information is printed on the back of the Inmate ID card, which all inmates receive.

A specialized interview with intake staff revealed the inmates receive the initial PREA information upon arrival to the facility. This document includes the facility zero tolerance policy, the inmates' right to be free from sexual abuse, sexual assault, and sexual harassment and instructions for reporting an allegation by phone.

The inmate handbook is available in paper format, as well as on the tablets located in the offender housing areas.

In addition, the auditor observed PREA signage with a reporting number and notification of the agency's zero tolerance policy. In both informal discussions with intake staff as well as formal specialized interviews with intake staff, officers told the auditor that they explained the agency's zero tolerance policy regarding sexual abuse and harassment, and they explained to the newly committed inmates that they could report any instances of abuse or harassment to staff and use the inmate telephone system to report abuse to the listed hotline.

Interviews with intake staff verified that inmates, including any transferred from another facility, are given the same PREA orientation. Further questioning during the staff interviews revealed that inmates who were LEP would be provided the orientation using a telephone interpreting service, or a Spanish speaking deputy would be utilized, if available. For offenders that are visually impaired, a staff member would read the information to the offender. Staff would assist any other disabled or impaired inmates that needed assistance, including intellectually limited inmates. Information in multiple formats was available throughout the facility. A targeted interview with the PREA Coordinator indicates that the facility has not received any inmates with significant enough disabilities that needed accommodations within this audit period, but if they did, it would be handled on a case-by-case basis. The Auditor observed PREA informational posters in all offender housing areas, intake, and public areas.

Random inmate interviews revealed that some inmates did not remember receiving information about the agency's zero tolerance policy and how to make a report of sexual abuse. However, those who responded that they did not remember receiving the initial information did state that they are aware of PREA and how to report.

The comprehensive education is accomplished using the PREA orientation video. The educational information is on the inmate tablets and each inmate must electronically

	<p>acknowledge viewing of the information prior to being able to use the tablet for any other functions. Each inmate is issued a tablet. The staff can print reports that show when the inmate acknowledged this information.</p> <p>At the time of submission of the PAQ by the facility, they were still working on providing the comprehensive education to all inmates. The facility has previously been PREA certified, but it has been many years. The auditor spoke with the PREA Manager, who explained in depth the process for ensuring that all inmates receive the PREA training. She stated that they will play the video in both English and Spanish and be available to answer any questions. At the time of the onsite review, there were less than 100 of the current inmates that still needed to have the comprehensive education. She maintains a spreadsheet of all inmates and when they've had the education. When new inmates are received, she sets an alert for 28 days to ensure the education is delivered within 30 days as required by the standard.</p> <p>The auditor reviewed a sampling of random inmate files. The files contained documentation of the comprehensive education. Interviews with staff and offenders verified that offenders are receiving the initial and comprehensive training.</p> <p>All current offenders have received PREA training. Offender interviews indicate that the majority remember receiving information upon arrival and viewing the educational information. They have an awareness of PREA information and how to report.</p> <p>As required by the standard, policy provides for education in formats accessible to all inmates. There are Spanish versions of all materials. For offenders that are visually impaired, a staff member would read the information to the offender. As indicated in the policy, all other special needs would be handled in coordination with the PREA Coordinator on a case-by-case basis. There have been no instances of the need to accommodate special needs inmates during this audit period.</p> <p>Information in multiple formats was available throughout the facility. The Auditor observed PREA informational posters in all offender housing areas, intake, and medical. The inmate handbook is available and provided to all offenders.</p> <p>After a review, the Auditor determined that the facility appears to substantially meet the minimum requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Evidence Relied upon to make Compliance Determination:

1. WCCF Completed PAQ
2. WCCF Policy 310
3. Review of Training Materials
4. Review of Training Documentation
5. Review Training Curriculum for Specialized Training
6. Review of Training Certificates for Investigators
7. Interviews with PREA Coordinator and Investigator

Findings:

WCCF policy is written in accordance with the standard and requires that investigators are trained in conducting sexual abuse investigations in confinement settings. Policy 310 states:

Specialized investigative training for investigators shall include the uniform evidence protocol to maximize potential for obtaining useable physical evidence; techniques for 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 action or referral for prosecution (28 CFR 115.21; 28 CFR 115.34).

WCCF investigators conduct both administrative and criminal investigations. The Auditor verified the training for the investigators. The training included all mandated aspects of the standard, including Miranda and Garrity, evidence collection in a correctional setting, as well as the required evidentiary standards for administrative findings.

There are 5 designated, trained investigators employed by the WCCF. If an allegation is reported, an investigator is notified immediately so that they can start the investigative process. The tracking data is maintained electronically and includes: case number, date and time, initiation method, name of the participants involved, incident number, and a brief description.

The PREA investigators at WCCF completed investigator training. The auditor was provided documentation of training and includes all required elements. The auditor reviewed the training outline associated with the training. Training certificates were also viewed for training received within the last 12 months.

During a targeted interview with one of designated investigators for the department, they were able to articulate aspects of the training received.

They appeared knowledgeable in the training they had received, as well as conducting sexual assault investigations. She indicated that, if in the course of the investigation, it appeared that the conduct was criminal in nature and there could be criminal charges involved, they would consult with the County Attorney's Office regarding any potential charges.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

**115.35**

**Specialized training: Medical and mental health care**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Evidence Relied upon to make Compliance Determination:

1. WCCF Completed PAQ
2. WCCF Policy 310
3. Review of Training Materials
4. Review of Training Documentation
5. Interviews with PREA Coordinator and Medical Staff

Findings:

Facility policy requires all medical and mental health care practitioners to receive the required specialized PREA training. The policy requires that the mental health and medical staff receive additional specialized training on how to detect and assess signs of sexual abuse and harassment, how to preserve physical evidence, how to respond effectively to victims of sexual abuse and harassment and to whom to report allegations or suspicions of sexual abuse or harassment. The specialized training is accomplished online and the HSA ensures that this training is completed annually by all medical and mental health staff.

The WCCF employs contract medical and mental health providers through VitalCore. The facility maintains documentation demonstrating the medical and mental health practitioners have completed and understand the training received. Per the PAQ, there are 31 medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy.

The staff of the WCCF does not perform forensic medical examinations for victims of sexual assault. Forensic medical exams are conducted by Sexual Assault Nurse Examiners through NUSAFE, so no facility staff are trained on conducting forensic medical exams.

During the on-site portion of the audit, the auditor reviewed the training logs provided by the staff. During a targeted interview with the HSA, she recalled receiving PREA training. In addition, she remembered having to complete additional training specifically related to healthcare and PREA. She was able to articulate knowledge regarding 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 whom to report allegations or suspicions of sexual abuse and sexual harassment.

A targeted interview with the training manager verified that every employee is required to participate in PREA training in accordance with 115.31 and that training is documented.

After a review, the Auditor determined the facility appears to substantially meet the requirements of the standard.

	Corrective Action: None
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<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606, 507</li> <li>3. Review of Screenings</li> <li>4. 30 Day Reassessment Logs</li> <li>5. Sampling of Random Inmate Files</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Random Inmates</li> <li>• Intake Staff</li> <li>• Classification Staff</li> </ul> <p>Observations of the Following:</p> <ul style="list-style-type: none"> <li>• Inmate Intake Process</li> </ul> <p>Findings:</p> <p>According to WCCF Policy all inmates shall be assessed upon their admission to the facility and reassessed no later than 30 days after admission to the facility. The policy is written in accordance with the standard and includes all the required elements. Policy states that all inmates shall be assessed during the intake screening interview for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. In accordance with the standard, the interview shall take place within 72 hours of arrival at the WCCF. These assessments shall be conducted using the objective screening instrument. The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization:</p> <ol style="list-style-type: none"> <li>a. Whether the inmate has a mental, physical, or developmental disability.</li> <li>b. The age of the inmate.</li> <li>c. The physical build of the inmate.</li> <li>d. Whether the inmate has previously been incarcerated.</li> <li>e. Whether the inmate’s criminal history is exclusively nonviolent.</li> <li>f. Whether the inmate has prior convictions for sex offenses against an adult or child.</li> <li>g. Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming.</li> <li>h. Whether the inmate has previously experienced sexual victimization.</li> <li>i. The inmate’s perception of his or her own vulnerability to sexual abuse or sexual harassment; and</li> </ol>

j. Whether the inmate is detained solely for civil immigration purposes.

Per the staff, inmates that don't bond out actually get screened three different times - by medical staff immediately upon arriving at the facility, by the intake staff, and by medical staff again prior to being sent to housing.

The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive. Within no more than 30 days from the inmate's arrival to the facility, the Sheriff's Office shall reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the agency since the intake screening. In addition, all inmates are reassessed within the first 30 days of incarceration for sexual safety when the initial medical screening is conducted by medical staff. An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Inmates may not be disciplined for refusing to answer, or for not disclosing complete information. The Sheriff's Office shall implement appropriate controls on the dissemination of responses to questions asked pursuant to this policy to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. Staff have individual log in credentials and access depends on job classification.

During the site review, the auditor was not able to follow an inmate through the admission and classification process. But during the site review, the auditor observed general intake operations and had the opportunity to speak with both the intake officers and Classification staff. They walked the auditor through an inmate intake and explained that during that process, inmates were informed of their right to be free from sexual abuse and harassment as well as the agency's zero-tolerance for sexual abuse and harassment and how to report instances of sexual abuse or harassment.

Interviews with the staff verified that upon admission within 72 hours, all inmates are screened for risk of sexual abuse victimization and the potential for predatory behavior. During interviews with random inmates, a couple of the inmates do not remember their initial screening however, the remainder remember being asked PREA related questions during their admission; although none of the inmates remembered all the PREA risk assessment questions. The Auditor asked the inmates if they were asked the risk screening questions. Most all inmates remembered at least something about the risk screening or some of the questions.

The screenings are completed on an objective screening instrument. The objective classification screening includes the following criteria for the risk of sexual victimization: inmate mental, physical or developmental disabilities, age, physical build, previous incarcerations, criminal history violent or non-violent, prior sex convictions, whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming, previous sexual victimization, vulnerability perceptions, or if the inmate is detained solely for civil immigration purposes. The auditor reviewed this process with the staff assigned to conduct the

screening. The objective classification questionnaire also assesses inmates for the risk of being sexually abusive by including the following criteria: prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse.

This screening is used by staff to assist in making housing and program decisions. This was verified by Classification staff. The auditor reviewed this information and verified it is maintained electronically with limited access. The auditor was provided a copy of and reviewed the screening form completed by the deputies and medical staff.

The auditor reviewed random inmate files and reviewed their booking reports and risk screenings to compare the admission date and the date of admission screening. All randomly selected files had received risk screening within 72 hours of booking. None of the files reviewed indicated concerns regarding the initial intake screening. Targeted interviews with Intake staff, as well as the PREA Coordinator verified that risk assessments are performed within 72 hours of booking.

Per the PAQ, the number of inmates entering the facility (either through intake of transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility: 4396

Targeted interviews with random inmates revealed that most inmates recalled at least a portion of the initial screening and some of the risk assessment screening questions. The auditor reviewed the PREA risk assessment instrument and it is objective as required by the standard. The questions are asked and the answers are recorded by the staff on the risk assessment form in the Offender Management System. There are areas on the form that allows for the inclusion of additional details related to the question, if additional data needs to be documented.

According to the PAQ and WCCF Policy, the PREA screening instrument shall include 10 individual elements. Upon review of the screening instrument, the auditor determined that the screening instrument included all of the required elements.

According to WCCF Policy the initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse in assessing the risk of inmates being potential abusers. The auditor reviewed the objective screening instrument and verified that the questions are present on the screening instrument and during the inmate file review, the same completed forms were in the inmate files. During targeted interviews with staff who conduct risk assessments, the auditor verified that they ask inmates if they have a history of violence and ask them to self-report their history of institutional violence. However, the staff also said that classification will review the inmate's criminal history, current offenses, as well as institutional history, if they have been in the WCCF previously.

WCCF Policy stipulates that no inmate shall be disciplined for refusing to answer or disclose information in response the risk assessment questions. According to targeted interviews with the staff as well as the PREA Coordinator, there have been no

	<p>instances of inmates being disciplined for refusing to answer screening questions.</p> <p>Classification staff also indicated that an inmate’s risk level is reassessed based upon a request, referral or incident of sexual assault. The WCCF only operates one facility, therefore they are not required to reassess upon transfer.</p> <p>The Classification staff complete the reassessment when they meet with them for their initial classification.</p> <p>The Auditor reviewed inmate files and determined that now that this process is in place, the 30-day reassessments are being completed as required by the standard. Inmate interviews revealed that inmates that had recently arrived remember being asked these questions by the Classification staff when meeting with them.</p> <p>After a review, the Auditor determined the facility appears to substantially meet the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606, 507</li> <li>3. Review of Screenings</li> <li>4. Classification report</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Classification staff</li> <li>• Intake staff</li> <li>• Supervisors Responsible for Conducting Unannounced Rounds</li> </ul> <p>Observation of the following:</p> <ul style="list-style-type: none"> <li>• Site review of inmate housing units</li> </ul> <p>Findings:</p> <p>The WCCF policy requires that screening information from the PREA risk assessment is used in making housing, bed work, education, and programming assignments. The intake/booking officers complete a risk assessment screening upon the inmate’s arrival to the facility. The staff use this information to make recommendations on housing, programs, and referrals. The deputies working the Intake housing area</p>

	<p>review the screening to assist in making housing and program decisions. Targeted interviews with Classification staff indicate that the results of the risk assessment and the interview with the inmate is used to determine classification decisions and make individualized determinations for each inmate.</p> <p>The policy stipulates that LGBTI inmates will not be placed in a dedicated facility, unit, or wing solely on the basis of such identification or status, unless the placement is established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.</p> <p>LGBTI offenders are not placed in dedicated housing areas. Interviews with staff confirm this practice would not occur. The auditor conducted informal discussions with inmates during the site review and no inmate mentioned being housed according to their sexual preference or identity. The auditor conducted a targeted interview with the Classification staff and asked if there were any dedicated housing units for LGBTI prisoners. The auditor was informed that inmates' housing was based upon objective finding and LGBTI inmates were not placed in dedicated units. A review of the roster indicated that identified LGBTI inmates are located in different housing areas. Inmate interviews concluded no issues reported due to other staff or inmates viewing the inmates while changing clothes, showering, or using the restrooms. The random staff interviews also revealed no concerns with this issue. The video monitoring equipment did not indicate concerns regarding this issue.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.43</b>	<b>Protective Custody</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606, 507</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Agency Administrator</li> <li>• Supervisors and Staff Responsible for Supervising Inmates in Restrictive Housing</li> </ul> <p>Findings:</p> <p>Per WCCF policy, the facility does not place inmates who are at high risk for sexual victimization in restrictive housing unless alternatives have been considered and are</p>

not available. The inmate would not be held for more than 24 hours to complete this assessment. WCCF policies are written in accordance with the standard and cover all mandated stipulations. According to the PAQ, there have not been any instances where inmates at risk for sexual victimization were placed in restrictive housing for the purpose of separating them from potential abusers. According to targeted interviews with staff who supervise inmates in restrictive housing, they are not aware of a case where an inmate was placed in restrictive housing because of being at high risk for sexual victimization. All staff interviewed indicate that an inmate identified as high risk would be moved to another housing location and not placed in segregation unless the inmate requested it. A targeted interview with the PREA Coordinator also verified that no inmates during the audit period have been placed in restrictive housing involuntarily to separate them from potential abusers. Staff indicated that there was sufficient space and numbers of housing units to find a suitable place for an otherwise orderly inmate.

Policy 507 states: Housing, bed, work, and program assignments should be made to separate inmates at high risk of being sexually victimized from those at high risk of being sexually abusive (28 CFR 115.42). Inmates identified as being at high risk for sexually aggressive behavior will be monitored and housed in an area that will minimize the risk to other inmates and staff. All inmates identified as being at risk of victimization shall be monitored and housed in an area to minimize the risk to their safety. However, inmates at high risk for sexual victimization shall not be (placed in involuntary protective custody unless a consideration of all available alternatives has been made and it has been determined that there is no available alternative means of separation from likely abusers (28 CFR 115.43; 28 CFR 115.68).

The WCCF Policy states that if inmates were placed in restrictive housing for involuntary protective purposes, they would be permitted programs and privileges, work and educational programs and any restrictions would be limited. Further, the policy stipulates that such an involuntary housing assignment would not normally exceed 30 day and such a placement would be documented and include the justification for such placement and why no alternative can be arranged. According to the policy, if an inmate is confined involuntarily under these circumstances, the facility shall review the continuing need at least every 30 days.

Policy 607 states: If an involuntary protective custody assignment is made because of a high risk for victimization, the Jail Commander shall clearly document the basis for the concern for the inmate's safety and the reasons why no alternative means of separation can be arranged (28 CFR 115.43).

The facility shall assign these inmates to involuntary protective custody only until an alternative means of separation from likely abusers can be arranged, not ordinarily in excess of 30 days.

Inmates placed in temporary protective custody shall continue to have reasonable access to programs, privileges, education and work opportunities. If restrictions are put in place, the Jail Commander shall document the following:

- (a) The opportunities that have been limited
- (b) The duration of the limitation
- (c) The reasons for such limitations

	<p>Every 30 days, the Jail Commander shall afford each such inmate a review to determine whether there is a continuing need for protective custody (28 CFR 115.43).</p> <p>Staff are aware of their responsibilities regarding this standard, including the need for a review every 30 days. There have been no instances that required action with regard to this standard.</p> <p>During the on-site portion of the audit, the auditor reviewed all the restrictive housing areas and had informal discussions with both inmates and staff. As verified by targeted interviews with the PREA Coordinator and staff supervising inmates in restrictive housing, the auditor did not identify any inmates who were involuntarily housed in restrictive solely for protective purposes.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. PREA Handout</li> <li>4. Inmate Handbook</li> <li>5. Inmate Orientation</li> <li>6. Site Review</li> <li>7. WCCF Website</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Compliance Manager</li> <li>• Random Staff</li> <li>• Random Inmates</li> </ul> <p>Observation of the following:</p> <ul style="list-style-type: none"> <li>• Observation of informal interactions between staff and inmates</li> <li>• Observation of inmates using the telephone system</li> <li>• Observation of Information Posters inside the housing units, adjacent to telephone and in the booking area</li> </ul> <p>Findings:</p>

The WCCF Policy requires multiple mechanisms for the internal reporting of sexual abuse and harassment, retaliation by other inmates or staff for reporting, as well as mechanisms for reporting conditions that may have contributed to the alleged abuse. WCCF policy is written in accordance with the standard and describes multiple methods for inmates to privately report sexual abuse, sexual assault, sexual harassment, retaliation against reporting, staff neglect, and contributing factors to these incidents.

The inmate handbook states:

The WCCF is committed to a “zero tolerance” policy of sexual assault including inmate-on-inmate and staff-on-inmate sexual assault. You have the right to be free from the threat of sexual assault. Please immediately report any sexual assault to a WCCF staff member. You may directly speak with a staff member, complete an inmate request, or send a confidential correspondence to the facility administration using the PREA form on the tablet. You may also call 801-395-8221 toll free to report. Any information you provide will be handled in a confidential and timely manner. If you want to remain anonymous you may reach the PREA Hotline by dialing \*5678 (star 5678) This allows you to call and report without needing to enter any identifying information. Medical and Mental Health staff are available to assist victims of assault. Claims of sexual assault will be investigated and perpetrators will be referred for prosecution.

Per policy: Inmates may report sexual abuse or sexual harassment incidents anonymously or to any staff member they choose. Staff shall accommodate all inmate requests to report allegations of sexual abuse or harassment. Staff shall accept reports made verbally, in writing anonymously or from third parties and shall promptly document all verbal reports (28 CFR 115.51).

The Sheriff’s Office shall also provide at least one way for inmates to report abuse, harassment, retaliation, and staff neglect to a public or private entity that is not part of the County Sheriff’s Office, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates may report concerns by contacting the PREA Hotline. Staff shall accept reports made verbally, in writing, and anonymously. Staff shall promptly document any verbal reports by memorandum to their shift commander by the end of their shift.

The hotline was tested by the auditor and found this to be a viable reporting method.

The auditor reviewed the inmate handbook and found that inmates are informed that they may report instances of abuse or harassment by reporting to staff members, both verbally and in writing, as well as by using the inmate telephone system to make a report to the PREA hotline. There are multiple internal ways for offenders to privately report PREA related incidents, including verbally to any staff member, grievance forms, a written note submitted to staff, anonymous reports, and third-party reports. They also have the ability to report through the tablets available in all offender housing areas. This information is received by offenders at intake on the back of their ID cards, contained in the inmate handbook and on informational

posters outside all offender housing areas, intake and various other locations throughout the jail.

During random staff interviews, all staff stated that inmates could make a PREA report to staff, volunteers or contractors as well as making a report using a note. In addition, staff members also stated that the PREA Hotline that could be called from the inmate telephone. During the site review, the auditor observed posters adjacent to the inmate telephones.

Random inmate interviews revealed that all inmates were able to articulate at least one, usually multiple ways to report incidents of sexual harassment and sexual assault. All inmates knew that they could report both verbally and in writing.

The inmate interviews revealed that while the inmates remembered getting their ID card, some of them didn't remember or realize that the PREA information was on the back. The auditor recommended that the intake staff make a more concerted effort to inform the inmates of this information.

The inmates can use the hotline to report. A call to the hotline is answered by dispatch. Any report of sexual assault or sexual abuse is immediately reported to the on-duty supervisor, who will make appropriate notifications, including the PREA Coordinator. The PREA Coordinator at WCCF will ensure that staff initiate an investigation promptly.

This information is in the inmate handbook. During the site review, the auditor observed PREA informational posters adjacent to the inmate telephones that have the Hotline number where reports can be taken and referred immediately for investigation. Most offenders mentioned this as a potential reporting method, indicating the offenders are aware of this information. The auditor made a test call to the hotline during the onsite review and found that this was a viable reporting method.

At the time of the on-site audit, there were no inmates detained solely for civil immigration purposes. The facility reports they do not regularly hold such inmates. If the WCCF received an inmate detained solely for civil immigration, staff would provide information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

Staff interviews revealed that they are aware of their responsibilities with regard to reporting and would accept and act on any information received immediately. Information on how to report on behalf of an inmate is listed on the agency website. Staff indicated they would accept and act on third-party reports, including from another inmate.

WCCF policy and the inmate handbook stipulates that 3rd party reports of sexual abuse or harassment will be accepted verbally or in writing. Random inmate and staff interviews revealed that the staff and inmates are aware that third party reports will be accepted and treated just like any other reports. There has been no third-party report in the last 12 months.

	<p>A targeted interview with the PREA Coordinator verified that there are multiple ways to make PREA complaints by both staff and inmates, including the inmate phone system, anonymous letters, as well as third party reporting by family and friends. In addition, inmates can report using the tablets available in the inmate housing areas.</p> <p>WCCF policy requires that all staff accept reports of sexual abuse or harassment both verbally and in writing and that those reports shall be documented in writing by staff and responded to immediately. During targeted interviews with staff, all the random staff interviewed told the auditor that if an inmate reported an allegation of sexual abuse or harassment, they would immediately intervene by separating the victim and alleged perpetrator. A few of the staff members told the auditor that they would notify their supervisor of such an allegation when they received the report and wait for further direction. However, in all random staff interviews, each staff member stated that they would act without delay and would accept a verbal complaint and would be required to make a written report of the incident. During random inmate interviews, the inmates were asked if they knew that they could make a verbal report of an incident of sexual abuse or sexual harassment. All the inmates stated that they knew that they could just tell any staff member if something happened.</p> <p>Staff may privately report sexual abuse or harassment of inmates either verbally or in writing to their supervisors, or facility administrators directly. They also have the option to report to the tip line for the County. Staff members are informed of this provision during PREA training. Staff interviews revealed that they are aware they can go directly to facility administration to report sexual abuse and harassment of inmates and all staff that were randomly interviewed answered that they would report any such incident to their supervisor.</p> <p>The facility has at least one method for inmates to report outside the agency.</p> <p>After a review, the Auditor determined that the facility meets the minimum requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Inmate Handbook</li> <li>4. Staff Interviews</li> </ol>

Findings:

Administrative procedures are in place to address WCCF grievances regarding sexual abuse and harassment, therefore the WCCF is not exempt from this standard. Per policy:

- (a) Inmates may submit a grievance regarding an allegation of sexual abuse at any time.
- (b) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing such grievances and to file such grievances on behalf of inmates if the inmate agrees to have the grievance filed on his/her behalf. Staff members who receive a grievance filed by a third party on behalf of an inmate shall inquire whether the inmate wishes to have the grievance processed and shall document the inmate's decision.
- (c) Grievances may be submitted to any staff member and need not be submitted to the member who is the subject of the complaint.
- (d) Staff receiving a grievance shall forward the grievance to a supervisor. Grievances shall not be forwarded to any supervisor who is the subject of the complaint. The supervisor receiving the grievance shall refer the grievance to the Watch Commander for investigation. Inmates and staff are not required to attempt to informally resolve grievances related to sexual abuse.
- (e) The Watch Commander shall ensure that grievances related to sexual abuse are investigated and resolved within 90 days of the initial filing. The Watch Commander may grant an extension of up to 70 days if reasonable to make an appropriate decision. If an extension is granted, the inmate shall be notified and provided a date by which a decision will be made.
- (f) At any level of the process, including the appeal, if the inmate does not receive a response within the allotted time, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.

The agency has a policy and established procedures for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. Per policy: Any inmate who believes he/she or another inmate is in substantial risk of imminent sexual abuse may file an emergency grievance with any supervisor. The supervisor shall determine whether immediate action is reasonably necessary to protect the inmate and shall provide an initial response within 48 hours.

The supervisor shall refer the grievance to the Watch Commander, who will investigate and issue a final decision within five (5) calendar days.

The initial response and final decision shall be documented and shall include a determination whether the inmate is in substantial risk of imminent sexual abuse and identify actions taken in response to the emergency grievance (28 CFR 115.52).

WCCF reports in the PAQ there have been no grievances filed within the past 12 months alleging sexual abuse. Interviews with the PREA Coordinator confirm the information on the PAQ. Interviews with staff indicate they are aware of their responsibilities with respect to the standard. There have been no instances that required action regarding this standard. The auditor reviewed the inmate handbook, and it contains the general provisions for filing a grievance and informing inmates of

	<p>their options for reporting allegations or sexual abuse and sexual harassment.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Inmate Handbook and Website</li> <li>4. Hotline Information</li> <li>5. PREA brochure</li> <li>6. MOU with NUSAFE</li> </ol> <p>Interviews with the following:</p> <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. Random Inmates</li> <li>c. Random and Targeted Staff</li> <li>d. Mental Health and Medical Staff</li> </ol> <p>Observations of the Following:</p> <ol style="list-style-type: none"> <li>a. PREA informational Posters throughout the facility and public areas</li> </ol> <p>Findings:</p> <p>The WCCF policy is written in accordance with the standard. The facility provides inmates with access to local, state, or national victim advocacy or rape crisis organizations, including toll-free hotline numbers. The policy requires reasonable communications between inmates and those organizations and agencies, in as confidential manner as possible. The WCCF informs inmates of the extent to which these will be monitored prior to giving them access.</p> <p>Policy states that the part of the PREA Coordinator’s responsibility is to: make reasonable efforts to enter into agreements with community service providers to provide inmates with confidential emotional support services related to sexual abuse. The facility shall 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. Persons detained solely for civil immigration purposes shall be given contact</p>

information for immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies in as confidential a manner as possible. The facility shall 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 (28 CFR 115.53).

The auditor confirmed these services are provided at no cost to the inmate. Staff interviews indicate they are aware of their obligations under this standard.

The auditor reviewed the MOU with NUSAFE, which indicates that the staff at WCCF will call Your Community Connection (YCC) to provide advocacy services if required. WCCF established a Memorandum of Understanding with this agency in 2026. The Auditor was provided a copy of the MOU and verified the agreement for services. The MOU may be revised at any time by either party and the terms of the MOU expire in five years or until either party terminates the agreement in writing with 60 days written.

The Weber County Correctional Facility utilizes the services of the Weber County Victim Advocacy to provide confidential services to persons experiencing domestic or sexual violence. Information is posted in all inmate living units near the phones, listed on the tablets, and provided in the inmate handbook. The auditor verified the availability of these services.

The auditor reviewed the WCCF handbook, which included information regarding the availability of outside confidential support services for victims of sexual abuse and harassment. During the site review, the auditor viewed posters that notifies inmates of the availability of a third-party reporting hotline. WCCF policy requires that inmates and staff are allowed to report sexual abuse or harassment confidentially and requires that medical and mental health personnel inform inmates of their limits of confidentiality. Targeted interviews with medical and mental health reveal they are aware of their obligations to inform the inmates of the limits of confidentiality. Inmates are informed of the services, however inmate interviews indicated most of the inmates are not aware of these services that are available to them. Most inmates interviewed indicated they knew they could ask to speak to mental health if they needed to, but many were unsure of other services that are available. However, the inmates also stated that they had not had any need for such services.

There have been no inmates detained solely for civil or immigration purposes.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Evidence Relied upon to make Compliance Determination:

1. WCCF Completed PAQ
2. WCCF Policy
3. Inmate Handbook
4. Informational posters
5. WCCF Website
6. Staff Interviews
7. Inmate Interviews

Findings:

The facility has established a procedure to receive third-party reports of sexual abuse and sexual harassment. The WCCF policy is written in accordance with the standards, stipulating that all third-party reports will be accepted and investigated. The WCCF publicly provides a method for the receipt of third-party reports of sexual abuse or harassment. The Auditor reviewed the WCCF website. The WCCF website has a document on its PREA page that contains information about PREA, as well as the agency PREA policy. It also contains contact and reporting information for jail officials should any one wish to report an incident of sexual abuse or harassment on behalf of an inmate. <https://www.webercountyutah.gov/sheriff/corrections/prea.php>

There are posters throughout the facility and in the front visitation lobby regarding third-party reporting and the number to contact with a complaint, as well as the website to submit an email on behalf of an inmate. The inmates are provided a hotline and this information is listed in the inmate handbook, and informational posters near the inmate phones in the living units.

Staff interviews reveal that they are aware of their obligation to accept and immediately act on any third-party reports received. Staff indicate they will accept a third-party report from a family member, friend, or another inmate. They would document the report and inform their supervisor and the report would be handled the same as any other allegation or report and investigated thoroughly.

Offenders are provided this information at intake and offender interviews indicate that they are aware that family or friends can call or write and report an incident of sexual abuse on their behalf.

The WCCF has not received any third-party reports of sexual assault or harassment during this reporting period.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

**115.61 Staff and agency reporting duties**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Evidence Relied upon to make Compliance Determination:

1. WCCF Completed PAQ
2. WCCF Policy 606
3. Review of investigative files

Interviews with the following:

- PREA Coordinator
- Medical and Mental Health Staff
- Random Staff

Findings:

WCCF policy is written in accordance with the standard and requires all staff, contractors, and volunteers to immediately report any knowledge, suspicion or information related to sexual abuse or harassment to a supervisor. Per policy: Any employee, agency representative, volunteer or contractor who becomes aware of an incident of sexual abuse, sexual harassment or retaliation against inmates or staff shall immediately notify a supervisor, who will forward the matter to a sexual abuse investigator (28 CFR 115.61). Threats or allegations of sexual abuse and sexual harassment, regardless of the source, shall be documented and referred for investigation. Sexual abuse and sexual harassment reports shall only be made available to those who have a legitimate need to know, and in accordance with this policy and applicable law (28 CFR 115.61).

During the site review, all staff members interviewed were asked if they were required by policy to report any instances or suspicions of sexual abuse or harassment. All the staff members responded unequivocally that they were required to report any such instances. The auditor also informally asked the same question of contractor staff, and they stated that they would report any instance of sexual abuse or harassment. Interviews with staff indicate they are very clear regarding their duties and responsibilities about reporting PREA related information, including anonymous and third-party reports.

During random staff interviews, all the staff members stated that they were required by policy to report any instance of sexual abuse or harassment or retaliation for making reports. They were also asked if that included alleged behavior by staff or contractors or volunteers. All staff members who were randomly interviewed said that they were obligated to report any such allegations or suspicions, no matter who it involved. Staff articulated their understanding that they are required to report any information immediately and document such in a written report.

WCCF policy requires confidentiality of all information of sexual abuse or harassment beyond what is required to be shared as a part of the reporting, treatment, or

investigation. During the random staff interviews, staff were asked about their requirement for maintaining confidentiality. The staff understand the need to keep the information limited to those that need to know to preserve the integrity of the investigation. All the interviewed staff stated that details related to either inmate allegations or staff allegations should remain confidential. A targeted interview with the PREA Coordinator verified that all investigative files are kept confidential with limited access.

The WCCF does not typically house youthful offenders, and they have not held any during this review period.

WCCF policy requires that all medical and mental health personnel report the mandatory reporting requirements and limits of confidentiality to victims of sexual abuse. Interviews with medical staff indicate they are aware of their mandatory reporting requirements and comply with the mandate to disclose the limits of their confidentiality. Medical staff are aware of their responsibilities to report information, knowledge, or suspicions of sexual abuse, sexual harassment, retaliation, staff neglect, or violations of responsibilities which may have contributed to an incident.

Targeted interviews with the PREA Coordinator, as well as random staff interviews verified that the agency reports all allegations of sexual abuse or harassment received from a third party are referred for investigation and immediately acted upon.

All allegations of sexual abuse and harassment are reported to the on-duty supervisor, who initiates an investigation. The reporting officer and supervisor create a report, and this report is forwarded to the PREA Coordinator for review and further action. In addition, the PREA Coordinator and other command staff are notified through the chain of command.

The Auditor conducted a formal interview with one of the facility investigators, who indicated that all allegations are immediately reported and investigated. The Auditor reviewed the investigative files for all for allegations during the review period and determined that they were promptly investigated. A hotline is available to the inmates at the Weber County Correctional Facility and is also available for third-party reporting.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

	<p>Evidence Relied upon to make Compliance Determination:</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Agency Administrator</li> <li>• Random Staff</li> </ul> <p>Findings:</p> <p>WCCF policy is written in compliance with the standard and requires that when the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay).</p> <p>Random interviews with staff indicate they are very clear about their duty to act immediately if an offender is at risk of imminent sexual abuse. Staff indicated they would immediately remove the inmate from the situation, keep them separate and find alternate housing. Staff stated they would ensure the inmate was kept safe, away from the potential threat and an investigation was completed by the supervisor. Classification staff would also be notified.</p> <p>Targeted interviews with the Jail Administrators and the PREA Coordinator confirmed that it is the policy of the agency to respond without delay when inmates are potentially at risk for sexual abuse or any other types of serious risk.</p> <p>Segregation may be ordered immediately to protect the inmate or others, but the action must be reviewed within 72 hours by the appropriate authority.</p> <p>WCCF reports in the PAQ that there have been no determinations made that an offender was at substantial risk of imminent sexual abuse. Staff are aware of their obligations with respect to this standard. This was confirmed by staff interviews.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

Evidence Relied upon to make Compliance Determination:

1. WCCF Completed PAQ
2. WCCF Policy 606

Interviews with the following:

- PREA Coordinator
- Agency Administrator

Findings:

The agency's policy is written in accordance with the standard. Per policy, If there is an allegation that an inmate was sexually abused while he/she was confined at another facility, the Jail Commander shall notify the head of that facility as soon as possible but not later than 72 hours after receiving the allegation. The Jail Commander shall ensure that the notification has been documented (28 CFR 115.63).

During this review period, the facility reported receiving no notifications from an inmate alleging sexual abuse while incarcerated at another facility that needed to be reported. According to targeted interviews with the Jail Administrator and PREA Coordinator, if they received such a notice, they would immediately report such an allegation to the facility administrator and document such a notice. They confirmed their understanding of their affirmative requirement to report allegations in accordance with the standard.

WCCF requires that if the agency receives notice that a previously incarcerated inmate makes an allegation of sexual abuse that occurred in the WCCF, it would be investigated in accordance with the standards. Per policy, if an allegation from another facility or agency is received regarding sexual abuse within this correctional facility, it shall be investigated in accordance with PREA standards (28CFR 115.63).

The WCCF reported receiving no notifications in the past 12 months from another facility that one of their former inmates alleged being sexually abused while incarcerated at the WCCF. Interviews with the PREA Coordinator confirm the staff are aware of their obligation to fully investigate allegations received from other facilities.

Further, interviews with the staff, both formal and informal, revealed that staff is aware of their obligations with regard to reporting, and there is a universal understanding and commitment to immediately report any allegations of sexual abuse or harassment, which increases the probability that abuse will be detected, reported and investigated.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

<b>115.64</b>	<b>Staff first responder duties</b>
	<p data-bbox="256 188 959 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 266 544 300"><b>Auditor Discussion</b></p> <hr/> <p data-bbox="256 344 1082 378">Evidence Relied upon to make Compliance Determination:</p> <ol data-bbox="256 412 1007 613" style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Facility Action Plan</li> <li>4. Review of investigative files</li> <li>5. Interviews with Random Staff, PREA Coordinator</li> </ol> <p data-bbox="256 658 384 692">Findings:</p> <p data-bbox="256 725 1485 882">The WCCF policy is written in accordance with the standard and indicates actions staff should take in the event of learning an inmate has been sexually assaulted. If an allegation of inmate sexual abuse is made, the first deputy to respond shall (28 CFR 115.64):</p> <ol data-bbox="256 927 1477 1621" style="list-style-type: none"> <li>(a) Separate the parties.</li> <li>(b) Request medical assistance as appropriate. If no qualified health care or mental health professionals are on-duty when a report of recent abuse is made, staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate qualified health care and mental health professionals (28 CFR 115.82).</li> <li>(c) Establish a crime scene to preserve and protect any evidence. Identify and secure witnesses until steps can be taken to collect any evidence.</li> <li>(d) If the time period allows for collection of physical evidence, request that the alleged victim, and ensure that the alleged abuser, do not take any actions that could destroy physical evidence (e.g., washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, eating).</li> <li>(e) Consider whether a change in classification or housing assignment for the victim is needed or whether witnesses to the incident need protection, both of which may include reassignment of housing.</li> <li>(f) Determine whether the alleged perpetrator should be administratively segregated or administratively transferred during the investigation.</li> </ol> <p data-bbox="256 1666 1477 1778">If the first responder is not a deputy, the responder shall request the alleged victim to refrain from any actions that could destroy physical evidence and then immediately notify a deputy.</p> <p data-bbox="256 1823 1477 2069">Should an investigation involve inmates who have disabilities or who have limited English proficiency, the first responder shall not rely on inmate interpreters, inmate readers or other types of inmate assistants, except in limited circumstances where an extended delay in obtaining an interpreter could compromise inmate safety, the performance of first responder duties or the investigation of sexual abuse or sexual harassment allegations (28 CFR 115.16).</p>

Per the PAQ:

In the past 12 months, the number of allegations that an inmate was sexually abused: 14

Of these allegations of sexual abuse in the past 12 months, the number of times the first security staff member to respond to the report separated the alleged victim and abuser: 13

In the past 12 months, the number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence: 14

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence: 14

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report requested 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: 14

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to

respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating: 14

Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder: 0

There were no inmates during the on-site portion of the audit who had reported sexual abuse.

The Auditor conducted interviews with staff first responders. Security first responders were asked to explain the steps they would take following an alleged sexual abuse reported to them. Most all staff interviewed said that they would notify their supervisor after separating the inmates and wait for further instructions. The staff were able to appropriately describe their response procedures and the steps they would take, including separating the alleged perpetrator and victim and securing the scene and any potential evidence. The Auditor was informed the scene would be preserved and remain so until the Investigator arrived to process the scene. A targeted interview with the PREA Coordinator and Investigator indicated that once the initial steps were done and the scene was secure, an investigation would be initiated.

The Auditor conducted interviews with supervisory staff and investigators. The Auditor asked what the supervisor response and role would be following a report of

	<p>sexual assault. The supervisor stated that they would ensure the alleged victim and alleged abuser were removed from the area and kept separately in the facility. The crime scene would be secured and staff member posted to ensure no one entered the scene. The alleged victim would be taken to medical for treatment and transported to the ER for a forensic exam if needed. The PREA Coordinator would also be informed. The supervisor stated the assigned investigators would be the only ones allowed in the crime scene to process the evidence.</p> <p>WCCF Policy requires that if the first responder is not a security staff member, the staff immediately notify a security staff member. The Auditor conducted formal interviews with non-security personnel. Staff were asked what actions they take following an alleged sexual abuse reported to them. Staff indicated they would ensure the victim remains with them and immediately inform a deputy. They would also request the victim not take actions to destroy evidence.</p> <p>Medical personnel interviewed stated they would first ensure a victim's emergency medical needs are met. They stated they would request the victim not to use the restroom, shower, or take any other actions which could destroy evidence. Medical staff informed they would immediately notify a supervisor if they were the first person to be notified of an alleged sexual abuse. Victims would be offered a forensic exam, if needed.</p> <p>The auditor reviewed the investigative files for the review period and found that the facility is acting in accordance with agency policy and the standard.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Coordinated Response Plan</li> <li>4. Sexual Assault Checklist</li> <li>5. Interviews with <ol style="list-style-type: none"> <li>a. Random staff</li> <li>b. Supervisory staff</li> <li>c. Medical staff</li> <li>d. Mental Health staff</li> <li>e. PREA Coordinator</li> </ol> </li> </ol>

	<p>Findings:</p> <p>WCCF has a coordinated facility plan to address actions in response to an incident of sexual abuse among facility staff, including first responders, supervisory staff, medical, investigative staff, and facility administrators. The auditor reviewed this document and found it comprehensive in addressing allegations of sexual assault.</p> <p>Interviews with multiple staff indicate that they understand their duties in responding to allegations of sexual assault and are knowledgeable in their role and the response actions they should take.</p> <p>The WCCF has a Sexual Assault Investigation Checklist document to ensure that all aspects of the response are covered and nothing is missed. The auditor reviewed this document and found that it covered all aspects of the response procedure. Many of the facility staff involved in responding to incidents of sexual abuse are a part of the incident review team.</p> <p>In each case of sexual assault reported during this review period, the alleged victims and perpetrators were immediately separated upon staff learning of the incident.</p> <p>A review of the investigative files reveal that all appropriate steps were taken regarding the standard. Supervisory staff were notified by the staff that became aware of the incident, as well as the PREA Coordinator.</p> <p>The auditor interviewed several staff, including the Jail Administrators and PREA Coordinator who all described the jail's coordinated response in the case of an allegation of sexual abuse or harassment. The response begins with the allegation and first responder action to protect the victim, secure the crime scene and protect any potential evidence. The initial investigation begins with the first responders and supervisors and then the facility investigators. Depending on the nature of the allegation, the investigation will either begin as administrative or criminal. In the case of a criminal investigation, the victim is treated in accordance with policy and provided forensic exams and ancillary services, as well as advocacy services. The remainder of the investigation is dictated by the nature of the allegation. Regardless, all investigations are completed and a finding is assigned. It may be referred for criminal prosecution or handled administratively and could require medical and mental health services and monitoring for retaliation and notice to the victim about the outcome of the investigation.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard

	<p><b>Auditor Discussion</b></p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Agency Administrator</li> </ul> <p>Findings:</p> <p>The WCCF has not entered into any agreement that limits the agency’s ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p> <p>The WCCF policy states that, “The Office shall not enter into or renew any collective bargaining agreement or other agreement that limits the office'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 (28 CFR 115.66).”</p> <p>Interviews with both the Jail Administrator and the PREA Coordinator verified that there is not a collective bargaining agreement in place.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.67</b>	<b>Agency protection against retaliation</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Agency Administrator</li> </ul> <p>Findings:</p> <p>The agency’s policy is written in accordance with the standard and requires staff and</p>

inmates who report substantiated allegations of sexual abuse or harassment are protected from retaliation for making such reports.

Policy states: All inmates and staff who report sexual abuse or sexual harassment, or who cooperate with sexual abuse or sexual harassment investigations, shall be protected from retaliation. Protective measures, including housing changes, transfers, removal of alleged abusers from contact with victims, administrative reassignment or reassignment of the victim or alleged perpetrator to another housing area, and support services for inmates or staff who fear retaliation shall be utilized (28 CFR 115.67).

The Jail Commander or the authorized designee shall assign a supervisor to monitor, for at least 90 days, the conduct and treatment of inmates or staff who report sexual abuse or sexual harassment, as well as inmates who were reported to have suffered sexual abuse, to determine if there is any possible retaliation. The supervisor shall act promptly to remedy any such retaliation. The assigned supervisor should consider inmate disciplinary reports, housing or program changes, negative staff performance reviews, or reassignment of staff members. Monitoring may continue beyond 90 days if needed. Inmate monitoring shall also include periodic status checks. The Jail Commander should take reasonable steps to limit the number of people with access to the names of individuals being monitored and should make reasonable efforts to ensure that staff members who pose a threat of retaliation are not entrusted with monitoring responsibilities. If any other individual who cooperates with an investigation expresses a fear of retaliation, the facility shall take reasonable measures to protect that individual against retaliation (28 CFR 115.67).

The Auditor conducted an interview with the staff member responsible for monitoring retaliation. The Auditor asked the staff member how she goes about monitoring retaliation. The staff member stated she reviews disciplinary charges and Incident Reports and any other actions related to the inmate including documents maintained in an inmate's file and his/her electronic record.

The Auditor asked the staff member the amount of time he will monitor for acts of retaliation. She stated the monitoring period would be a minimum of 90 days. In the event the inmate cannot be protected at the facility, the staff can and will recommend a transfer.

The Auditor asked how staff ensure the protection of an inmate who is being retaliated against by a staff member. The Auditor was informed the administration will discuss staff assignments with the supervisor to ensure the staff member is not placed in an area where the inmate is housed. The retaliation would be reported through the chain of command to ensure the staff member who is retaliating against an inmate is appropriately disciplined, if need be.

The PREA Coordinator and the Classification Supervisor both have the authority to move inmates around the facility or to other facilities or take other protective measures to assure inmates were not retaliated against. In addition, the Jail Administrator has the authority and would intervene in any way necessary to protect employees from retaliation if they reported incidents of sexual abuse or harassment.

	<p>The PREA Coordinator and Jail Administrator monitor the progress of PREA investigations and receives regular briefings until the investigation is complete.</p> <p>There have been no reported incidents of sexual abuse/harassment that would require the staff to invoke any protections from retaliation. In addition, staff interviews confirmed their knowledge of the requirements for protection from retaliation for both inmates and staff members. All staff members interviewed affirmed that they had an affirmative requirement to report any incident of retaliation and reported that they know that they could report such incidents anonymously.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Review of all Investigative Files from the past 12 Months</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Classification Supervisor</li> </ul> <p>Observation of the following:</p> <ul style="list-style-type: none"> <li>• Observation of Inmates in restrictive housing</li> </ul> <p>Findings:</p> <p>The agency's policy is written in accordance with the standard and requires the use of segregated housing be subjected to the requirements of PREA standard 115.43. Policy states:</p> <p>Inmates at high risk for sexual victimization shall not be placed in involuntary protective custody unless an assessment of available alternatives has been made and it has been determined that there is no reasonably available alternative means of separation. Inmates may be held in involuntary protective custody for less than 24 hours while an assessment is completed.</p> <p>If an involuntary protective custody assignment is made because of a high risk for victimization, the Jail Commander shall clearly document the basis for the concern for the inmate's safety and the reasons why no alternative means of separation can be</p>

arranged (28 CFR 115.43).

The facility shall assign these inmates to involuntary protective custody only until an alternative means of separation from likely abusers can be arranged, not ordinarily in excess of 30 days.

Inmates placed in temporary protective custody shall continue to have reasonable access to programs, privileges, education, and work opportunities. If restrictions are put in place, the Jail Commander shall document the following:

- (a) The opportunities that have been limited
- (b) The duration of the limitation
- (c) The reasons for such limitations

Every 30 days, the Jail Commander shall afford each such inmate a review to determine whether there is a continuing need for protective custody (28 CFR 115.43).

Interviews with staff state they would not place an inmate in segregation for reporting sexual abuse or assault. Staff indicated they would not ordinarily place a sexual assault victim in segregation unless he or she had requested it. Staff explained that other alternatives are explored and segregation is utilized as a last resort. The Auditor was informed of and observed several areas in the facility to place sexual abuse victims to ensure they are protected from abusers without having to place the victim in segregated housing.

The auditor reviewed all the WCCF restrictive housing areas and through informal discussions with supervising officers, no staff indicated that inmates were assigned to restrictive housing because of their sexual vulnerability.

The agency has had no incidents that have required involuntary restrictive protective custody. Interviews with the supervisory staff as well as the PREA Coordinator and Classification Supervisor confirmed their knowledge of their requirements to appropriately adhere to the elements of standard 115.43, after a victim's allegation of abuse.

In addition, during targeted interviews with the Classification Supervisor and the PREA Coordinator, they both verified that there have been no instances of inmates being placed in restrictive housing because of the sexual victimization or vulnerability. There were no records or documentation to review regarding this standard because there were no instances of the use of restrictive housing to protect and inmate who was alleged to have suffered sexual abuse.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard

## Auditor Discussion

### Evidence Relied upon to make Compliance Determination:

1. WCCF Completed PAQ
2. WCCF Policy 606
3. Review of Investigative files
4. Interviews with Staff
5. Documentation of Investigator Training
6. Certificates of Completion for Departmental Investigators
7. Training Curricula for Investigative Training specific to Corrections

### Findings:

The WCCF policy is written in accordance with the standard. Policy states that: An administrative investigation, criminal investigation or both shall be completed for all allegations of sexual abuse and sexual harassment (28 CFR 115.22).

Administrative investigations shall include an effort to determine whether the staffs' actions or inaction contributed to the abuse. All administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Only investigators who have completed office-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases (28 CFR 115. 71).

When practicable, an investigator of the same sex as the victim should be assigned to the case. Sexual abuse and sexual harassment investigations should be conducted promptly and continuously until completed. Investigators should evaluate reports or threats of sexual abuse and sexual harassment without regard to an inmate's sexual orientation, sex or gender identity. Investigators should not assume that any sexual activity among inmates is consensual.

The departure of the alleged abuser or victim from the employment or control of the correctional facility or office shall not provide a basis for terminating an investigation (28 CFR 115. 71).

If the investigation is referred to another agency for investigation, the Office shall request that the investigating agency follow the requirements as provided in 28 CFR 115.21 (a) through (e). The referral shall be documented. The Office shall cooperate with the outside agency investigation and shall request to be informed about the progress of the investigation (28 CFR 115. 71). If criminal acts are identified as a result of the investigation, the case shall be presented to the appropriate prosecutor's office for filing of new charges (28 CFR 115. 71).

Inmates alleging sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation (28 CFR 115.71).

All completed written investigations shall be forwarded to the Jail Commander or, if the allegations may reasonably involve the Jail Commander, to the Sheriff. The Jail

Commander or Sheriff shall review the investigation and determine whether any allegations of sexual abuse or sexual harassment have been substantiated by a preponderance of the evidence (28 CFR 115. 71; 28 CFR 115. 72).

The auditor reviewed investigative reports for the allegations of sexual misconduct during the past 12 months. All reports contained the required elements as dictated by the standard.

If at any time during the investigation, it appears the charges are criminal in nature, the investigation will be conducted as a criminal investigation.

Per the PAQ, there has been one substantiated allegation of conduct that appear to be criminal that were referred for prosecution in this review period.

The PREA Coordinator is required to maintain written investigative reports for as long as the alleged abuser is incarcerated or employed by the WCCF, plus an additional 5 years. Policy prohibits the termination of an investigation if an inmate is released or a staff member is terminated or terminates employment.

WCCF investigators are required by policy to cooperate with outside investigators and attempt to communicate to remain informed about the progress of a sexual abuse investigation. According to targeted interviews with the PREA Coordinator, if an outside agency were to investigate an allegation of sexual abuse, the departmental investigator serves as a liaison and would keep jail administrators informed of the progress of the investigation. There has been one staff involved investigation conducted by an outside agency during the audit period.

At the time of the on-site audit, the facility employed and provided training records for 5 staff members who have received specialized training to conduct sexual abuse investigations in confinement facilities. The auditor was provided training curricula and training certificates of designated investigators. The auditor reviewed and verified that each of the facility investigators had proof of receiving the specialized training required by the standard. Each investigator had received specialized training to conduct sexual abuse investigations in confinement settings. Targeted interviews with a facility investigator verified they are available to respond immediately if necessary.

The Auditor conducted a formal interview with one of the facility's designated PREA Investigators. The Auditor asked the Investigator to describe the process when he is conducting an investigation.

She stated they interviews the victim, alleged perpetrator, inmate witnesses, and staff witnesses, if applicable. He stated he reviews the scene, preserves any evidence if necessary and then begins looking at other documents. She reviews criminal histories on all inmates involved, disciplinary history, incident reports, and classification actions. The investigator reviews video footage if applicable, telephone recordings, staff logs, and any other relevant items which could be considered evidence to support the determination. If not already aware, she will notify the facility administration of the allegation. If at any point during the investigation she

	<p>determines there could be potential criminal charges involved, the investigation would be reviewed and discussed by the command staff. The Investigator stated she begins her investigation immediately after receiving an allegation.</p> <p>All investigative files are maintained electronically with limited access. Investigative files are maintained for a minimum of five years after the abuser has been released or a staff abuser is no longer employed. The WCCF does not require inmates to submit to a polygraph examination during sexual abuse investigations.</p> <p>If an allegation is reported anonymously, the PREA Coordinator/Investigator stated the investigation would be handled the same as any other investigation. Staff indicate they would continue the investigation even if an inmate is released or a staff member terminates employment during the investigation.</p> <p>The auditor reviewed investigative reports for the allegations of sexual misconduct during the past 12 months. A review of the investigative files indicate that the investigators are conducting the investigations in accordance with the standard. The reports show evidence that the investigator is gathering evidence, interviewing witnesses, victims, perpetrators, and conducting the investigation promptly. The investigation appears to be conducted promptly, thoroughly, and objectively.</p> <p>After a review, the Auditor determined the facility substantially meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Review of Investigative files for the past 12 months</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> </ul> <p>Findings:</p> <p>The agency's policy is in compliance with the requirements of the standard and imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Policy states: All completed written investigations shall be forwarded to the Jail Commander or, if the allegations may reasonably involve the Jail Commander, to the Sheriff. The Jail Commander or Sheriff shall review the investigation and determine whether any</p>

	<p>allegations of sexual abuse or sexual harassment have been substantiated by a preponderance of the evidence (28 CFR 115. 71; 28 CFR 115. 72).</p> <p>A formal interview with an agency investigator confirmed that the staff responsible for administrative adjudication of investigations is aware of the requirements of the evidentiary standard. She was able to articulate what preponderance means and how she arrives at the outcome for an investigation.</p> <p>The auditor reviewed the investigative files for the review period. There has been one substantiated allegation of sexual abuse during this audit period. A review of the file and interviews with staff indicates that the investigations are being conducted in accordance with the standard.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.73</b>	<b>Reporting to inmates</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Review of investigative files and notification to inmate</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Agency Investigator</li> <li>• Inmates that reported sexual abuse</li> </ul> <p>Findings:</p> <p>The WCCF policy is written in accordance with the standard and requires and inmate be notified when a sexual abuse allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. Policy states:  The Jail Commander or the authorized designee shall inform a victim inmate in writing whether an allegation has been substantiated, unsubstantiated, or unfounded. If the Office did not conduct the investigation, the Office shall request relevant information from the investigative agency in order to inform the inmate.  If a staff member is the accused (unless the Office has determined that the allegation is unfounded), the inmate shall also be informed whenever:</p> <ol style="list-style-type: none"> <li>(a) The staff member is no longer assigned to the inmate's unit or employed at the facility.</li> </ol>

	<p>(b) The Office learns that the staff member has been indicted or convicted on a charge related to sexual abuse within the facility.</p> <p>If another inmate is the accused, the alleged victim shall be notified whenever the Office learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility.</p> <p>All notifications or attempted notifications shall be documented. When notification is made while the inmate is in custody, the inmate will sign a copy of the notification letter. The letter will be added to the case file (28 CFR 115.73).</p> <p>The auditor conducted targeted interviews with the PREA Coordinator and an agency investigator. The targeted interviews verified that there has been one external investigation in the past 12 months. The agency is responsible for both criminal and administrative investigations. The WCCF referred one incident that involved staff to an outside agency. Roy City informed the WCCF information necessary to inform the inmate regarding the case.</p> <p>The Auditor conducted an interview with an agency Investigator. She indicated that inmates are informed of the results of an investigation at the conclusion of the investigation. The PREA Coordinator will ensure notification to the inmate in the form of a letter, and document the notification.</p> <p>There were no inmates who reported sexual abuse still in custody at WCCF during the on-site portion of the audit.</p> <p>The Auditor reviewed the investigative files for the reported allegations of sexual abuse. The WCCF made notification to the inmates at the conclusion of the investigation as required. Interviews with the facility investigator confirmed their knowledge of their affirmative requirement to report investigative finding to inmates in custody.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Review of investigative files</li> <li>4. Interviews with Staff</li> <li>5. Interviews with Inmates</li> </ol>

Findings:

The WCCF PREA and disciplinary policies were reviewed and are in compliance with the requirements of the standard. Staff is subject to disciplinary sanctions up to and including termination for violating the sexual abuse or sexual harassment policies. Policy states that: The staff shall be subject to disciplinary sanctions, up to and including termination, for violating this policy. Termination shall be the presumptive disciplinary sanction for staff members who have engaged in sexual abuse. All discipline shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations for violations of sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to the law enforcement agency that would handle any related investigation and to any relevant licensing bodies (28 CFR 115. 76). Policy also states that: Sexual abuse and sexual harassment between staff, volunteers or contract personnel and inmates is strictly prohibited. The fact that an inmate may have initiated a relationship or sexual contact is not a defense to violating this policy (Utah Code 76-5-412).

Any incident involving allegations of staff-on-inmate sexual abuse or sexual harassment shall be referred to the Internal Affairs Bureau for investigation.

According to the submitted PAQ:

In the past 12 months, the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies: 0

In the past 12 months, the number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies: 0

In the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse): 0

In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies: 0

Discussions with the PREA Coordinator and Jail Administrator verified that there were no terminations or disciplinary actions related to sexual abuse or harassment of inmates in the past 12 months.

Interviews with facility staff and administrators verified that staff consider a violation of the PREA policy to be of sufficient seriousness to warrant termination and prosecution in accordance with the law. During staff interviews, the staff articulated that they are aware that the agency has a zero-tolerance policy regarding sexual abuse and any such incidents would be investigated and reported to the appropriate agency for prosecution, if necessary.

The Auditor interviewed facility administration regarding the facility's staff disciplinary policy. Facility administration indicated that if a staff member is

	<p>terminated for violating the facility’s sexual assault and harassment policy, and if the conduct is criminal in nature, the investigation will be referred for possible prosecution. If an employee under investigation resigns before the investigation is complete, or resigns in lieu of termination, that does not terminate the investigation or the possibility of prosecution if the conduct is criminal in nature. The facility would still refer the case when a staff member terminates employment that would have otherwise been terminated for committing a criminal act of sexual abuse or sexual harassment. Staff confirmed past incidents being referred to law enforcement for prosecution and notifying the applicable licensing board upon termination or resignations in lieu of termination.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.77	Corrective action for contractors and volunteers
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Interviews with Staff</li> </ol> <p>Findings:</p> <p>The WCCF PREA and disciplinary policies were reviewed and are in compliance with the requirements of the standard. Policy states: Any contractor or volunteer who engages in sexual abuse within the facility shall be immediately prohibited from having any contact with inmates. He/she shall be promptly reported to the law enforcement agency that would investigate such allegations and brought to the attention of any relevant licensing bodies (28 CFR 115. 77).</p> <p>Per the PAQ and staff, in the past 12 months, there have been no instances where volunteers or contractors have engaged in sexual abuse or harassment. The PREA Coordinator and investigative staff verified during targeted interviews that there had been no instances of sexual abuse or harassment by contractors or volunteers in the past 12 months.</p> <p>A targeted interview with multiple contract staff members verified that they consider a violation of the PREA policy to be of sufficient seriousness to warrant termination from the facility, and possible prosecution in accordance with the law. The contract staff were aware that the agency has a zero-tolerance policy regarding sexual abuse</p>

	<p>and any such incidents would be investigated and reported to the appropriate agency for prosecution, if necessary.</p> <p>The Auditor interviewed facility administration regarding the disciplinary policy regarding contract staff and volunteers. Facility administration indicated that contractors and volunteers who violate the sexual abuse or sexual harassment policies will have their security clearance revoked immediately. Contract staff would most likely be terminated by the contract employer. If the conduct is criminal in nature, it will be referred for possible prosecution.</p> <p>An interview with a facility volunteer confirmed that they have had PREA training through the agency, and is aware of the disciplinary policy for contract staff and volunteers.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.78</b>	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 600, 606</li> <li>3. Inmate Handbook</li> <li>4. Review of Investigative Files</li> <li>5. Review of Classification Records</li> </ol> <p>Interviews with:</p> <ol style="list-style-type: none"> <li>1. PREA Coordinator</li> <li>2. Investigative Staff</li> </ol> <p>Findings:</p> <p>The WCCF policy directs that inmates are not permitted to engage in non-coercive sexual contact and may be disciplined for such behavior. Policy dictates that staff is prohibited from disciplining an inmate who makes a report of sexual abuse in good faith and based on a reasonable belief the incident occurred, even if the investigation does not establish sufficient evidence to substantiate the allegation. WCCF prohibits sexual activity between inmates. Inmates found to have participated in sexual activity are internally disciplined for such activity. If the sexual activity between inmates is found to be consensual, staff will not consider the sexual activity as an act of sexual abuse.</p> <p>WCCF policy states inmates are subject to formal disciplinary action following an administrative finding that they engaged in inmate-on-inmate sexual abuse.</p>

Policy states:

Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse (28 CFR 115.78(a)). Discipline shall be commensurate with the nature and circumstances of the offense committed; the inmate's disciplinary history and the sanctions imposed for comparable offenses by other inmates with similar histories (28 CFR 115.78(b)).

The sanctions imposed for rule violations can range from counseling, loss of privileges, extra work, loss of good and/or work time, fines and restitution for damaging jail property, to implementation of the Disciplinary Segregation Policy (Utah Code 17-22-28). To the extent that there is available therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for sexual abuse, the facility shall consider whether to require an inmate being disciplined for sexual abuse to participate in such interventions as a condition of access to programming or other benefits (28 CFR 115.78(d)).

According to the submitted PAQ, there have been two instances of inmate-on-inmate sexual abuse or substantiated allegations of staff on inmate sexual abuse or harassment or criminal findings of guilt for inmate-on-inmate sexual abuse. The auditor reviewed the investigative files for the allegations of sexual misconduct within the last 12 months.

WCCF policy states:

Discipline may be imposed for sexual activity between inmates. However, such activity shall not be considered sexual abuse for purposes of discipline unless the activity was coerced (28 CFR 115.78(g)). No discipline may be imposed for sexual contact with staff unless there is a finding that the staff member did not consent to such contact (28 CFR 115.78(e)). No inmate may be disciplined for falsely reporting sexual abuse or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation, if the report was made in good faith based upon a reasonable belief that the alleged conduct occurred (28 CFR 115.78(f)).

According to WCCF policy, disciplinary action for inmates is proportional to the abuse committed as well as the history of sanctions for similar offenses by other inmates with similar histories.

WCCF policy requires that staff consider whether an inmate's mental health contributed to their behavior before determining their disciplinary sanctions.

The WCCF has mental health staff available during regular business hours, but has mental health staff on call for emergent needs and can transfer inmates if they need more in-depth mental health treatment. Any decision to offer counseling or therapy to offenders and the initiation of any such counseling or therapy for individuals who have committed sexual offenses would be done at the discretion of the mental health staff in conjunction with a treatment plan for the offender.

WCCF policy stipulates that inmates will not be disciplined for sexual contact with

	<p>staff unless it is substantiated that the staff did not consent. There were no unsubstantiated or substantiated instances of inmate on staff sexual abuse or harassment during the audit period.</p> <p>WCCF policy prohibits disciplining inmates who make allegations in good faith with a reasonable belief that prohibited conduct occurred. There were no instances in the past 12 months where inmates were disciplined for filing a report or making unfounded allegations of sexual abuse or harassment. The Auditor reviewed investigative files, classification files, inmate records and interviewed staff. There is no evidence to suggest an inmate received a disciplinary charge for making an allegation of sexual abuse or sexual harassment filed in good faith.</p> <p>Interviews with staff and inmates confirmed their knowledge of the policy regarding inmates engaging in non-coerced sexual activity. Furthermore, the staff and inmates were aware that the agency has an internal disciplinary process for inmates who engage in sexually abusive behavior against other inmates and knew that they could be disciplined for sexual abuse.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. PREA Screening and Follow-up</li> <li>4. Random Review of Files</li> <li>5. Informed Consent</li> <li>6. Follow up mental health referral within 14 days</li> </ol> <p>Interviews with:</p> <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. Medical Staff</li> <li>c. Inmate that reported previous abuse</li> </ol> <p>Findings:</p> <p>The medical contractor, VitalCore has policy that is consistent with the requirements of the standards.</p> <p>Per policy, if the screening required indicates that an inmate has experienced prior</p>

sexual victimization, whether in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, work, education, and program assignments. Medical and mental health practitioners shall obtain written 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 years old, in accordance with the mandatory reporting law.

The staff member that receives the initial report of prior sexual abuse during the risk screening interview will refer the inmate to a mental health professional.

A random review of inmate files validated that the screenings were being conducted in accordance with the standards and the policy. In addition, there were several documented instances provided by the facility where inmates who were identified as needing follow up care, were offered the follow-up care within the 14-day period prescribed by the standards. An interview with medical staff confirms that if an inmate answers yes on the screening question that they have experienced previous victimization, it automatically triggers an alert for a referral and the inmate is offered a follow-up meeting, which is scheduled with the mental health staff.

During the on-site review, the auditor interviewed five inmates identified as having reported previous sexual victimization. A formal interview with the inmates revealed that the inmates were offered a follow-up meeting with mental health in accordance with the standard.

An interview with mental health staff confirmed that they meet with inmates that reported previous victimization, within 14 days of the referral. He indicated that they provide assessment and follow-up as needed.

The Auditor conducted a formal interview with medical staff. The medical staff member indicated that inmates identified as needing follow-up mental health care are scheduled to be seen within 14 days. When asked who this information would be shared with, the medical staff member was clear about confidentiality and that this information would be only be shared with those who needed to know. This information is recorded in the electronic medical system, and each medical staff member has an individual login and password. Only medical personnel have access to this system. An interview with the Health Services Administrator confirmed that information related to sexual victimization and sexual abusiveness is kept secure and confidential. This information is limited access and only used to make housing, bed, work, education, and other program assignments.

WCCF policy states that medical and mental health personnel will 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. Interviews with medical staff confirm that they would gain informed consent before

	<p>reporting information about prior sexual victimization that did not occur in an institutional setting. The Auditor reviewed examples of informed consent forms signed by inmates.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
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	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Interviews with Staff, including the following: <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. Medical Staff</li> <li>c. Random Security Staff</li> </ol> </li> </ol> <p>Findings:</p> <p>The WCCF policy is written in compliance with the standard. Per policy, inmate victims of sexual abuse shall 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. Inmate victims of sexual abuse while incarcerated shall be 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. Treatment services shall be provided to the victim — without financial cost to the victim and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Interviews with medical staff, as well as the PREA Coordinator confirm that victims of sexual abuse would receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Medical staff provide coverage 24 hours per day, seven days a week. While there have been no documented incidents of sexual abuse requiring emergency medical or mental health services during the review period, the staff are aware of their responsibilities regarding protection of the victim and evidence in the case of a report of sexual assault. Per the HSA, the level of care at the Weber County Correctional Facility is consistent with the level of care demonstrated within the community. In addition, the contracted medical and mental</p>

	<p>health staff are available 24 hours per day in the case of emergency and/or crisis intervention services. This was confirmed by the PREA Coordinator, HSA, and other medical staff. For services that are outside the scope of their experience, the victim can be treated at the local emergency department. Forensic exams are conducted at the facility through NUSAFE by qualified forensic nurse examiners.</p> <p>An advocate from the rape crisis center is available at the request of the victim.</p> <p>WCCF policy provides that all inmate victims of sexual abuse will be offered information and access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate. Medical staff was interviewed and confirmed the fact that they knew that they had an affirmative responsibility to provide care without regard to the ability of the victim pay for services or identify the alleged abuser, and the requirement to make a provision for pregnancy related medical care and/or STD prophylaxis if required. They confirm that victims of sexual abuse would be offered these services. There have been no incidents of sexual assault at the WCCF in the last 12 months requiring these services.</p> <p>WCCF policy states that forensic examinations will be performed by Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE) without a financial cost to the victim. The facility would call NUSAFE and they would respond to the facility. Interviews with medical staff, as well as the PREA Coordinator confirm that victims of sexual abuse would not be charged for services received as a result of a sexual abuse incident.</p> <p>There were no inmates during the onsite review that had reported sexual abuse.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Interviews with Staff, including the following: <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. Medical and Mental Health Staff</li> </ol> </li> <li>4. Interviews with Inmates</li> </ol>

Findings:

The WCCF policy is written in compliance with the standard. Per policy, the facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been sexually abused in a prison, jail, lockup, community corrections facility, or juvenile justice facility. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. The facility shall provide such victims with medical and mental health services consistent with the community level of care. Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests, as medically necessary. If pregnancy results from the conduct described in this section, victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services, such as prenatal care and access to pregnancy termination services, where available. Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections, as medically appropriate. Ongoing treatment services shall be provided to the victim without financial cost to the victim and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Interviews with medical and mental health staff confirm that these services would be available to inmates who have been victims of sexual abuse, and these services would be consistent with the community level of care. There have been no instances of sexual abuse during the review period requiring these services, therefore the Auditor was unable to review any related documentation regarding follow-up and ongoing medical and mental health care.

WCCF policy requires that inmate victims of sexual abusive vaginal penetration while in the Jail will be offered pregnancy tests. Inmate victims who become pregnant while in the Jail will receive comprehensive information about all lawful pregnancy-related medical services. Inmate victims of sexual abuse while in the Jail will be offered tests for sexually transmitted infections as medically appropriate. Interviews with medical staff confirm that female inmates who were victims of abusiveness vaginal penetration would be offered pregnancy tests. Inmate victims of sexual abuse would be offered tests for sexually transmitted infections and emergency prophylaxis. There have been no incidents of sexual assault at the WCCF in the last 12 months requiring these services.

WCCF policy indicates that all treatment services for sexual abuse will be 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. Interviews with medical staff confirm that these services would be provided to the inmate at no cost. There have been no incidents of sexual assault at the WCCF in the last 12 months requiring these services.

Staff interviews confirmed the presence of policies and procedures consistent with the standard and also confirmed the medical and mental health staffs' knowledge of the policy and standard. Interviews with inmates confirm they are generally aware of

	<p>the availability of services should they request or require them, particularly the availability of mental health. The local rape crisis center is available for advocacy services and inmates can request to speak with mental health.</p> <p>Information regarding these services is available on the form of a brochure given to the inmates at arrival, as well as posted in the inmate living areas.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Interviews with Staff</li> <li>4. Review of Investigations, including incident reviews</li> </ol> <p>Findings:</p> <p>The WCCF has a policy that governs the review of all substantiated or unsubstantiated allegations of sexual abuse. WCCF policy states that an incident review shall be conducted at the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded (28 CFR 115.86). The review should occur within 30 days of the conclusion of the investigation.</p> <p>The review team shall include upper-level management officials and seek input from line supervisors, investigators, and qualified health care and or mental health professionals, as appropriate.</p> <p>Per policy, the review team will prepare a written report of the team's findings, including, but not limited to, determinations made pursuant to paragraphs (a)-(e) of this section, and any recommendations for improvement. The report should be submitted to the Sheriff and the PREA coordinator. The Jail Commander or the authorized designee shall implement the recommendations for improvement or document the reasons for not doing so.</p> <p>Per the PAQ, interviews with staff and a review of the investigations, during the review period there have been administrative investigations of alleged sexual abuse at the facility. In preparation for the PREA audit, the facility just implemented the incident review process with their last allegation for October 2025. They now have a</p>

	<p>process in place to ensure that a review is completed for all allegations of sexual abuse, excluding unfounded complaints.</p> <p>The auditor reviewed the one incident review for this allegation and found it to be in compliance with agency policy.</p> <p>The PREA Coordinator is aware of the facility’s responsibility to complete an incident review for all allegations of sexual abuse resulting in a determination of substantiated or unsubstantiated.</p> <p>There is a standardized form that covers all facets of the standard.</p> <p>WCCF policy states that the review team will consider a need to change policy or practice to better prevent, detect, or respond to sexual abuse; if the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, perceived status, gang affiliation; the area in the Jail where the alleged incident occurred to assess whether physical barriers in the area may permit abuse; the adequacy of staffing levels in that area during different shifts; and whether monitoring technology should be deployed or augmented to supplement supervision by staff.</p> <p>An interview with two members of the incident review team confirms if there was an incident that required a review, all these factors would be considered. An interview with the PREA Coordinator confirms that a report of the findings, including recommendations for improvement, would be completed and submitted for inclusion in the file. The PREA Coordinator also stated any recommendations would be implemented, or the reasons for not doing so would be documented.</p> <p>The WCCF has appointed a team that conducts incident reviews at the conclusion of sexual assault investigations as stipulated by the standard. The incident review team includes upper-level management staff, investigative staff, the Health Services Administrator, Mental Health staff and the PREA Coordinator. This was confirmed by formal interview of the facility administrator and PREA Coordinator. A written report of the findings is prepared and maintained by the PREA Coordinator.</p> <p>After a review, the Auditor determined the facility substantially meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Evidence Relied upon to make Compliance Determination:

1. WCCF Completed PAQ
2. WCCF Policy 606
3. Annual Report
4. Interviews with Staff

Findings:

The WCCF policy is consistent with the requirements of the standard and requires that the Jail will collect annually accurate, uniform data for every allegation of sexual abuse necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice and complete an annual report based upon said data. Policy states that the facility will establish a process to ensure accurate, uniform data is collected for every allegation of sexual abuse at facilities under the direct control of this office, using a standardized instrument and set of definitions. Upon request, the Office shall provide all such data from the previous calendar year to the U.S. Department of Justice (DOJ) no later than June 30 (28 CFR 115.87).

1. The data collected shall 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 U.S. DOJ.
2. The data shall be aggregated at least annually.

The Auditor reviewed the Annual Report, available on the facility website, including aggregated sexual abuse data for calendar years 2025.

The Weber County Correctional Facility does not operate another facility or contract with other facilities for the confinement of its inmates. The PREA Coordinator securely maintains all documentation used to compile the information.

As required by the standard, the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

Per the PAQ, the SSV was last provided to the DOJ April 2025.

An interview with the PREA Coordinator confirms the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Data from the previous calendar year is supplied to the Department of Justice no later than June 30th, if requested.

The facility is collecting and aggregating sexual abuse data on an annual basis as required by the standard. The report uses a standardized set of definitions, which are available on the facility website and in the WCCF policy.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

**115.88 Data review for corrective action**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Evidence Relied upon to make Compliance Determination:

1. WCCF Completed PAQ with ADP
2. WCCF Policy 606
3. Annual Report
4. Website with sexual abuse data
5. Interviews with PREA Coordinator and Jail Administrator

Findings:

The WCCF policy is consistent with the requirements of the standard and states that, "This office shall conduct an annual review of collected and aggregated incident-based sexual abuse data. The purpose of these reviews is to assess and improve the effectiveness of sexual abuse prevention, detection and response policies, practices and training by:

- (a) Identifying problem areas.
- (b) Identifying corrective actions taken.
- (c) Recommending corrective actions.
- (d) Comparing current annual data and corrective actions with those from prior years.
- (e) Assessing the office's progress in addressing sexual abuse.

The reports shall be approved by the Jail Commander and made available through the office website. Material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility. However, the nature of the redacted material shall be indicated (28 CFR 115.88).

All aggregated sexual abuse data from Weber County Sheriff's Office facilities and private facilities with which it contracts shall be made available to the public at least annually through the office website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed (28 CFR 115.89)."

The Auditor reviewed the Annual Report available on the facility website, including data for calendar year 2025. The reports indicates that the agency reviewed the data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The report includes an overview of the facility's plan for addressing sexual abuse and aggregated data. The annual report indicates the agency's efforts to address sexual abuse include continually providing inmate education and staff training.

Interviews with the PREA Coordinator and the Jail Administrator confirm these efforts.

The report is signed by the Jail Administrator. There is no personally identifying information in the report.

	<p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. WCCF Completed PAQ</li> <li>2. WCCF Policy 606</li> <li>3. Annual Report</li> <li>4. WCCF Website containing sexual abuse data</li> <li>5. Interviews with Staff</li> </ol> <p>Findings:</p> <p>The WCCF policy is consistent with the requirements of the standard, which mandates that all case records and reports associated with a claim of sexual abuse and sexual harassment, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment or counseling, shall be retained in accordance with confidentiality laws.</p> <p>The Office shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Office, plus five years (28 CFR 115.71).</p> <p>All other data collected pursuant to this policy shall be securely maintained for at least 10 years after the date of the initial collection, unless federal, state or local law requires otherwise (28 CFR 115.89).</p> <p>The Jail will ensure all data collected is securely retained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise. The PREA Coordinator securely maintains all sexual abuse data and files, with limited access. Aggregated sexual abuse data is gathered from the investigative reports. The Auditor reviewed the facility's website, which included an annual report with aggregated sexual abuse data, as well as an analysis of the data. There were no personal identifiers contained within the report. The Auditor was informed sexual abuse and sexual harassment data is maintained for a minimum of 10 years after collection.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p>

	Corrective Action: None
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<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> <li>1. PAQ</li> <li>2. On-Site Review</li> </ol> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Agency Administrator</li> <li>• Random and Targeted Inmates</li> </ul> <p>Observation of the following:</p> <ul style="list-style-type: none"> <li>• Observation of, and access to all areas of the WCCF during the site review</li> </ul> <p>Findings:</p> <p>The WCCF has been previously PREA certified but prior to the previous audit cycle. The Weber County Correctional Facility only operates one facility. The scheduled date of the on-site review was completed within the first year of the audit cycle.</p> <p>The Auditor was given full access to the facility. The facility administration was open to feedback and all recommendations and any corrective action was implemented. The facility provided the Auditor with a detailed tour of the facility. The Auditor was able to request, review and receive all requested documents, reports, files, video, and other information requested, including electronically stored information. All requested documentation was provided in a timely manner.</p> <p>All staff cooperated with the Auditor and allowed the Auditor to conduct interviews with staff and inmates in a private area. The auditor was permitted to conduct unimpeded private interviews with inmates at the WCCF, both informally and formally. Auditor was given private interview rooms to interview inmates, which were convenient to inmate housing areas. The WCCF staff facilitated getting the inmates to the auditor for interviews in a timely and efficient manner. Auditor did not receive any confidential communication from any inmate at the WCCF, however informal interviews with inmates confirm that they were aware of the audit and the ability to communicate with the auditors.</p> <p>The auditor was able to observe both inmates and staff in various settings.</p> <p>Prior to the on-site review, the Auditor sent a letter to be posted in all inmate living areas which included the Auditor's address. The Auditor observed notices posted in each inmate living unit that the Auditor emailed to the PREA Coordinator prior to the</p>

	<p>Audit. The Auditor received photographic evidence that the notices to inmates were posted four weeks in advance of the first day of the audit.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>1. WCCF Website</p> <p>Interviews with the following:</p> <ul style="list-style-type: none"> <li>• PREA Coordinator</li> <li>• Agency Administrator</li> </ul> <p>Findings:</p> <p>The Auditor reviewed the WCCF website which contains a link for the 2026 Staffing Plan and 2026 Annual Review.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</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.)	na
	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.)	na
<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.)	na
<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	na

	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.)	
<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	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	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.)	na
<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.)	yes
	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	yes

	facility does not have female inmates.)	
<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)?	yes
<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>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.16 (a)</b>	<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
<b>115.16 (b)</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	yes

	consent or refuse?	
	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) 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) 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) 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) 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) 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	yes

	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?	
	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.)	na
<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	yes

	agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	
<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.)	yes

	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.)	yes
<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).)	na
<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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the agency train all employees who may have contact with	yes

	inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	
<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) 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) 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) 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	yes

	health care practitioners who work regularly in its facilities.)	
<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	yes

	criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	
	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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the intake screening consider, at a minimum, the following criteria to assess 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	yes

	being sexually abusive, to inform: Education Assignments?	
	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>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.42 (d)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
<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	yes

	are at high risk of sexual victimization have access to: Programs to the extent possible?	
	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	yes

	can be arranged?	
<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.)	yes
<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,	yes

	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.)	
	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?	yes

	(N/A if agency is exempt from this standard.)	
	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.)	yes
	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	yes

	understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	
	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	yes

	confidentiality, at the initiation of services?	
<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	yes

	required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	
	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	yes

	with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	
	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	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	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	yes

	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?	
	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) 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) Reporting to inmates</b>		
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a) 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) Disciplinary sanctions for staff</b>		
	Is termination the presumptive disciplinary sanction for staff who	yes

	have engaged in sexual abuse?	
<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).	na
<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.)	na
<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).	yes
<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.)	yes
<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 §	yes

	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.)	
<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.)	na
<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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology 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,	yes

	investigation files, and sexual abuse incident reviews?	
<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.)	na
<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	yes

	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?	
<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.)	no
<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.)	yes
	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.)	na
	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	na

	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.)	
<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.)	na