Name of Facility: Brownstone Work Release  
Facility Type: Community Confinement  
Date Interim Report Submitted: NA  
Date Final Report Submitted: 07/14/2022

<table>
<thead>
<tr>
<th>Auditor Certification</th>
</tr>
</thead>
</table>
| The contents of this report are accurate to the best of my knowledge.                | ☑  
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review. | ☑  
| 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. | ☑  

Auditor Full Name as Signed: Maria Silao-Johnson  
Date of Signature: 07/14/2022

### AUDITOR INFORMATION

| Auditor name: | Silao-Johnson, Maria  
| Email: | maria@midwestprea.com  
| Start Date of On-Site Audit: | 05/10/2022  
| End Date of On-Site Audit: | 05/11/2022

### FACILITY INFORMATION

| Facility name: | Brownstone Work Release  
| Facility physical address: |  
| Facility mailing address: |  

### Primary Contact

| Name: | Colleen Pettit  
| Email Address: | cmpettit@doc1.wa.gov  
| Telephone Number: | 509-381-6123

### Facility Director

| Name: | Rita Cziglenyi  
| Email Address: | rncziglenyi@doc1.wa.gov  
| Telephone Number: | 509-381-6123
## Facility PREA Compliance Manager

<table>
<thead>
<tr>
<th>Name</th>
<th>Colleen Pettit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email Address</td>
<td><a href="mailto:cmpettit@DOC1.WA.GOV">cmpettit@DOC1.WA.GOV</a></td>
</tr>
<tr>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name</th>
<th>Laura Jense</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email Address</td>
<td><a href="mailto:ljense@doc1.wa.gov">ljense@doc1.wa.gov</a></td>
</tr>
<tr>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

## Facility Characteristics

<table>
<thead>
<tr>
<th>Designed facility capacity</th>
<th>84</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current population of facility</td>
<td>47</td>
</tr>
<tr>
<td>Average daily population for the past 12 months</td>
<td>67</td>
</tr>
<tr>
<td>Has the facility been over capacity at any point in the past 12 months?</td>
<td>No</td>
</tr>
<tr>
<td>Which population(s) does the facility hold?</td>
<td>Males</td>
</tr>
<tr>
<td>Age range of population</td>
<td>19 - 67</td>
</tr>
<tr>
<td>Facility security levels/resident custody levels</td>
<td>minimum</td>
</tr>
<tr>
<td>Number of staff currently employed at the facility who may have contact with residents</td>
<td>7</td>
</tr>
<tr>
<td>Number of individual contractors who have contact with residents, currently authorized to enter the facility</td>
<td>27</td>
</tr>
<tr>
<td>Number of volunteers who have contact with residents, currently authorized to enter the facility</td>
<td>0</td>
</tr>
</tbody>
</table>

## AGENCY INFORMATION

<table>
<thead>
<tr>
<th>Name of agency</th>
<th>Washington Department of Corrections</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governing authority or parent agency (if applicable)</td>
<td>State of Washington</td>
</tr>
<tr>
<td>Physical Address</td>
<td>7345 Linderson Way Southwest, Tumwater, Washington - 98501</td>
</tr>
<tr>
<td>Mailing Address</td>
<td></td>
</tr>
<tr>
<td>Telephone number</td>
<td>3607258213</td>
</tr>
</tbody>
</table>
### 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.

<table>
<thead>
<tr>
<th>Number of standards exceeded:</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of standards met:</th>
</tr>
</thead>
<tbody>
<tr>
<td>41</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of standards not met:</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
</tr>
</tbody>
</table>
# POST-AUDIT REPORTING INFORMATION

## GENERAL AUDIT INFORMATION

### On-site Audit Dates

1. Start date of the onsite portion of the audit: 2022-05-10
2. End date of the onsite portion of the audit: 2022-05-11

### 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?  
   a. Identify the community-based organization(s) or victim advocates with whom you communicated:

   The auditor spoke to an advocate representing Lutheran Community Services a community-based sexual assault advocacy organization, on 05/13/22 to discuss the emotional support services offered and provided to inmates following an experience of sexual abuse at Brownstone Work Release Training in Spokane, WA. The auditor also emailed Just Detention International if the advocacy organization was in receipt of any information related to the sexual safety of people confined within BWRT. A review indicated zero allegations from inmates in the past year.

## AUDITED FACILITY INFORMATION

14. Designated facility capacity: 
15. Average daily population for the past 12 months:
16. Number of inmate/resident/detainee housing units:
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit: 22
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:
<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</td>
<td>BWRT reported zero inmates who identify as transgender among their population. Due to the low inmate population, the audit team interviewed all 22 inmates in residence between 05/10/22 and 05/11/22, the dates of the on-site PREA audit review. It was during the interviews the auditors determined there were no inmates who identify as such in this population. Inmates are not placed in segregation for risk of sexual victimization at BWRT.</td>
<td></td>
</tr>
</tbody>
</table>

**Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</td>
<td>22</td>
<td></td>
</tr>
<tr>
<td>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</td>
<td>19</td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>Response</td>
<td></td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>----------</td>
<td></td>
</tr>
<tr>
<td>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</td>
<td>No text provided.</td>
<td></td>
</tr>
<tr>
<td>INTERVIEWS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inmate/Resident/Detainee Interviews</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Random Inmate/Resident/Detainee Interviews</td>
<td></td>
<td></td>
</tr>
<tr>
<td>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</td>
<td>19</td>
<td></td>
</tr>
<tr>
<td>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</td>
<td>Age, Race, Ethnicity (e.g., Hispanic, Non-Hispanic), Length of time in the facility, Housing assignment, Gender</td>
<td></td>
</tr>
<tr>
<td>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</td>
<td>Due to the low inmate population, the audit team interviewed all 22 inmates in residence between 05/10/22 and 05/11/22, the dates of the on-site PREA audit review.</td>
<td></td>
</tr>
<tr>
<td>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</td>
<td>No text provided.</td>
<td></td>
</tr>
<tr>
<td>Targeted Inmate/Resident/Detainee Interviews</td>
<td></td>
<td></td>
</tr>
<tr>
<td>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</td>
<td>22</td>
<td></td>
</tr>
</tbody>
</table>

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”.
| 60. | Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol: | 2 |
| 61. | Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol: | 0 |
| a. | Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category: | ✔ 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. |
| 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). | Due to the low inmate population at BWRT, the audit team interviewed all 22 inmates in residence between 05/10/22 and 05/11/22, the dates of the on-site PREA audit review. It was at the conclusion of the interviews the auditors determined there were no inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in this population. |
| 62. | Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol: | 0 |
| a. | Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category: | ✔ 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. |
| 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). | Due to the low inmate population at BWRT, the audit team interviewed all 22 inmates in residence between 05/10/22 and 05/11/22, the dates of the on-site PREA audit review. It was at the conclusion of the interviews the auditors determined there were no inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) in this population. |
| 63. | Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol: | 1 |
| 64. | Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol: | 0 |
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category: | □ 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.  
□ The inmates/residents/detainees in this targeted category declined to be interviewed. |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>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).</td>
<td>Due to the low inmate population at BWRT, the audit team interviewed all 22 inmates in residence between 05/10/22 and 05/11/22, the dates of the on-site PREA audit review. It was at the conclusion of the interviews the auditors determined there were no inmates/residents/detainees who are Limited English Proficient (LEP) in this population.</td>
</tr>
<tr>
<td>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the &quot;Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates&quot; protocol:</td>
<td></td>
</tr>
</tbody>
</table>
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category: | □ 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.  
□ The inmates/residents/detainees in this targeted category declined to be interviewed. |
| 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). | Due to the low inmate population at BWRT, the audit team interviewed all 22 inmates in residence between 05/10/22 and 05/11/22, the dates of the on-site PREA audit review. It was at the conclusion of the interviews the auditors determined there were no inmates/residents/detainees who identify as lesbian, gay, or bisexual in this population. |
| 66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol: | 0 |
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category: | □ 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.  
□ The inmates/residents/detainees in this targeted category declined to be interviewed. |
| 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). | Due to the low inmate population at BWRT, the audit team interviewed all 22 inmates in residence between 05/10/22 and 05/11/22, the dates of the on-site PREA audit review. It was at the conclusion of the interviews the auditors determined there were no inmates/residents/detainees who identify as transgender or intersex in this population. |
| 67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse“ protocol: | 0 |
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category: | • 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.  
• The inmates/residents/detainees in this targeted category declined to be interviewed. |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>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).</td>
<td>Due to the low inmate population at BWRT, the audit team interviewed all 22 inmates in residence between 05/10/22 and 05/11/22, the dates of the on-site PREA audit review. It was at the conclusion of the interviews the auditors determined there were no inmates/residents/detainees who reported sexual abuse in this facility in this population.</td>
</tr>
</tbody>
</table>

68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:

| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category: | • 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.  
• The inmates/residents/detainees in this targeted category declined to be interviewed. |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>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).</td>
<td>Due to the low inmate population at BWRT, the audit team interviewed all 22 inmates in residence between 05/10/22 and 05/11/22, the dates of the on-site PREA audit review. It was at the conclusion of the interviews the auditors determined there were no inmates/residents/detainees who disclosed prior sexual victimization during risk screening in this population.</td>
</tr>
</tbody>
</table>

69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:

| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category: | • 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.  
• The inmates/residents/detainees in this targeted category declined to be interviewed. |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>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).</td>
<td>Due to the low inmate population at BWRT, the audit team interviewed all 22 inmates in residence between 05/10/22 and 05/11/22, the dates of the on-site PREA audit review. It was at the conclusion of the interviews the auditors determined there were no inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization in this population.</td>
</tr>
<tr>
<td>Question</td>
<td>Answer</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------</td>
</tr>
<tr>
<td>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</td>
<td>No text provided.</td>
</tr>
<tr>
<td><strong>Staff, Volunteer, and Contractor Interviews</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Random Staff Interviews</strong></td>
<td></td>
</tr>
<tr>
<td>71. Enter the total number of RANDOM STAFF who were interviewed:</td>
<td>19</td>
</tr>
<tr>
<td>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</td>
<td>☑ Length of tenure in the facility</td>
</tr>
<tr>
<td></td>
<td>☑ Shift assignment</td>
</tr>
<tr>
<td></td>
<td>☑ Work assignment</td>
</tr>
<tr>
<td></td>
<td>☑ Rank (or equivalent)</td>
</tr>
<tr>
<td></td>
<td>☐ Other (e.g., gender, race, ethnicity, languages spoken)</td>
</tr>
<tr>
<td></td>
<td>☐ None</td>
</tr>
<tr>
<td>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</td>
<td>☑ Yes</td>
</tr>
<tr>
<td></td>
<td>☐ No</td>
</tr>
<tr>
<td>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</td>
<td>Due to the number of staffs assigned to BWRT, the audit team interviewed all 11 available staff between 05/10/22 and 05/11/22, the dates of the on-site PREA audit review.</td>
</tr>
<tr>
<td><strong>Specialized Staff, Volunteers, and Contractor Interviews</strong></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</td>
<td>23</td>
</tr>
<tr>
<td>76. Were you able to interview the Agency Head?</td>
<td>☑ Yes</td>
</tr>
<tr>
<td></td>
<td>☐ No</td>
</tr>
<tr>
<td>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</td>
<td>☑ Yes</td>
</tr>
<tr>
<td></td>
<td>☐ No</td>
</tr>
<tr>
<td>78. Were you able to interview the PREA Coordinator?</td>
<td>☑ Yes</td>
</tr>
<tr>
<td></td>
<td>☐ No</td>
</tr>
</tbody>
</table>
79. Were you able to interview the PREA Compliance Manager?

- Yes
- No
- NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. 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
- Other

81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>Yes</td>
</tr>
<tr>
<td>☐</td>
<td>No</td>
</tr>
</tbody>
</table>

a. Enter the total number of CONTRACTORS who were interviewed:

4

b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)

- ☑ Security/detention
- ☐ Education/programming
- ☐ Medical/dental
- ☑ Food service
- ☑ Maintenance/construction
- ☐ Other

83. Provide any additional comments regarding selecting or interviewing specialized staff.

Due to the number of staffs assigned to BWRT, the audit team interviewed all available staff at the facility between 05/10/22 and 05/11/22, the dates of the on-site PREA audit review. Specialized staff were selected from a listing provided by the facility during the pre-onsite phase of the audit. The lead auditor randomly, when possible, selected staff from each identified specialized category. Specialized interviews were conducted using the Interview Guide for Specialized Staff developed by the Department of Justice. 19 specialized staff interviews were conducted using 23 interview protocols. In addition, four contractors were interviewed; the same interview protocol was used for each. Due to the health pandemic, volunteers were prohibited from the facility during the 12-month audit period and as of the on-site visit were just beginning re-entry. The audit team did not interview security staff who supervise youthful inmates, education and program staff who work with youthful inmates.

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.

84. Did you have access to all areas of the facility?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>Yes</td>
</tr>
<tr>
<td>☐</td>
<td>No</td>
</tr>
</tbody>
</table>

Was the site review an active, inquiring process that included the following:
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</td>
<td>☐  Yes</td>
<td>☐ No</td>
</tr>
<tr>
<td>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</td>
<td>☐  Yes</td>
<td>☐ No</td>
</tr>
<tr>
<td>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</td>
<td>☐  Yes</td>
<td>☐ No</td>
</tr>
<tr>
<td>88. Informal conversations with staff during the site review (encouraged, not required)?</td>
<td>☐  Yes</td>
<td>☐ No</td>
</tr>
<tr>
<td>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</td>
<td>On 05/10/22 the onsite phase of the audit commenced. The audit team was introduced to the facility staff. After brief introductions, the auditor facilitated an entrance briefing. This meeting was attended by the community corrections supervisor and members of the BWRT staff. The entrance briefing included a review of the audit process, goals and expectations, and logistics. The audit team visited all levels of the building. When applicable, upon entry into any area of the living unit, staff made a verbal announcement as often and as loud to alert inmates that a member of the opposite gender was present. Audit PREA notices were posted on every floor, bulletin board and entry way. The audit team observed PREA posters were in English and Spanish describing the agency’s zero tolerance policy and reporting options. Inmates are directed to report using any of the following methods: tell any staff member; call the 1-800-586-9431 PREA hotline or write to Colorado Department of Corrections; or ask a family member or friend to notify the facility. For support services inmates may or call Lutheran Community Services NW for free and confidential advocacy services (24-hour support line) 1-509-624-7273. Posters were hung on information boards or near telephones, which general population inmates have the opportunity to use during scheduled times each day. While submitting a grievance is not an advertised way of reporting sexual abuse and sexual harassment, it serves as another form of notifying staff; secured grievance boxes were observed in the lobby area. Grievances are collected daily and are handled in accordance with the agency’s policy, with the agency’s policy. Throughout, the audit team conducted brief, informal interviews with random staff and inmates during the facility review. Specifically, the auditors inquired about the following: opposite-gender announcing practices; unannounced round documentation; cross-gender viewing protocols; PREA training and education; reporting methods; grievance mechanisms; etc.</td>
<td></td>
</tr>
</tbody>
</table>

**Documentation Sampling**

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

13
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?

- Yes
- No

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

The BWRT documentation review process was initiated six months prior to the on-site. Through the utilization of the Supplemental Files within OAS, the facility was able to provide the auditor with monthly documentation uploads containing requested information. These documents included personnel records, training records, inmate PREA education, inmate risk screening, sexual abuse and sexual harassment grievance as well as investigation files. During the on-site portion the auditor was able to spot check for specific documents for review. During the 12-month review period, there were zero allegations of sexual abuse and zero allegations of sexual harassment. The most recent allegation was three years prior (2019) to the on-site review. The allegation of sexual harassment was reviewed by the audit team as sample documentation for the audit. BWRT conducts administrative investigations only as the criminal investigations are conducted by the Spokane Police Department per MOU with the WA State Police Department.

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

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

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

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

<table>
<thead>
<tr>
<th>Incident Type</th>
<th># of sexual abuse allegations</th>
<th># of criminal investigations</th>
<th># of administrative investigations</th>
<th># of allegations that had both criminal and administrative investigations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inmate-on-inmate sexual abuse</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Staff-on-inmate sexual abuse</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

<table>
<thead>
<tr>
<th>Incident Type</th>
<th># of sexual harassment allegations</th>
<th># of criminal investigations</th>
<th># of administrative investigations</th>
<th># of allegations that had both criminal and administrative investigations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inmate-on-inmate sexual harassment</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Staff-on-inmate sexual harassment</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Sexual Abuse and Sexual Harassment Investigation Outcomes

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

<table>
<thead>
<tr>
<th>Incident Type</th>
<th>Ongoing</th>
<th>Referred for Prosecution</th>
<th>Indicted/Court Case Filed</th>
<th>Convicted/Adjudicated</th>
<th>Acquitted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inmate-on-inmate sexual abuse</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Staff-on-inmate sexual abuse</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Incident Type</th>
<th>Ongoing</th>
<th>Unfounded</th>
<th>Unsubstantiated</th>
<th>Substantiated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inmate-on-inmate sexual abuse</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Staff-on-inmate sexual abuse</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.
96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

<table>
<thead>
<tr>
<th></th>
<th>Ongoing</th>
<th>Referred for Prosecution</th>
<th>Indicted/Court Case Filed</th>
<th>Convicted/Adjudicated</th>
<th>Acquitted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inmate-on-inmate sexual harassment</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Staff-on-inmate sexual harassment</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Ongoing</th>
<th>Unfounded</th>
<th>Unsubstantiated</th>
<th>Substantiated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inmate-on-inmate sexual harassment</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Staff-on-inmate sexual harassment</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

**Sexual Abuse Investigation Files Selected for Review**

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled: 0

a. Explain why you were unable to review any sexual abuse investigation files: Zero sexual abuse allegations have been reported at BWRT for the preceding 12 months.

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? ☑ Yes ☑ No ☑ NA (NA if you were unable to review any sexual abuse investigation files)

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

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled: 0

101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations? ☑ Yes ☑ No ☑ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)

102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations? ☑ Yes ☑ No ☑ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Staff-on-inmate sexual abuse investigation files</strong></td>
<td></td>
</tr>
<tr>
<td>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</td>
<td>0</td>
</tr>
<tr>
<td>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</td>
<td>Yes, No, NA (if you were unable to review any staff-on-inmate sexual abuse investigation files)</td>
</tr>
<tr>
<td>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</td>
<td>Yes, No, NA (if you were unable to review any staff-on-inmate sexual abuse investigation files)</td>
</tr>
<tr>
<td><strong>Sexual Harassment Investigation Files Selected for Review</strong></td>
<td></td>
</tr>
<tr>
<td>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</td>
<td>1</td>
</tr>
<tr>
<td>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</td>
<td>Yes, No, NA (if you were unable to review any sexual harassment investigation files)</td>
</tr>
<tr>
<td><strong>Inmate-on-inmate sexual harassment investigation files</strong></td>
<td></td>
</tr>
<tr>
<td>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</td>
<td>1</td>
</tr>
<tr>
<td>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</td>
<td>Yes, No, NA (if you were unable to review any inmate-on-inmate sexual harassment investigation files)</td>
</tr>
<tr>
<td>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</td>
<td>Yes, No, NA (if you were unable to review any inmate-on-inmate sexual harassment investigation files)</td>
</tr>
<tr>
<td><strong>Staff-on-inmate sexual harassment investigation files</strong></td>
<td></td>
</tr>
<tr>
<td>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</td>
<td>0</td>
</tr>
<tr>
<td>Question</td>
<td>Yes</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>-----</td>
</tr>
<tr>
<td>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</td>
<td></td>
</tr>
<tr>
<td>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</td>
<td></td>
</tr>
<tr>
<td>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</td>
<td>Zero sexual abuse and sexual harassment allegations have been reported at BWRT for the preceding 3 years. The audit team selected the only sexual harassment investigation for sampling from 2019.</td>
</tr>
</tbody>
</table>

**SUPPORT STAFF INFORMATION**

**DOJ-certified PREA Auditors Support Staff**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>116. 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.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:

1

**AUDITING ARRANGEMENTS AND COMPENSATION**

<table>
<thead>
<tr>
<th>Question</th>
<th>The audited facility or its parent agency</th>
<th>My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</th>
<th>A third-party auditing entity (e.g., accreditation body, consulting firm)</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>121. Who paid you to conduct this audit?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Identify your state/territory or county government employer by name:

Wisconsin Department of Corrections
<table>
<thead>
<tr>
<th>Was this audit conducted as part of a consortium or circular auditing arrangement?</th>
</tr>
</thead>
<tbody>
<tr>
<td>◯ Yes</td>
</tr>
<tr>
<td>◯ No</td>
</tr>
</tbody>
</table>
## Standards

### Auditor Overall Determination Definitions

- **Exceeds Standard**  
  (Substantially exceeds requirement of standard)

- **Meets Standard**  
  (substantial compliance; complies in all material ways with the stand for the relevant review period)

- **Does Not Meet Standard**  
  (requires corrective actions)

### Auditor Discussion Instructions

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

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-audit Questionnaire (PAQ)
b. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
c. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (Attachment 1)
d. 490.850 Prison Rape Elimination Act (PREA) Response
e. 490.860 Prison Rape Elimination Act (PREA) Investigation
f. WADOC Agency Organization Chart
g. Reentry Organization Chart
h. Brownstone Work Release Training Release Organization Chart
i. PREA Coordinator Position Description

Interview(s)

a. PREA Coordinator

Site Review Observations

a. PREA audit notices in English and Spanish provided by the lead auditor were posted at all common areas frequented by inmates, staff, and the public.
b. PREA audit posters in English and Spanish identifying multiple methods to report an allegation of sexual abuse or sexual harassment were located at all common areas frequented by inmates, staff, and the public.
c. Brownstone Work Release Training Handbook and PREA pamphlets contained the state agency zero tolerance of sexual abuse and sexual harassment information.

Findings (By Provision)

115.211 (a)

The PAQ identified three policies corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state the department has zero tolerance for all forms of sexual misconduct. The Department will impose disciplinary sanctions for such conduct, up to and including dismissal for staff. Incidents of sexual misconduct will be referred for criminal prosecution when appropriate. This policy also requires the agency PREA Coordinator to “develop and implement PREA related policies. A PREA Compliance Manager “will coordinate local PREA compliance.” These two positions, one on the agency level and one on the facility level are tasked with developing, coordinating, tracking the strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates.

Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (Attachment 1) provides definitions of prohibited behaviors regarding sexual abuse and sexual harassment.

Policy 490.850 Prison Rape Elimination Act (PREA) Response, and 490.860 Prison Rape Elimination Act (PREA) Investigation outlines how the facility will implement the agency’s approach to preventing, detecting, and responding to
sexual abuse and sexual harassment.

Policy 490.860 Prison Rape Elimination Act (PREA) Investigation identifies sanctions for staff, contractors and volunteers, as well as the individuals under the Department's jurisdiction found to have participated in prohibited behaviors.

These polices collectively demonstrate the agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of residents.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.211 (b)

The PAQ identified one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state the PREA coordinator will develop and coordinate procedures to triage allegations received and identify, monitor and track incidents of sexual misconduct. This policy also states the Work Release Administrator will assign a PREA compliance manager for each work release facility.

The position description for the PREA coordinator outlines objectives to comply with PREA standards, act as the agency liaison with stakeholders, oversee all PREA investigations as well as complete related analysis data and provide related information to management throughout the agency. WADOC has one PREA coordinator who has the authority to oversee agency efforts to comply with the PREA standards in all of its facilities. The PREA coordinator is listed on the agency’s organization chart and reports to the Deputy Director Command B.

The PREA coordinator reported she has been in this position as of April 19, 2022 and has enough time to manage and oversee the agency efforts to meet compliance with the PREA standards. She coordinates with the facility PREA compliance managers and PREA compliance specialists to ensure they remain informed and of any PREA related issues or updates. She maintains contact with the PREA compliance managers on a daily basis through emails, phone calls, and telecommunications. The Community Corrections Supervisors 3 are the designated PREA compliance managers at the work release/training facility.

A final analysis of the evidence indicates the facility is compliant with this provision.
### 115.212 Contracting with other entities for the confinement of residents

<table>
<thead>
<tr>
<th>Auditor Overall Determination: Meets Standard</th>
</tr>
</thead>
</table>

#### Auditor Discussion

**Documents**

a. Pre-Audit Questionnaire (PAQ)
b. Contract shell noting PREA language
c. WADO 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
d. American Behavior Health Systems contract (K10802, section VII). Public website [https://www.americanbehavioralhealth.net/prea/](https://www.americanbehavioralhealth.net/prea/)
e. Iowa Department of Corrections contract (K106681, Article III, 27). Public website [https://doc.iowa.gov/administration/prea/prea-audits](https://doc.iowa.gov/administration/prea/prea-audits)
g. Yakima County Jail for the housing of overflow offenders’ contract (K10470, Article V). Public website [https://www.yakimacounty.us/1141/Prison-Rape-Elimination-Act](https://www.yakimacounty.us/1141/Prison-Rape-Elimination-Act)
h. Pioneer Human Services contract (residential treatment facility with contract beds not primarily used for the confinement of residents in the adult criminal justice system.)

**Interview(s)**

a. Agency Contract Administrator
b. PREA Coordinator

**Findings (By Provision):**

**115.212 (a)**

The PAQ identified one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting mirror the federal PREA standards requirement for contracting with other entities for the confinement of inmates.

A review of the service contracts for the confinement of inmates indicated all contained PREA language requiring the adoption and compliance with PREA standards. The contract shell provided for review articulate in “Article V. PREA Sexual Misconduct” The contractor agrees to ensure that all of the contractor’s employee’s, vendors and volunteers (hereinafter contractor) that have contact with Department of Corrections (DOC) offenders comply with all federal and state laws regarding sexual misconduct including, but not limited to: The Prison Rape Elimination Act (PREA), the standards for adult prisons and jails or community confinement facilities, whichever is applicable, as promulgated by the US Attorney, and zero tolerance toward all forms of sexual abuse and sexual harassment.
A final analysis of the evidence indicates the facility is compliant with this provision.

115.212 (b)

The PAQ identified 6 contracts, one collective bargaining contract and five service contracts. Of the 5 service contracts reviewed, one contract was not required to be contract monitored. This is due to the residential treatment facility having contract beds not primarily used for the confinement of residents in the adult criminal justice system. Noted was contractor facility, Pioneer Human Services North a 134-bed facility with 13 contract beds. Pioneer Human Services East is a 44-bed facility with 7 contract beds. PREA compliance remains an expectation for these sites. If the population reaches 50% of offenders or the facilities become a primary use for the confinement of residents in the adult criminal justice system, then these two sites will require contract modifications to include contract monitoring by WADOC PREA coordinator.

The agency contract administrator reported her office was responsible for the drafting of the contract language to meet PREA standards, negotiating, and ensure provisions for the contract to include performance. However, the actual enforcement and contract monitoring for PREA compliance is conducted by the agency PREA coordinator. The contracts are reviewed with WA state Attorney General's Office, the WADOC PREA coordinator and the contract entity. The contacts are also maintained by the agency PREA Coordinator. This was affirmed by the PREA coordinator.

The agency PREA coordinator reported the contracted agencies with WADOC for offender housing were in compliance with PREA standards. Each county has their own contract monitor. The agency PREA coordinator has access to the contracted facilities at any time and is able to conduct spot checks. She is notified when WADOC is looking at a potential facility for contracting. She monitors compliance by reviewing any of their audits or can attain information directly from their administration. Data is collected and reviewed annually. She also checks their public websites and DOJ websites for data. She maintains communication with the contract facility administrators. She also collects aggregated data and updates the annual reports.

A review of the service contracts for the confinement of inmates indicated all contained PREA language requiring the adoption and compliance with PREA standards. The contract shell provided for review articulate in “Article V. PREA Sexual Misconduct” The contractor agrees to provide to the Department documented compliance with the federal PREA standards, and to allow the Department to monitor their facility’s compliance. Monitoring may include, but is not limited to: Site visits, access to facility data, and review of applicable documentation.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.212 (c)

N/A – the agency has not entered into a contract or contract renewal with an entity that fails to comply with the PREA standards as reviewed by the auditor. No evidence to the contrary.

A final analysis of the evidence indicates the facility is compliant with this provision.
### Supervision and monitoring

#### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

**Documents**

a. Pre-Audit Questionnaire (PAQ)
b. 110.110 Work Release Management Expectations
c. 300.500 Work Release Screening
d. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
e. Memorandum between WA Federation of State Employees and DOC for minimum staffing for Community Corrections Officer and clerical staff.
f. BWRT Staffing Plan 04-20-22
g. Work release biennial budget and requests relative to staffing and/or monitoring technology
h. Annual review of staffing levels to ensure adequate staffing plans are in place
i. Vulnerability Assessment
j. Non-Custody Staffing Model
k. Residential Monitors/Corrections Officers Staffing Model
l. Budgetary Roll-Up Document of Requests and Status
m. Contract

**Interviews**

a. Community Corrections Supervisor (CCS)
b. PREA Coordinator

**Findings (By Provision):**

115.213 (a)

The PAQ identified three policies corresponding to this provision. Policy 110.110 Work Release Management Expectations state the Community Corrections Supervisor (CCS) will ... annually review staffing levels to ensure adequate staffing plans are in place... When a shift has a staffing level of one, the CCS will develop a duty roster to ensure opposite gender staffing availability based on need... the CCS will develop a contingency plan for other instances in which both male and female employee/contract staff are not available.

Policy 300.500 Work/Training Release Screening identify a process to screen all potential individuals and determine suitability for placement in or admission to a Work/Training Release.

Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state ... Work Release Community Corrections Supervisor (CCS) will use the PREA Compliant Staffing Plan template maintained on the PREA Audit SharePoint site to develop, maintain, and annually review a staffing plan that includes an objective analysis of the facility's staffing needs and established staffing model ... Reviews will document consultation with the PREA coordinator, who will be provided a copy of the completed PERA Complaint Staffing Plan.
Staffing plans are reviewed annually and the information is submitted to the agency coordinator for review. A component of this plan is the facility vulnerability assessment, completed to identify and address areas or processes creating risk.

The CCS reported BWRT normal operational staffing pattern are 2/3/2 and shifts are 6am to 2pm, 2pm to 10pm, and 10pm to 6am. There are cameras throughout the facility that monitor high risk areas and areas marked as ‘no access.’ If inmates are required to be in that space, staff will escort the inmate. The video system is part of the staffing plan for consideration. The Staffing Plan Manual can be located on a shared drive in the PREA file and hard copies are located in the CCS office. The CCS also reported that she checks in with staff on a daily basis. During the COVID pandemic BWRT was able to maintain their staffing levels. She ensures coverage planning for staff taking vacation and sick leave. She communicates weekly with management and mitigates any staffing issues.

The PREA coordinator reported the staffing plan considers the annual vulnerability assessment. We would determine if there were any blind spots and we’d check the areas for the ratio between the inmates to the staff. We’d look at the population and the type of individuals housed there. We’d look at their custody levels. We’d look at the supervisory staff availability. We’d look at an unsupervised area on each shift. We’d look at the findings from investigations or any internal oversight report, the laws and regulations, and other things such as substantiated or unsubstantiated investigations. We’d go back and assess the area to see if camera placement would help mitigate any future situations.

The auditor’s review of the current staffing plan for BWRT contains the required elements of this provision. The PREA audit team monitored the camera system at the facility’s control center and the Community Corrections Supervisor’s office. Access to the camera systems are restricted to individuals working certain positions. The PREA audit team observed staff and inmate movement on the camera systems covering the interior and exterior of the facility.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.213 (b)

The PAQ identified one policy corresponding to this provision. Policy 110.110 Work Release Management Expectations state the Community Corrections Supervisor (CCS) will … annually review staffing levels to ensure adequate staffing plans are in place.

A memorandum from the supervisor to the auditor reported the WADOC work release facility staffing plans were originally created based upon staffing models used form minimum security camps. Offenders are screened in advance by staff in order to determine their eligibility for placement in a work release. In addition, the contracting agencies have agreed with the current staffing ratios and each year this ratio is reviewed. Factors taken into account include but are not limited to:

- Offender population including number of offenders and whether or not the facility is co-ed;
- Physical size of each work release facility building;
- Annual review of past staffing plans; and
- Regular reviews of statistics related to critical incidents, including sexual abuse, sexual assault and harassment investigations.

The CCS reported the current population at BWRT is 22 inmates at a facility with the capacity of 84. Two inmates were transferred into BWRT on the second day of the audit raising the count to 24.

A final analysis of the evidence indicates the facility is compliant with this provision.
BWRT completes a review annually of their PREA vulnerability assessment. This assessment determines whether adjustments are needed to the facility's staffing plan, staffing patterns, deployment of video monitoring systems and other monitoring technologies or if adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels. The PREA vulnerability assessment identifies procedural and policy changes necessary to enhance the sexual safety of staff and residents.

The PREA coordinator reported that every year, from the data collected we determine if more training is needed. We'll look for trends and any mitigating factors. It's reviewed all the way up to the secretary.

The PREA audit team noted the Staffing Plan template was maintained electronically in the PREA Audit SharePoint site. Monthly entries indicated changes to the staffing plan, if any. The auditor was provided a review of the past 12 months and noted no changes to the staffing plan.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.215  Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-audit Questionnaire (PAQ)
b. 420.325 Searches and Contraband for Work Release
c. 490.700 490.700 Transgender Intersex, and/or Gender Non-conforming Housing and Supervision
d. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
e. 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments

Interview(s)

a. Random staff
b. Random inmates

Findings (By Provision)

115.215 (a)

The PAQ identified one policy corresponding to this provision. Policy 420.325 Searches and Contraband for Work Release state strip searches will be conducted when a reasonable suspicion has been established that the individual is carrying contraband dangerous to self or others, or creates the potential to disrupt the orderly operations of the facility. A strip search must be conducted by 2 trained employees and meet the following gender requirements, unless waiting for an employee of the designated gender may result in serious bodily injury...

Zero strip searches were conducted during the previous 12 months review period. This was verified by 19 random inmate interviews. Discussion with the CCS indicated that any inmate requiring a strip search or body cavity search would be transported to the local hospital where they can be searched by medical staff or transported to Airweigh Heights Correctional Center upon approval by the Assistant Secretary.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.215 (b)

BWRT is a male facility, no cross-gender pat-down searches of female inmates or any cross-gender visual body cavity searches of residents were conducted in the previous 12 months. The WADOC website and the offender roster confirmed there are no female offenders housed at this facility. 19 Random inmates and 11 random staffs affirmed only male offenders were housed at WCC.

The audit team did not observe any female inmates during the on-site review portion of the PREA audit.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.215 (c)

The PAQ identified one policy corresponding to this provision. Policy 420.325 Searches and Contraband for Work Release state pat searches will be conducted by a trained employee of the same gender as the individual being searched, except in emergency situations... When a male employee/contract staff pat searches a female, a report will be completed in the Incident Management Reporting System (IMRS) before the end of shift. The distribution will include the Prison Rape Elimination Act Coordinator.

The audit team noted that the pat search area was located in the enclosed lobby area in front of a camera. Informal discussion with the staff indicated they did not perform cross gender pat or cross gender strip searches at BWRT.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.215 (d)

The PAQ identified one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state that offenders will be provided the opportunity 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.

The audit team observed individual stalls in toilet areas or privacy curtains in the showers of the community bathrooms. 19 random inmates reported they are never naked in full view of cross gender staff. 11 random staffs reported that female staff would verbally announce “female on the floor or female on the deck”. The audit team noted that the cross-gender announcements were made by the escorting staff member for each area as we arrived.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.215 (e)

The PAQ identified two policies corresponding to this provision. Policy 490.700 Transgender, Intersex, and/or Gender Non-conforming Housing and Supervision state employees/contract staff will not search or physically examine a transgender, intersex or gender non-conforming individual for the sole purpose of determining the individual’s genital status.

Policy 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments state if the offender’s genital status is unknown, it will be determined by health care providers during conversations with the offender, by reviewing medical records, or, if necessary, as part of a broader medical examination conducted in private by a health care practitioner.

Discussions with staff and CCS indicated there were no transgender, intersex, and/or gender non-conforming inmate at BWRT in the previous 12 months. 11 random staffs reported they were aware of the facility policy prohibiting staff from conducting such searches.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.215 (f)

The PAQ identified one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state employees/contract staff who may conduct pat searches will be trained in cross-gender searches and searches of transgender and intersex offenders.
The audit team reviewed 18 training records for BWRT staff and noted they were current on their annual PREA training and have completed initial pat search training. 11 random staff reported the did receive PREA training and have update training annually.

A final analysis of the evidence indicates the facility is compliant with this provision.
Residents with disabilities and residents who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-audit Questionnaire (PAQ)
b. 310.000 Orientation
c. 450.500 Language Services for Limited English Proficient (LEP) Offenders
d. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
e. 690.400 Offenders with Disabilities

Interview(s)

a. Agency Head
b. Inmates with disabilities or who are limited English proficient (LEP)
c. Random Staff

Site Review Observations

a. The audit team observed multiple posters and pamphlets accessible to inmates written in languages other than English. PREA audit notice and PREA posters observed in all common areas accessible to inmates, staff and public.

Findings (By Provision)

115.216 (a)

The PAQ identified 4 policies corresponding to this provision. Policy 310.000 Orientation states when a literacy or language problem exists, employees will assist the individual in understanding the material... Each facility will develop processes for non-Spanish speaking Limited English Proficiency individuals, including those requiring sign language interpretation, to receive orientation in a language they understand.

Policy 450.500 Language Services for Limited English Proficient (LEP) Offenders state the Department will provide oral interpretation and written translation services through Department and/or contract services at all facilities. The Department will also provide guidelines for interpretation and translation services for Limited English Proficiency (LEP) individuals under the Department’s jurisdiction.

Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state professional interpreter or translation services, including sign language, are available to assist offenders in understanding this policy, reporting allegations, and/or participating in investigations of sexual misconduct per DOC 450.500 Language Services for Limited English Proficient (LEP) offenders... Americans with Disabilities Act (ADA) accommodations will be provided per DOC 620.400 Offenders with Disabilities.

Policy 690.400 Offenders with Disabilities state offenders with disabilities will be provided reasonable accommodation that allows participation in services, programs and activities... Facilities will develop a process to ensure employees/contact staff receive updated information regarding the specific needs of offenders with disabilities.
The Agency head reported PREA education starts at orientation, we have brochures for the low functioning and developmentally delayed. We have interpreters that are certified and contracted to provide services through a language line. We also have videos for the LEP inmates.

One hard of hearing inmate and one ADA inmate reported they had no issues understanding the information about sexual abuse and sexual harassment. There were no LEP inmates at BWRT during the on-site as all inmates in residence were interviewed.

The audit team reviewed sign language contracts, telephone interpretation contracts, deaf services provider coordinator position description, curriculum for ADA training and a facilitators training guide for cognitive delayed offenders.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.216 (b)

The PAQ identified 3 policies corresponding to this provision. Policy 310.000 Orientation state prison orientation will be conducted within one week of admission. Work/Training Release orientation will be conducted within 48 hours of admission… Information will be provided, both orally and in writing, in a manner that is clearly understood… Individuals in Work/Training Release will be notified of all appropriate policies and procedures that affect them, including… PREA.

Policy 450.500 Language Services for Limited English Proficient (LEP) Offenders state orientation in Prisons and Work/Training Releases will be provided to non-English speaking individuals by department-certified dual language employees/contract staff or through a Spanish version approved by headquarters… Each facility/office will schedule interpreters from the approved vendor list and process using DOC 05-827 Contract Language Interpreter Appointment Record.

Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state professional interpreter or translation services, including sign language, are available to assist offenders in understanding this policy, reporting allegations, and/or participating in investigations of sexual misconduct per DOC 450.500 Language Services for Limited English Proficient (LEP) offenders… Americans with Disabilities Act (ADA) accommodations will be provided per DOC 690.400 Offenders with Disabilities.

Discussions with the CCS indicated there were zero LEP inmates at BWRT. This was confirmed when the audit team interviewed every inmate at BWRT during the on-site. The audit team was able to review all the resources available to an LEP inmate when one is assigned to BWRT.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.216 (c)

The PAQ identified 2 policies corresponding to this provision. Policy 450.500 Language Services for Limited English Proficient (LEP) Offenders state All Prison Rape Elimination Act (PREA) related interpretation services will be documented by LEP Coordinators… The log will be maintained at the facility by the LEP coordinator… Incarcerated individuals are not authorized to use interpretation/translation services from other incarcerated individuals for the following: … Understanding Department policies related to the Prison Rape Elimination Act (PREA) and reporting and/or participating in the investigation
of incidents of sexual misconduct.

Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting offenders are not authorized to use interpretation/translation services from other offenders, family members, or friends for the purposes of reporting allegations and/or participating in investigations of sexual misconduct. During interviews with random staff, all staff stated that resident interpreters are never utilized and were aware of the contracts the agency had entered into to provide these services.

11 random staff reported inmate interpreters or readers were not utilized for anything PREA related as there are bilingual staff lists as well as an interpreter line if needed. There were no inmates with an LEP need at BWRT during the on site as all inmates were interviewed.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.217 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-audit Questionnaire (PAQ)
b. 400.320 400.320 Terrorism/Extremism Activity
c. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
d. 810.015 Criminal Record Disclosure and Fingerprinting
e. 810.800 Recruitment, Selection and Promotion
f. DOC 03-031 Criminal Disclosure
g. DOC 03-506 Sexual Misconduct and Institution Employment/Service Disclosure
h. DOC 05-370 Request for Criminal History Record Information WASIS/NCIC III CHECK NCIC/WACIC CHECK
i. BWRT Staff Tracking Background Checks
j. Sample records of person hired or promoted in past 12 months
k. Sample records of contractors who might have contact with inmates
l. Documentation of background records checks of employees/contractors at 5-year intervals

Interview(s)

a. Human Resources

Findings (By Provision)

115.217 (a, b, f and g)

The PAQ identified three policies corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state to the extent permitted by law, the Department will not knowingly hire, promote, or enlist the services of anyone who: Has engaged in sexual misconduct in a Prison, jail, lockup, community confinement facility, juvenile facility, or other institution as defined I 42 U.S.C. 1997… Has engaged in sexual misconduct with an individual on supervision… Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse or… Has been civilly or administratively adjudicated to have engaged in the activity described above… The department will consider any incidents of sexual harassment in determining whether to hire, promote, or enlist the services of anyone who may have contact with offenders.

Policy 810.015 Criminal Record Disclosure and Fingerprinting state failure to fully divulge criminal information on the part of an individual subsequently employed, promoted, or authorized to provide services for the Department may be cause for disciplinary action, up to and including dismissal or termination of services.

Policy 810.800 Recruitment, selection and Promotion state the Appointing Authority will ensure the following is conducted on the preferred candidate before appointment… Completion of DOC 03-506 Sexual Misconduct and Institutional Employment/Service disclosure.
The human resources staff reported its part of the application process and background check to find out if there's a sexual abuse or sexual harassment in the applicant's background. WADOC has sexual misconduct disclosure forms for all new hires/promotional candidates to complete, which we will then review for any previous misconduct. They are required to report it per policy and when we find out, they are investigated.

The auditor reviewed 10 records of persons hired or promoted during the 12 months review period and noted that the DOC 03-031 Criminal Disclosure and DOC 03-506 Sexual Misconduct and Institution Employment/Service Disclosure were completed for each applicant.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.217 (c)

The PAQ identified three policies corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state the Department will obtain information through one or more of the following: Washington Crime Information Center (WACIC)/National Crime Information Center (NCIC) records check, Employment/Volunteer applications, reference checks, Personnel file review and contract discloser statements.

Policy 810.015 Criminal Record Disclosure and Fingerprinting state a background check will be completed for all applicants before initial appointment or rehire. The department will provide guidance to hiring authorizes consistent with RCW 9.94A.640 concerning disclosure and use of information about prior criminal convictions and subsequent incarcerations of employees, contract staff, and volunteers...

Policy 810.800 Recruitment, selection and Promotion state the Appointing Authority will ensure the following is conducted on the preferred candidate before appointment... Completion of DOC 03-506 Sexual Misconduct and Institutional Employment/Service disclosure... To the extent possible for external candidates, including former employees/contract staff/volunteers, all previous institutional employers will be contacted for information on substantiated allegations of sexual misconduct or nay resignation pending investigation of alleged sexual misconduct.

The human resources staff reported it’s required for the new hire applicants or the contract staff. For promotional staff we have a records unit that completes the background check. For all DOC employee - we do a check every 5 years.

The auditor reviewed 10 records of persons hired or promoted during the 12 months review period and noted the background checks were completed for all new hires and promotion.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.217 (d)

The PAQ identified two policies corresponding to this provision. Policy 400.320 Terrorism/Extremism Activity state criminal background checks will be initiated on DOC 05-370 Request for Criminal History Record Information WASIS/NCIC III CHECK NCIC/WACIC CHECK and conducted per DOC 810.015 Criminal Record Disclosure and Fingerprinting for all new employees, contractors, and volunteers prior to assuming their duties.

Policy 810.015 Criminal Record Disclosure and Fingerprinting state all applicants, including former employees/contract
staff/volunteers, will be required to complete DOC 03-031 Criminal disclosure and DOC 05.370 Request for Criminal History Record Information WASIS/NCIC III CHECK NCIC/WACIC CHECK before being offered an initial appointment... Disclosure requirements are not limited to any time period and include... All convictions... This does not include convictions vacated by the court and removed from the official record.

The human resources staff reported it’s required for the new hire applicants or the contract staff. For promotional staff we have a records unit that completes the background check. For all DOC employee - we do a check every 5 years.

The auditor reviewed background checks of 9 applicant contractors and noted they were completed prior to the contractor reporting for duty.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.217 (e)

The PAQ identified one policy corresponding to this provision. Policy 810.015 Criminal Record Disclosure and Fingerprinting state the designated unit/employee will establish a process to ensure that criminal background checks are run for all current volunteers, contract staff, and unarmed employees at least every 5 years... Annual criminal background checks are required as part of weapons qualification for all armed employees per DOC410.235 User of Force Training and Qualifications and DOC 410.930 Community Corrections Use of Force Training.

The human resources staff reported, the last 5-year check was done on 2019 for the current DOC employees. We run a report on a spreadsheet and we send it to the records unit and they run the backgrounds for us. The system used for the check are NCIC and WACIC.

The auditor reviewed the BWRT staff hire training worksheet and the TTH contract staff hire training worksheet noting all staff had current background checks completed.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.217 (h)

The PAQ identified one policy corresponding to this provision. Policy 800.005 Personnel Files state employment verification requests from prospective employers from an institution as defined in 42 U.S.C. 1997 will be directed to the Records Custodian/designee, who will coordinate the review and response... To the extent possible, all available information on substantiated allegations of sexual misconduct or harassment will be provided.

The human resources staff reported, WADOC will contact previous employers for any convictions of sexual abuse or sexual harassment and we have also been contacted by other facilities for the same thing.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.218  Upgrades to facilities and technology

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-audit Questionnaire (PAQ)
b. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
c. Documentation of Vulnerability Assessment
d. Staffing Plan documenting the recommendations for additional cameras

Interview(s)

a. Agency Head
b. Director (CCS)

Findings (By Provision)

115.218 (a and b)

The PAQ identified one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting states the department will consider possible effects on its ability to protect individuals from sexual misconduct when: Designing or acquiring a new facility… Planning substantial expansions or modifications or existing facilities… and Installing or updating video monitoring systems, electronic surveillance systems or other monitoring technology.

The Agency Head reported, we ensure our camera system can look at the blind spot areas. If need be we’ll adjust the staffing levels for the appropriate coverage to protect the inmates. We utilize our camera systems to review locations when staff are not physically present. We have the staff monitor the cameras in real time video and record information for follow up to allegations. If we detect a blind spot we will mitigate that space with a camera or mirrors.

The CSS reported, any project with the potential to affect the monitoring of our residents, we look at the PREA standards to ensure compliance before any decisions. We are in discussions to have additional cameras for the facility that have been added to the vulnerability assessment. We are aware of the budget constraints.

The auditor reviewed the vulnerability assessment and noted the corrective action of a camera placement in the administrative hallway provided additional observation of a doorway leading into the admin hallway. During the on-site the audit team was able to observe the camera placement as it allowed for viewing a narrow space which otherwise would not be seen from the line of sight of the front desk staff. Auditor also noted the staffing plan listed additional camera requests for the facility currently pending funding approval.

A final analysis of the evidence indicates the facility is compliant with this provision.
Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-audit Questionnaire (PAQ)
b. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
c. 490.850 Prison Rape Elimination Act (PREA) Response
d. 600.000 Health Services Management
e. 600.025 Health Care Co-payment Program
f. 610.025 Health Services Management of Alleged Sexual Misconduct Cases
g. National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents
h. Sexual Assault Evidence collection: Uniform Evidence Protocol
i. Forensic Medical Exam Procedures – Transport staff
j. Law Enforcement Meeting notes identifying expectations of Spokane Police Department investigating allegations of sexual abuse at BWRT
k. Victim Advocate Training Requirements
l. PREA Designated Advocates
m. SANE Meeting notes
n. MOU between Washington State Police and WADOC

Interview(s) only if identified by the OAS

a. Random Staff
b. SAFE/SANE
c. PREA Coordinator

Findings (By Provision)

115.221 (a)

The PAQ identified one agency policy corresponding to this provision. Policy DOC 490.850 Prison Rape Elimination Act (PREA) Response state for allegations of aggravated sexual assault, the Shift Commander/designee will initiate the Aggravated Sexual Assault Checklist (Attachment 1) and the PREA Response Team will conduct a coordinated, multidisciplinary response to the allegation.

11 random staff were interviewed. They reported the Spokane Police Department conducted criminal investigations. WADOC staff are responsible for administrative investigations by trained PREA investigators. The agency investigators follow an established uniform evidence protocol developed utilizing 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”.

The audit team reviewed the MOU between Washington State Police and WADOC and noted that should the local law
enforcement agency, Spokane Police Department did not take the criminal investigation into sexual abuse, the state police would conduct the investigation.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.221 (b)

PAQ noted the protocol is developmentally appropriate for youthful offenders. The evidence collection protocol and training curriculums was adapted from DOJ's Office of Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents.”

Youth are not housed at BWRT facility. The audit team reviewed the Aggravated Sexual Assault Checklist, PREA Response and Containment checklist, DOC 16.357 Crime Scene Containment/Preservation/Processing Checklist, and DOC 16.358 Crime Scene Security Log. These checklists are aligned with the evidence collection protocol and are appropriate for youthful offenders.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.221 (c)

PAQ identified three policies corresponding to this provision. Policy DOC 490.850 Prison Rape Elimination Act (PREA) Response state forensic exams will be performed only at designated health care facilities in the community by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) where possible. If SAFE/SANE is not available, the examination can be performed by a qualified medical practitioner... The agency PREA Coordinator will be notified via email of all forensic medical examinations as soon as possible.

Policy 600.000 Health Services Management state Medical and mental health services allowed under the Offender Health Plant related to sexual misconduct as defined in DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting will be proved at no cost to the offender.

Policy 610.025 Health Services Management of Alleged Sexual Misconduct Cases state any incarcerated individual alleging sexual assault, sexual abuse, and/or staff sexual misconduct will be referred to a health care provider to evaluate any injury. Medical and mental health treatment services and follow-up care will be provided when clinically indicated. Forensic medical examinations will be conducted at a community health care facility... this policy also lists the responsibilities of the medical and mental health staff if a report of aggravated sexual assault is made with 120 hours of the alleged assault and the process of evaluation starting from the time the allegation is made to the time the offender is returned to the facility.

The SANE was interviewed a week prior to the on-site. She reported that she would complete an exam for anyone brought into the ER that needed a forensic exam. She provides exams for inmates and member of the public that needs her services. If staff at hospital are unavailable to conduct a forensic medical exam, the next SAFE/SANE would be paged or the on call will respond to the emergency room.

The audit team reviewed SANE Meeting notes between local law enforcement (SPD), BWRT staff (CCS), victim advocates (Lutheran Community Services) and SANE staff (Deaconess Medical Center). Parties identified referral process, notifications, priority of response, training requirements, education on SANE process, law enforcement presence at hospital, PREA advocate notification and tours of the ER SANE area in hospital. Zero forensic medical exams were conducted in the 12 months review period for BWRT.
A final analysis of the evidence indicates the facility is compliant with this provision.

115.221 (d)

PAQ noted the following information corresponding to this provision. WADOC has established offender advocacy support through an interagency agreement with the Department of Commerce, Office of Crime Victim Advocacy. Each facility has been partnered with a Community Sexual Assault Program. Specially designated and trained advocates respond to the community health care facility whenever an offender is transported for a forensic medical examination. BWRT is partnered with Lutheran Community Services, Northwest. It is noted that during COVID-19 response and related access restrictions related to both the facility and local hospitals, advocacy support was temporarily limited to telephone contact. Residents were notified of this temporary process revision.

The PREA coordinator reported, we have access to victim advocates. There is a toll-free number they can call. When an inmate makes an allegation, they are notified on the form "your investigator is" and please let your investigator know if you want an advocate present. The Investigator will call and make arrangements to have an advocate via telephone. If the allegation involves SAFE/SANE, the investigator is required to have an advocate present... There's an Interagency agreement with advocate services. These are trained advocates from OCVA. The advocates have to meet state requirements and specialized training (PREA). Program SafePlace and these specialized trained people have been approved to provide advocacy services.

The audit team reviewed designated advocates and hospitals list detailing the hospital and community sexual assault program/victim advocates that are partnered with the facility. In-person victim advocacy services guide detailing coordination between facilities and community-based victim advocates. A document detailing pre-assignment and ongoing training requirements for community-based victim advocates and the selection criteria for Community Sexual Assault Programs (CSAP’s) partnered with DOC facilities for PREA.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.221 (e)

PAQ noted the following information corresponding to this provision. WADOC has an interagency agreement with the Department of Commerce, Office of Crime Victim Advocacy detailing victim advocacy access for offenders who participate in the forensic medical examination process. Available brochure and posters detailing offender access to community victim advocacy services through the Office of Crime Victim Advocacy telephone line (English and Spanish) and an in-person victim advocacy services guide detailing coordination between facilities and community-based victim advocates.

The PREA coordinator reported, whenever an inmate goes out for a SAFE/SANE exam, the shift commander will automatically call for an advocate. The inmate can decline directly to the advocate at the hospital.

The audit team observed the Victim advocacy brochures and posters throughout the facility during the on-site review. The phone number to the advocacy service providers are posted next to the phones in the facility. It should also be noted that the inmates at BWRT have personal cell phones and my call the advocacy service provider directly.

A final analysis of the evidence indicates the facility is compliant with this provision.
PAQ identified one agency policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state each Superintendent and Work Release Administrator will meet at least annually with applicable law enforcement officials... Meetings with law enforcement will be documented in meeting minutes.

The audit team reviewed meeting minutes between BWRT and Spokane Police Department (SPD). These minutes establish that the sexual assault unit will handle sexual abuse allegations referred to SPD. The meeting minutes indicated the discussion of PREA investigation requirements, procedures for sexual assault criminal investigations at a work release facility and POC for BWRT as well as the SP for an incident.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.221 (g)

Auditor is not required to audit this provision.

115.221 (h)

PAQ noted the following information corresponding to this provision. WADOC contracts through the Office of Victim Services to provide medical facilities for victim advocates from a rape crisis center. The designated crisis center for BWRT is Lutheran Community Services (LCS) NW.

The audit team reviewed training curriculum for community-based advocate service providers. Advocates providing sexual assault support services follow the State of Washington Sexual Assault Service Standards, which include service definitions, activities, and advocate qualifications. Qualified advocates are required to have thirty hours of initial sexual assault/abuse training and twelve hours of ongoing training annually. The audit team also reviewed the selection criteria for advocates. The eight criteria are as follows:

- Proximity to prison facility and community hospital
- Compliance with current accreditation, service, and training standards (see "PREA Advocate Qualifications")
- Designation of primary and secondary "PREA Advocates"
- Demonstrated advocacy experience providing sexual assault services
- Commitment to attend additional PREA services required trainings
- Extent of management level staff experience in sexual assault victim services
- Provision of accompaniment services to sexual assault survivors during sexual assault forensic exams
- Extent of program experience with system coordination on behalf of adult survivors of sexual assault, including experience with criminal legal system and confinement facilities

A final analysis of the evidence indicates the facility is compliant with this provision.
115.222 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-audit Questionnaire (PAQ)
b. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
c. 490.850 Prison Rape Elimination Act (PREA) Response
d. 490.860 Prison Rape Elimination Act (PREA) Investigation
e. WADOC Public Website https://www.doc.wa.gov/corrections/prea/resources.htm
f. MOU between WADOC and WA State Patrol
g. Annual Meeting with Law Enforcement (PREA) meeting minutes from conference call
h. Last PREA investigation at BWRT
i. Referral of allegations of sexual abuse or sexual harassment
j. BWRT Complaint Log

Interview(s)

a. Agency Head
b. Investigative Staff

Findings (By Provision)

115.222 (a)

PAQ identified three policies corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state Each Superintendent or designee will meet at least annually with local enforcement officials to: Review investigation requirements detailed in Federal PREA standards… Establish procedures for conducting criminal investigations related to PREA allegations… and Establish points of contact and agree upon investigatory update procedures… Meetings with law enforcement will be documented in meeting minutes.

Policy 490.850 Prison Rape Elimination Act (PREA) Response Aggravated Sexual Assault Checklist (Attachment 1) and PREA Response and Containment Checklist (Attachment 2) list required actions to be taken by staff for an allegation of sexual assault.

Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the Department will thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving individuals under the jurisdiction or authority of the Department… Investigations will be completed even if the individual is no longer under Department jurisdiction or authority and/or the accused staff, if any is no longer employed by or providing services to the Department… Allegations may be referred to law enforcement agencies for criminal investigation. The Department may discipline and refer for prosecution, when appropriate, persons determined to be perpetrators of sexual misconduct. Investigations involving represented employees will be conducted per the provisions of the applicable collective bargaining agreement… all allegations that appear to be criminal in nature will be referred to law enforcement for investigation by the Appointing Authority/designee. Referrals may be made using DOC 03.505 Law Enforcement Referral of PREA allegation.
The Agency Head reported he may receive a confidential message, a PREA hotline notification, an email from the PREA office at Headquarters, or if a resident tells a staff member. It will also depend on the nature of the allegation. He may refer it for a PREA investigation or to the local law enforcement agency for first right of refusal. To protect parties involved, he may reassign an individual (alleged perpetrator) to home or another facility pending the outcome of the investigation. Conduct the investigation and determine the validity of the complaint. If the allegation was something that was reported immediately to the staff. We'd remove staff member from area, contact law enforcement, secure the crime scene, offer medical or mental health services and protect the individual (alleged victim).

The PAQ noted the following information corresponding to this provision. During the past 12 months of the audit review period, zero allegations of sexual abuse or sexual harassment were received. Zero allegations resulting in administrative investigation. Zero allegations referred for criminal investigations. The audit team found no evidence to contradict the lack of allegations.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.222 (b)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the Department will thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving individuals under the jurisdiction or authority of the Department… Investigations will be completed even if the individual is no longer under Department jurisdiction or authority and/or the accused staff, if any is no longer employed by or providing services to the Department… Allegations may be referred to law enforcement agencies for criminal investigation. The Department may discipline and refer for prosecution, when appropriate, persons determined to be perpetrators of sexual misconduct. Investigations involving represented employees will be conducted per the provisions of the applicable collective bargaining agreement… all allegations that appear to be criminal in nature will be referred to law enforcement for investigation by the Appointing Authority/designee. Referrals may be made using DOC 03.505 Law Enforcement Referral of PREA allegation.

The Investigative staff reported, the agency ensures that the administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment

The audit team reviewed the WADOC public website and noted the agency’s policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the website. The auditor reviewed the Offender Complaint referral Log for BWRT.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.222 (c)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state… all allegations that appear to be criminal in nature will be referred to law enforcement for investigation by the Appointing Authority/designee. Referrals may be made using DOC 03.505 Law Enforcement Referral of PREA allegation.

PAQ noted the following information corresponding to this provision. The MOU between WADOC and WA State Patrol identify the process in which a criminal investigation will be referred to law enforcement. The WADOC public website also provides FAQs describing responsibilities of both WADOC who conducts administrative investigations and the law enforcement entity that conducts criminal investigations. The Investigation process is also articulated on the website.
The auditor reviewed the meeting minutes from the annual meeting between law enforcement (SPD) and BWRT noting discussion regarding investigations and expectations of LE when called for an alleged sexual assault to the facility.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.222 (d and e)

Auditor is not required to audit this provision.
Employee training

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)
b. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
c. All BWRT staff Training Records
d. Samples of Signed DOC 03-483 PREA Training Acknowledgement forms
e. Prison Rape Elimination Act (PREA) Training Curriculum
f. Prison Rape Elimination Act (PREA) 102 Facilitator Guide

Interviews

a. Random staff

Findings (By Provision)

115.231 (a)

PAQ identified one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting requires all new employees, contract staff and volunteers to receive initial PREA training upon hire/assignment, followed by annual refresher training… Training consisted of (1) Its zero-tolerance policy for sexual abuse and sexual assault harassment (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures (3) Inmates’ right to be free from sexual abuse and sexual harassment (4) The right inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment (5) the dynamics of sexual abuse and sexual harassment in confinement (6) The common reactions of sexual abuse and sexual harassment victims (7) How to detect and respond to signs of threatened and actual sexual abuse (8) How to avoid inappropriate relationships with inmates (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

11 Random Staff reported they had completed the initial training at the academy and have received refresher training on an annual basis. They were all able to articulate the elements of the training objectives.

The audit team reviewed the training records of all 22 BWRT staff and confirmed their PREA initial and refresher trainings were current.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.231 (b)

PAQ noted the following information corresponding to this provision. Prison Rape Elimination Act (PREA) Training Curriculum is applicable to male and female offenders. This ensures regardless of the population; the student will be able to adjust regardless of inmate gender because they have been trained in both options.
The audit team reviewed the training records of all 22 BWRT staff and confirmed their PREA initial and refresher trainings were current.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.231 (c)

PAQ noted the following information corresponding to this provision. All BWRT staff Training Records have been reviewed by the audit team. The electronic tracking tool for refresher training utilized by WADOC is the Learning Management System (LMS). A review of the LMS also showed all 22 BWRT staff completed their PREA initial and refresher trainings for the annual cycle.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.231 (d)

PAQ noted one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting requires staff to acknowledge their understanding of the PREA training… For online training, acknowledgment will be included in the electronic course… For in-person training, acknowledgment will be documented on DOC 03-483 PREA Training Acknowledgment or DOC 03-523 PREA disclosure and Training Acknowledgement for Volunteers.

The PREA audit team reviewed random sample staff PREA training acknowledgment forms signed by the student. Online training acknowledgement is tracked in the Learning Management System (LMS). The LMS confirmed all 22 BWRT staff are current and have completed their annual PREA training.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.232 Volunteer and contractor training

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)
b. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
c. 530.100 Volunteer Program
d. Facilitator Guide for Prison Rape Elimination Act (PREA) Annual In Service (AIS) training
e. WADOC training link for volunteers/religious contractors https://doc.wa.gov/corrections/programs/volunteer.html#training
f. Prison Rape Elimination Act (PREA) pamphlet for Staff, Volunteers, and Contractors
g. Sample of random DOC 03-523 PREA Acknowledgement for Volunteers
h. Sample of training records for TTH contract staff

Interview(s)

a. Volunteers and Contractors

Findings (By Provision)

115.232 (a)

PAQ noted one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting requires all new employees, contract staff and volunteers to receive initial PREA training upon hire/assignment, followed by annual refresher training… Training consisted of (1) Its zero-tolerance policy for sexual abuse and sexual assault harassment (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures (3) Inmates’ right to be free from sexual abuse and sexual harassment (4) The right inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment (5) the dynamics of sexual abuse and sexual harassment in confinement (6) The common reactions of sexual abuse and sexual harassment victims (7) How to detect and respond to signs of threatened and actual sexual abuse (8) How to avoid inappropriate relationships with inmates (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Policy 530.100 Volunteer Program state Completion of mandatory volunteer orientation training is required before beginning services… All training requires approval from the Headquarters Correctional Program Administrator and will be provided by authorized employees or volunteers trained in the curriculum… Training will include Prison Rape Elimination Act (PREA).

Four contractors reported they have completed PREA training regarding sexual abuse and sexual harassment prevention, detection, and response. They received in person training and online video training. They receive any policy and procedural updates to PREA at the trainings.

The audit team reviewed the training records of all 22 BWRT staff of which 20 were contracted staff. All 22 had completed their PREA initial and refresher trainings were current.
A final analysis of the evidence indicates the facility is compliant with this provision.

115.232 (b)

PAQ noted the following information corresponding to this provision. The Facilitator Guide for Prison Rape Elimination Act (PREA) training identifies the zero-tolerance policy for sexual abuse and sexual harassment as part of the training overview.

Four contractors reported they were aware of the zero-tolerance policy and were able to articulate 10 elements of the PREA policy on Prevention and Reporting.

Discussions with the CSS indicated there were no volunteers at BWRT since the start of COVID. This was confirmed by the staff training list where only contractors and full-time DOC staff were listed.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.232 (c)

PAQ noted one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting requires staff to acknowledge their understanding of the PREA training... For online training, acknowledgment will be included in the electronic course... For in-person training, acknowledgment will be documented on DOC 03-483 PREA Training Acknowledgment or DOC 03-523 PREA disclosure and Training Acknowledgement for Volunteers.

The audit team reviewed the training records of all 22 BWRT staff of which 20 were contracted staff. All 22 had completed their PREA initial and refresher trainings were current. Audit team reviewed the signed acknowledgment forms (03-483 PREA Training Acknowledgement) for PREA training on-line through LMS.

A final analysis of the evidence indicates the facility is compliant with this provision.
Resident education

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-audit Questionnaire (PAQ)
b. 310.000 Orientation
c. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
d. Intake records of inmates for past 12 months
e. Record of inmate receiving PREA information at intake
g. PREA posters (English and Spanish) listing the PREA hotline number
h. Inmate education material
  i. Random 21-992 Prison Orientation Checklist
k. PREA brochure in Spanish
l. PREA posters in Spanish
m. End Silence for residents with comprehension and reading deficiencies

Interview(s)

a. Intake Staff
b. Random Inmates

Findings (By Provision)

115.233 (a)

PAQ identified two policies corresponding to this provision. Policy 310.000 Orientation state all newly received incarcerated individuals will participate in a program of interviews, testing, and other activities related to the admission process at the receiving facility per DOC 310.150 Reception, Initial Classification, and Custody Facility Plan... Initial reception and orientation will be completed within 4 weeks of admission to the RDC unless medical, mental health, or behavioral issues prevent completion of this process... Incarcerated individuals arriving at or transferred to a Work/Training Release or prison, including transfers between an Intensive Management Unit (IMU) will receive an orientation to the new facility... Work/Training Release orientation will be conducted within 48 hours of admission.... Individuals in Work/Training Release will be notified of all appropriate policies and procedures that affect them. Employee will document orientation in the incarcerated individual's electronic file and the individual will acknowledge receipt of orientation and the Statewide Inmate Orientation Handbook/facility specific handbook by signing the DOC 05-512 Work/Training Release Orientation Checklist in Work/Training Release.

Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state individuals under the department's jurisdiction will be provided PREA-related information, which will include information on the Department's zero tolerance stance and ways to report sexual misconduct. Information will be presented in a manner allowing individuals to ask questions of the staff member facilitating the orientation... If an orientation video is presented in-transit, individuals will be provided an opportunity to ask questions of the facilitator during the onsite facility orientation.
The Intake Staff reported, that residents receive information about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. The information is in the form of an inmate handbook, a PREA policy pamphlet, through an in-person orientation, a PREA video and through a work release video. They each get a folder with this information and then I go through the folder contents with them.

19 Random inmates reported they received their PREA training on the same day they arrived. They received a folder with the information about the rules, an inmate handbook, how to contact staff, phone numbers to points of contacts and sign paperwork.

PAQ noted the following information corresponding to this provision. BWRT reported 115 inmates received information on PREA and the zero-tolerance policy at intake.

The audit team was able to review (spot check) records of intake inmates for the previous 12 months, review through acknowledgment forms of the orientation being completed, and review of the intake folder contents to ensure the PREA policy and procedures were contained within.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.233 (b)

PAQ noted the following information corresponding to this provision. Zero number of residents transferred from a different community confinement facility during the past 12 months.

The Intake Staff reported residents receive information about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. The information is in the form of an inmate handbook, a PREA policy pamphlet, through an in-person orientation, a PREA video and through a work release video. They each get a folder with this information and then I go through the folder contents with them.

19 Random inmates reported they received their PREA training on the same day they arrived. They received a folder with the information about the rules, an inmate handbook, how to contact staff, phone numbers to points of contacts and sign paperwork.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.233 (c)

PAQ noted the following information corresponding to this provision. Resident PREA education is available in formats accessible to all residents, including those who are Limited English Proficient (LEP), deaf, visually impaired, otherwise disabled or limited in their reading skills.

The audit team reviewed PREA brochures in English and Spanish, the PREA video can be watched with sub titles or closed captioned. Work Release information is in English and Spanish. End Silence Facilitators Guide communicates through pictures. PREA posters in English and Spanish are displayed in all common areas accessible to inmates, staff and public. The PREA video also comes in transcript for English or Spanish.
A final analysis of the evidence indicates the facility is compliant with this provision.

115.233 (d)

PAQ identified one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state professional interpreter or translation services, including sign language are available to assist individuals in understanding this policy, reporting allegations, and for participating in investigations of sexual misconduct per DOC 450.500 language Services for Limited English Proficient Individuals... Individuals are not authorized to use interpretation/translation services from other individuals, family members, or friends for these purposes... The Deaf Services Coordinator is authorized to provide the same professional interpreter/translation service for sign language as contract interpreters with regard to assisting individuals in understanding this policy, reporting allegations and/or participating in investigations of sexual misconduct... With the exception of the Deaf Services Coordinator, staff interpreters/translators will only be used for these purposes in exigent circumstances... Americans with Disabilities Act (ADA) accommodations will be provided per DOC 690.400 Offenders with Disabilities... The need to provide targeted orientation will be determined on a case-by-case basis, taking into consideration: Reading comprehension levels, Mental health input/evaluation, Cognitive abilities, Interactions with staff, and/or Language barriers other than Spanish.

The PREA audit team reviewed a Facilitator’s Guide “End Silence” (Graphic Novel) for education custodial staff and youthful residents about sexual victimization in custodian settings also appropriate for lower functioning adults. Spanish education materials were also reviewed for PREA content and agency Zero tolerance policy.

The audit team was able to review all 22 records of intake inmates for acknowledgment forms of the orientation being completed.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.233 (e)

The audit team reviewed PREA brochures in English and Spanish, the PREA video can be watched with subtitles or closed captioned. Work Release information is in English and Spanish. End Silence Facilitators Guide communicates through pictures. PREA posters in English and Spanish are displayed in all common areas accessible to inmates, staff and public. The PREA video also comes in transcript for English or Spanish.

The audit team participated in a PREA education on the second day of the on-site. PREA policy information was provided through an inmate handbook, a video, English and Spanish posters, English and Spanish brochures, English and Spanish pamphlet and graphic novel. There was a Q&A session after the PREA video was watched.

Discussions with inmates indicated that the PREA video can be watched on the closed-circuit TV channel at the facility as it plays on a regular basis.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.234 Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-audit Questionnaire (PAQ)

b. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting

c. 490.860 Prison Rape Elimination Act (PREA) Investigation

d. 880.100 Corrections Training and Development

e. Training records of investigative staff

f. PREA Workplace Investigation Training Participants

Interview(s)

a. Investigative Staff

Findings (By Provision)

115.234 (a-b)

PAQ identified two policies corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state investigators will be assigned by the appointing Authority/designee and must be trained per DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting.

Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state PREA investigators will be trained in: (1) Crime scene management/investigation, including evidence collection in prison and work/training releases, (2) Confidentiality of all investigation information, (3) Miranda and Garrity warnings, compelled interviews, and the law enforcement referral process, (4) Crisis intervention, (5) Investigating sexual misconduct, (6) Techniques for interviewing sexual misconduct victims and (7) Criteria and evidence required to substantiate administrative action or prosecution referral.

The Investigative staff reported originally - the agency rolled out 4 days of training for investigators. It covered policy and procedures, WA Administrative Code, revised codes of WA, legal aspects of investigations, staff scenarios, debriefing, conducting mock interviews, developing questions as an investigator, gathering information, covered interviewing techniques, documentation and recording. The Garrity rights, waiving those rights, signing off on investigations after completion, the investigation review process. Confidentiality of information and appropriate forms for documentation.

The auditor reviewed samples of 3 investigative staff training records and confirmed the successful completion of investigative training.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.234 (c)

PAQ identified one policy corresponding to this provision. Policy 880.100 Corrections Training and Development state the
Training and Development Unit (TDU) Administrator will maintain training records/certifications.

PAQ noted the following information corresponding to this provision. The number of certified PREA investigators currently employed is 658.

The PREA audit team reviewed sample Training transcripts for three investigators. WADOC maintains a PREA Workplace Investigation Training Participants listing trained investigators and their status.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.234 (d)
Auditor is not required to audit this provision
Specialized training: Medical and mental health care

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-audit Questionnaire (PAQ)

b. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting

c. 610.025 Health Services Management of Alleged Sexual Misconduct Cases

d. 880.100 Corrections Training and Development

e. DOC PREA Health Services Training for the Medical Management of PREA Cases

Findings (By Provision)

115.235 (a)

PAQ identified two policies corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state Health Services employees/contract staff, with the exception of medical records, clerical, pharmacy personnel, the Dietary Services Manager, and the Psychologist assigned exclusively to sex offender treatment programming, will be trained (1) Detecting and assessing signs of sexual misconduct, (2) Responding effectively and professionally to sexual misconduct victim, (3) Completing DOC 02.348 Fight/Assault Activity Review, (4) Preserving physical evidence, (5) Reporting sexual misconduct, and (6) Counseling and monitoring procedures.

Policy 610.025 Health Services Management of Alleged Sexual Misconduct Cases state if the report is made within 120 hours of the alleged sexual assault and the case involves penetrations and/or exchange of bodily fluids, the Department will transport the offender to the designated community health care facility. Agency staff and contractors are prohibited from conducting any forensic medical examinations.

The auditor reviewed the PREA Health Services training curriculum and noted the required elements meet policy requirements. BWRT does not have medical or mental health care practitioners at the facility.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.235 (b)

PAQ noted the following information corresponding to this provision. BRWT has zero agency medical staff at this facility to conduct forensic medical exams.

Discussions with CCS indicate offenders in WADOC work release facilities are personally responsible for costs associated with their general medical and/or mental health treatment. Any offender who seeks medical and/or mental health treatment after a reported PREA incident is referred to a community provider and the treatment expenses are covered by the WADOC.

The audit team noted during the on-site there were no medical or mental health staff at BWRT. Inmates may seek medical and mental health services in the community.
A final analysis of the evidence indicates the facility is compliant with this provision.

115.235 (c)

PAQ identified one policy corresponding to this provision. Policy 880.100 Corrections Training and Development state Staff training and Tracking Information System (STATIS) will be used to document all official department training.

The audit team noted during the on-site there were no medical or mental health staff at BWRT. Inmates may seek medical and mental health services in the community.

A final analysis of the evidence indicates the facility is compliant with this provision.
Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents
a. Pre-audit Questionnaire (PAQ)
b. 280.310 Information Technology Security
c. 280.515 Data Classification and Sharing
d. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
e. 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments
f. 490.860 Prison Rape Elimination Act (PREA) Investigation
g. Offender Management Network Information (OMNI) PREA Risk Assessment (PRA) Assessors Guide
h. PREA Risk Assessment (PRA) form DOC 07-019
i. PRA Housing Guide

Interview(s)
a. Staff responsible for Risk Screening
b. Random Inmate interview
c. PREA Coordinator
d. PREA Compliance Manager

Findings (By Provision)

115.241 (a-b)

PAQ identified one policy corresponding to this provision. Policy 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments state initial and Intake PRAs... Classification Counselors and designated Work Release employees will complete a PREA within 72 hours of arrival for all offenders arriving at any department facility. This includes offenders returning to a facility from unescorted leave (e.g. out-to-court). Facilities will establish procedures to ensure completion within 72 hours, even on weekends and holidays...

3 Risk Screeners reported residents are screened upon admission if not within 72 hrs. of arriving at the facility. They are then reassessed within 30 days of arrival. If they are a possible predator or possible victim, they would have bimonthly meetings with the individual.

19 Random inmates reported they were screened upon arrival or shortly thereafter on the same day.

The audit team noted the following. The objective screening instrument is the Offender Management Network Information (OMNI) PREA Risk Assessment (PRA). When an Initial, Intake, or Follow-Up PRA is overdue. The assigned Classification Counselor or Work/Training Release CCO will receive an action-required OMNI Notification stating, “PREA Risk Assessment is overdue”. Notifications will also be sent once a PRA has been “in work” for three (3) days. If a Counselor or Work/Training Release CCO has not yet been assigned, the Notification will be sent to the facility PREA Mailbox, which will be monitored by facility staff as designated by the Appointing Authority. Once a Counselor or Work/Training Release CCO is assigned, the Notification will automatically be forwarded to that Counselor or Work/Training Release CCO. This electronic alert
notification ensures the 72-hour timeline is not missed.

The audit team reviewed PREA assessment records for all 22 inmates residing at BWRT and confirmed the PRA were completed within 72 hours of arrival at the facility.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.241 (c)

PAQ identified one policy corresponding to this provision. Policy 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments state all PREA Risk Assessments (PRA) will be completed in the offender’s electronic file...

If access to the electronic file is not possible, the Classification counselors may use DOC 07-019 PREA Risk Assessment form to document PRA information and update the electronic file as soon as practical.

The audit team noted the following. The PREA assessments contain 18 questions or screening measures of which are separated as Sexual Victimization Potential and Sexual Predation Potential. The Sexual Victimization Potential contains 13 questions of which 9 are objective and 4 are subjective (i.e. Does offender identify as gay/lesbian or bisexual, does offender identify as transgender or intersex, Does offender identify as gender non-conforming, and Does the offender express feelings of being at risk of being sexually abused). The four subjective questions are appropriate as they are in compliance with the variables required per 115.41(d). The Sexual Predation Potential contains 5 question all of which are objective. The responses to these 18 questions have a designated point value which is then assigned a score to determine their risk identifier (e.g. NRI – no risk identified, PV – potential victim, or PP – potential predator or DI – dual identifier). This information is captured in OMNI PRA.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.241 (d)

The electronic system used to conduct the PREA Risk Assessments (PRA) is OMNI. The PRA asks the offender the following questions.

- Is this the offender’s first prison incarceration as an adult?
- Is the offender under the age of 25 or over the age of 65?
- Is the offender small in stature? o Males: Under 5'8" and/or under 140 pounds o Females: Under 5'0" and/or under 115 pounds
- Has the offender ever been sexually assaulted/abused while incarcerated in any type of facility?
- Has the offender ever been convicted of a sex offense or a crime with sexual motivation in which the victim was a child of 13 years or younger or elderly person of 65 years or older?
- Does offender identify as gay/lesbian or bisexual? o If no, does the offender seem to be gender non-conforming to you/others?
- Does offender identify as transgender or intersex?
- Does offender identify as gender non-conforming? o If no, does the offender seem to be gender non-conforming to you/others?
- Does the offender express feelings of being at risk of being sexually abused?
- Has the offender’s criminal history been exclusively non-violent?
- Does the offender have any mental illness or impairment that increases vulnerability?
- Does the offender have any developments, intellectual, or physical disability that increases vulnerability?
- For males only: Has the offender ever been the victim of sexual abuse/assault in the community?

3 Risk screeners reported they would look at the offender's incarceration history. Any incidents of incarceration through self-reporting. Previous prior to incarceration. Any incident of child hood drama or PREA reports while at other facility. How do they identify (LGBTI) or anything on the screening sheet. What is their assault or violent crimes history. We look at any sexual misconduct while incarcerated. Is there any history of sexual abuse or sexual harassment with either staff or inmate. Is this the first time in prison for the offender. We conduct background checks into their CCR. We also look at their size and age.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.241 (e)

The electronic system used to conduct the PREA Risk Assessments (PRA) is OMNI. The following questions are asked of the offender in order to consider previous acts of sexual abuse or sexual harassment.

- Does the offender have any previous prison incarcerations as an adult?
- Has the offender ever committed sexual assault/abuse while incarcerated in any type of facility to include jails or other state corrections agencies?
- Has the offender ever committed any other violent act while incarcerated in any type of facility to include jails or other state corrections agencies?
- Has the offender ever been convicted of a sexual offense or a crime with sexual motivation in which the victim was between 14 and 65 years old?
- Has the offender ever been convicted of a violent offense?

3 Risk screeners reported they would look at the offender’s incarceration history. Any incidents of incarceration through self-reporting. Previous prior to incarceration. Any incident of child hood drama or PREA reports while at other facility. How do they identify (LGBTI) or anything on the screening sheet. What is their assault or violent crimes history. We look at any sexual misconduct while incarcerated. Is there any history of sexual abuse or sexual harassment with either staff or inmate. Is this the first time in prison for the offender. We conduct background checks into their CCR. We also look at their size and age.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.241 (f)

PAQ identified one policy corresponding to this provision. Policy 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments state a follow-up PRA will be completed between 21-30 calendar days after a resident's arrival at the facility.

3 Risk screeners reported the first 24 hours of arrival is when orientation will occur then the following day is the PRA in OMNI
and the reassessment between 21-30 days from arrival.

19 Random inmates reported, they received an assessment and orientation shortly after arrival at BWRT and a couple of weeks later were asked the assessment again.

The audit team reviewed the OMNI tracking for all inmates at BWRT and noted all reassessments were completed within 30 days of their arrival.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.241 (g)
PAQ identified one policy corresponding to this provision. Policy 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments state for cause PRA will not replace required initial, intake, or follow-up PRA. For cause PRA will be completed within 10 business days by the assigned Classification Counselor.

· When additional information is received suggesting potential for victimization or predation (e.g., reports of behavior while in jail or on the bus in transit, court documents, Pre-Sentence Investigations).

· If the offender self-discloses information that could impact assessed risk (e.g., previously unreported prior abuse, sexual orientation/identity).

· When there is a finding of guilt on certain infractions listed in the PRA, including violent infractions and infractions for sexual assault/abuse.

· When an employee/contract staff observes offender behavior suggesting potential for victimization or predation.

· For substantiated allegations of offender-on-offender sexual abuse/ assault or staff sexual misconduct.

3 Risk screeners reported anytime a new incident occurred or if there was a change of history or a self-report. They will go back in and complete a reassessment.

19 Random inmates reported they received an assessment and orientation shortly after arrival at BWRT and a couple of week later were asked the assessment again.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.241 (h)
PAQ identified one policy corresponding to this provision. Policy 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments state offenders are not obligated to answer PREA questions and cannot be disciplined for refusing to answer or not disclosing complete information in response to assessments.

3 Risk screeners reported there’s no discipline for refusing to answer as the inmates have the right of refusal.

The auditor noted in the OMNI PRA Assessors Guide (page 7 of 25), it states if the offender refuses to answer an
assess any relevant assessment question, that information should be included in the narrative section and the assessment question scored with whatever other information the assessor has available. The source of the other information is to be included in the narrative.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.241 (i)

PAQ identified five policies corresponding to this provision. Policy 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments state all PREA Risk Assessments (PRA) will be completed in the offender’s electronic file. PRA must be completed in person with the offender. If access to the electronic file is not possible, the Classification counselors may use DOC 07-019 PREA Risk Assessment form to document PRA information and update the electronic file as soon as practical.

Policy 280.310 Information Technology Security state All users with access to confidential Department data must maintain the integrity of the data per DOC 280.515 Data Classification and Sharing.

Policy 280.515 Data Classification and Sharing state Data will be classified into 4 categories per the Data Classification Standards and office of the Chief Information Officer (OCIO) 141.10 Securing Information Technology Assets… Category 4 Data: Confidential Information Requiring Special Handling – Data that is specifically protected from release by law and… Has especially strict handling requirements by statute, regulation, or agreement… May result in serious consequences arising from unauthorized release… Per the Federal Information Processing Standards 140-2 or higher: Category 3 and 4 data must be encrypted when storing/transferring data… Portable storage devices must be hardware encrypted when transferring data.

Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state Information related to allegations/incidents of sexual misconduct is confidential and will only be disclosed when necessary for related treatment, investigation, and other security and management decision. Staff who breach confidentiality may be subject to corrective/disciplinary action.

Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state all PREA data containing personal identifying information will be maintained as Category 4 data per DOC 280.515 Electronic Data Classification.

The PREA coordinator reported the agency only authorized access to the classification counselor and those above them in the chain of command to the OMNI PRA system.

1 of the 3 Risk screeners reported that they meet with the offenders individually. I make a copy of the check list and take notes of the assessment interview. Then I log into my electronic PREA risk assessment and enter data points of what was collected. I verify the entries and wait for a PREA score that is calculated for me. After all the information is entered in electronic format (OMNI), I shred the paper with the notes.

The auditor noted in the OMNI PRA Assessors Guide (page 4 of 25), it states specific information contained within the PRA is confidential and only disclosed if there is a safety or security risk, or as needed for housing and programming decisions.

Access to the PRA system is granted automatically by position by those in classification (e.g. work release CCO’s and CCS’s; prison CC’s CUS’s, CPM’s and Associate Superintendents). Any additional access must be approved by the Agency PREA Coordinator via an IT Help Ticket.
The PREA audit team observed two PRA during the on-site and the staff screener used form 07-019 PREA Risk Assessment for the interview, scanned the form, then disposed of the form.

Recommendation for PRA form DOC 07-019 (Rev. 01-30-20). Change the language on the bottom left corner of the form which states “Scan code: RP01 Scan and toss”. The use of the word toss would insinuate a person can throw away the form after use. Recommend the term is modified to something less ambiguous (e.g. shred or destroy hard copy).

A final analysis of the evidence indicates the facility is compliant with this provision.
Use of screening information

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-audit Questionnaire (PAQ)
b. 300.380 Classification and Custody Facility Plan Review
c. 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments
d. 490.700 Transgender Intersex, and/or Gender Non-conforming Housing and Supervision
e. PREA Risk Assessment (PRA) Housing Guide

Interview(s)

a. PREA Coordinator
b. Staff Responsible for Risk Screening

Findings (By Provision)

115.242 (a – b)

PAQ identified two policies corresponding to this provision. Policy 300.380 Classification and Custody Facility Plan Review state the Incoming Screening Committee members will review each offender on the transfer manifest before she/he arrives at the receiving facility. The screening will include, at a minimum... Prison Rape Elimination Assessment (PREA) information per DOC 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments... Facility Risk Management Team (FRMT) is only considered multidisciplinary when one or more of the following disciplines are included as members when relevant to the offender. Additional mental health and/or other employee/contract staff may be included to provide general input about areas of potential risk based on history for offenders with a documented history of predatory violence or predatory sexual offending... Any concerns regarding work programs, treatment, education, evidence-based programs, or other activities presented after reviewing the offender’s PEA Risk assessment will be documented in the Summary/Statement field in the Classification Review section of the incoming Transport/Job Screening Checklist, including any applicable mitigation strategies.

Policy 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments state the PREA Risk Assessment information will be reviewed before offender job placement and programming assignments per DOC 300.380 Classification and Custody Facility Plan Review... Before placing the offender in a multi-person cell/room, employees responsible for making housing assignments will review the PRA identifier to ensure the compatibility of cell/roommates... For offenders who have not had a PRA, either at the sending facility or on a prior incarceration, a mental health employee/contract staff will review the completed DOC 13-394 Intersystem/restrictive Housing Mental Health Screening for information impacting the offender’s housing assignment... Employees will document the review in a PREA housing chrono entry for each cell occupant...

The PREA coordinator reported at intake the risk screening is to detect whether an inmate may be a potential victim, potential predator or dual identified. Information is used to review housing, education and programming placement to ensure residents in certain risk categories are not housed together.

3 Risk screeners reported they use the information from the risk screening to ensure we have proper housing assignments at the facility and for the sexual safety for the residents and monitoring plans.

The PREA audit team reviewed the PRA Housing Guide. It provided information on the four types of PREA risk assessments (Initial, Intake, Follow-up and For cause), how to navigate the electronic risk screening information within the OMNI system, and housing assignment screenings to ensure compatibility of cell/room assignments. Monitoring plan are developed for offenders identified as potential victims, potential predators or who are duel identified and reviewed by the
Facility Risk Management Team (FRMT). The team also reviewed samples of chrono entries in OMNI indicating that individualized determinations were taking place to ensure the safety of each inmate.

A final analysis of the evidence indicates the facility is compliant with this provision.

155.242 (c)

PAQ identified two policies corresponding to this provision. Policy 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments state housing and programming will be reviewed, initially and prior to any transfer by a local review committee for all offenders who identify as transgender or intersex. Initial housing reviews will be completed within 10 business days of disclosure by the offender of transgender or intersex status.

Policy 490.700 Transgender Intersex, and/or Gender Non-conforming Housing and Supervision state the PREA Coordinator will maintain a record of transgender, intersex, and/or gender non-conforming individuals in a secure imaging system...

DOC 02-420 Preferences Request will be completed if an individual identifies as transgender, intersex, and/or gender non-conforming… If the arriving individual does not have a PREA risk assessment (PRA) and DOC 02-384 Housing Protocol for Transgender, Intersex, and Gender Non-Conforming Individuals on file, the individual will be evaluated by appropriate personnel and temporarily assigned to the least restrictive housing pending final outcome of the Multidisciplinary Team (MDT)... In prisons, an individual who is at high risk for sexual victimization will be housed separately only if there is no available alternative means of separation from likely abusers.

Form DOC 02-384 Housing Protocol for Transgender, Intersex, and Gender Non-Conforming Individuals. This form considers how the resident’s medical and mental health needs are affected by their placement, the length of their incarceration, history of victimization, likelihood of the individual being taken advantage of based on their placement, the individual’s ability to stand up for themselves and several other factors to determine whether a men’s facility or women’s facility is the best placement for the individual.

Form DOC 02-420 Preferences Request. This form indicates how they self-identify, their preferred pronouns and whether they feel safe to be housed in general population.

The PREA coordinator reported it’s on a case by case basis and we utilize a housing protocol to identify areas in regards to the needs of the inmates. We look at how they identify. How they feel regarding their safety for housing and programming. Immediately upon identification of being Transgender or Intersex, or Gender nonconforming we initiate a review for every 6 mos to note any changes. (e.g. housing safety, current housing location and mental health.)

The audit team interviewed all 22 inmates at BWRT and none identified as LGBTI.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.242 (d)

PAQ identified one policy corresponding to this provision. Policy 490.700 Transgender Intersex, and/or Gender Non-conforming Housing and Supervision state the facility MDT will reassess placement and programming assignments every 6 months using DOC 02.385 Housing Review for Transgender, Intersex, and Gender Non-Conforming Individuals to review any threats to the individual’s safety… Transgender and intersex offenders may appeal housing review decisions writing to the prisons Command A deputy director for decisions made based on facility recommendations or applicable assistant secretary for decision made after a headquarters MDT review.
The PREA coordinator reported, transgender or intersex inmates’ views with respect to his or her own safety are given serious consideration in placement and programming assignments at WADOC.

3 Risk screeners reported it’s part of the PRA assessment process and it’s one of the questions asked, do they feel at risk of being sexually abused?

The audit team interviewed all 22 inmates at BWRT and none identified as LGBTI.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.242 (e)

PAQ identified one policy corresponding to this provision. Policy 490.700 Transgender Intersex, and/or Gender Non-conforming Housing and Supervision state the facility MDT will reassess placement and programming assignments every 6 months using DOC 02.385 Housing Review for Transgender, Intersex, and Gender Non-Conforming Individuals to review any threats to the individual’s safety... Transgender and intersex offenders may appeal housing review decisions writing to the prisons Command A deputy director for decisions made based on facility recommendations or applicable assistant secretary for decision made after a headquarters MDT review.

The PREA coordinator reported transgender or intersex inmates can request it through their classification counselor or through any supervisor to include PCM, PCS, Medical or Mental health staff.

3 Risk screeners reported currently BWRT does not have any identified Transgender or Intersex inmates at BWRT however in the past we have allowed Transgender or Intersex to have a separate shower for themselves. All the showers here are single showers with privacy curtains.

The audit team interviewed all 22 inmates at BWRT and none identified as LGBTI.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.242 (f)

PAQ identified one policy corresponding to this provision. Policy 490.700 Transgender Intersex, and/or Gender Non-conforming Housing and Supervision state facilities will develop local procedures to allow transgender, intersex, and/or gender non-conforming individuals the opportunity to shower and dress/undress separately from other individuals.

The PREA coordinator reported the agency does not house LGBTI inmates in designated locations. Per policy, offenders are reviewed utilizing a housing protocol. Offenders are assessed at intake and determine their housing location from there. Staff monitor the population regularly to ensure it does not happen.

The audit team interviewed all 22 inmates at BWRT and none identified as LGBTI.
The audit team during the on-site reviewed noted that the showers were individual with privacy curtains.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.251  Resident reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents
a. Pre-Audit Questionnaire (PAQ)
b. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
c. 490.850 Prison Rape Elimination Act (PREA) Response (Attachment 4)
d. MOU with Colorado DOC (K10506)
e. PREA posters (English and Spanish)
f. Staff PREA Brochure

Interview(s)
a. Random Staff
b. Random Inmates
c. PREA Coordinator

Findings (By Provision)

115.251 (a)

PAQ indicated one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting identifies multiple ways an offender can report an allegation of sexual abuse or sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

11 Random staff reported inmates can write a note, report it verbally a to staff member, use the Kiosk to send information to any staff. They have personal cell phones so they can call some at headquarters, go through a 3rd part, tell a friend or family. They can always call the hotline listed on the posters or write to you, the PREA auditor. They can write a complaint to Colorado Department of Corrections, call any law enforcement, the PREA office, or a lawyer.

19 Random inmates reported you can write someone you trust, make phone calls, send a letter to Colorado, write a request to staff, tell staff at the facility, call the PREA hotline, friend or family, send kite into staff, counselor, use the Kiosk. The bulletin boards have the information about PREA. You can also use the internet to file a complaint.

The PREA audit team noted PREA posters (English and Spanish) in all common areas used by the public, staff and inmates on bulletin boards. The information indicated where and how to report an allegation. Information on how to report is in their inmate handbooks, brochures from intake and PREA videos shown on the CCTV channel at the facility on a regular basis.

The confidential PREA hotline was tested by the PREA audit team prior to the on-site as was the WADOC public website reporting mechanism for PREA allegations and found compliant.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.251 (b)

PAQ noted a Memorandum of Understanding with the Colorado Department of Corrections. (PREA Reporting Office, 2862 South Circle Drive, Colorado Springs, CO 80906. This intergovernmental agreement does not convey or include within its scope authority for the receiving party to investigate those reports. The receiving party's sole function with regard to such reports shall be to immediately forward them to the part having jurisdiction, who shall be responsible for investigating them.

The PREA coordinator reported, one way for residents to report is through an outside reporting agency. They can write to the Colorado DOC and report an incident or allegation. The address is posted on the PREA posters throughout the facilities. The residents can also remain anonymous. There are forms available in the living areas. Anyone can pick up forms, it comes with an envelope that is pre-addressed. They can drop it into a grievance box on the unit. Anything addressed to the Colorado DOC gets mailed whether it's addressed or not. The envelope will not get opened by staff here. We brief this at inmate orientation so they are aware of their options.

19 Random inmates reported they would use the phones, tell the staff, write letter or have a family member do it, they can call the PREA hotline, put a grievance in the box, use the chain of command and contact headquarters, you can send a kite, call anonymously, call the police officer or use their personal cell phone.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.251 (c)

PAQ indicated one agency policy corresponding to this provision. Policy 490.850 Prison Rape Elimination Act (PREA) Response state staff must immediately report any knowledge, suspicion, or information received, including anonymous and third-party reports, regarding an allegation or incident of sexual misconduct occurring in any incarceration setting even if it is not a department facility. This also include related retaliation and knowledge of staff actions or neglect that may have contributed to an incident... Staff receiving any information regarding an allegation or incident of sexual misconduct must deliver the information confidentially and immediately per the PREA reporting process (Attachment 4).

11 Random staff reported they would immediately forward the information to the CCS if they are on-site otherwise they could call the duty officer. All information provided from inmate will be treated confidentially and documented as needed. Inmates can report to staff in person, in writing, anonymously through the mail, inmates can call it in or go through a friend or family member.

19 Random inmates reported they are aware of reporting an allegation of sexual abuse or sexual harassment without having to give their name and were able to articulate the multiple methods in which they could report.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.251 (d)

PAQ indicated one agency policy corresponding to this provision. Policy 490.850 Prison Rape Elimination Act (PREA) Response (Attachment 4) state staff may report allegations of a highly sensitive nature directly to the appointing authority or duty officer.
11 Random staff reported they can privately report a sexual abuse or sexual harassment allegation directly to the secretary of the department, call the statewide director or to an appointing authority.

The auditor reviewed the staff PREA brochure that stated staff receiving any information regarding an allegation or incident of sexual misconduct must deliver the information confidentially and immediately to … the work release/residential program administrator/duty officer (work release) or the appropriate appointing authority/duty officer. Any knowledge of retaliation must be reported in the same manner.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.252 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)
b. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
c. 490.860 Prison Rape Elimination Act (PREA) Investigation
d. 550.100 Offender Grievance Program
e. Offender Grievance Program Manual
f. Memorandum from WADOC Sinclair (January 10, 2019)

Findings (By Provision)

115.252 (a)

PAQ indicated two policies corresponding to this provision. Policy 550.100 Offender Grievance Program state grievances alleging sexual misconduct will be forwarded to the PREA coordinator per DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting and will not be reviewed through the grievance process.

Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state grievances, including emergency complaints, per DOC 550.100 Offender Grievance Program and the Offender Grievance Program Manual... Copies of grievances alleging sexual misconduct will be forwarded immediately to the applicable authority per the Prison Rape Elimination Act (PREA) Response... The individual will be notified via the grievance response that the allegation was forwarded for review for a possible PREA investigation... The PREA coordinator/designee will notify the appropriate grievance staff of the determination on whether the allegation meets the definition of sexual misconduct... If the allegation does not, the individual may refile the grievance per DOC 550.100 Offender Grievance program.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.252 (b)

PAQ provided a memorandum from WADOC Sinclair (January 10, 2019) state although PREA investigations are not subjected to specific policy defined timelines for completion, DOC policy 490.860, Prison Rape Elimination Act (PREA) Investigation states: “The Department will thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving offenders under the jurisdiction or authority of the Department.”

The audit team noted the Offender Grievance Program (page 24) state complaints and grievances alleging any form of sexual assault, sexual abuse, and/or staff sexual misconduct will be immediately processed per Prison Rape Elimination Act (PREA) Policy. Complaints and grievances investigated as PREA will not be investigated through the Offender Grievance Program. From the standpoint of the Offender Grievance Program, once a PREA complaint is reported as PREA, the complaint/grievance is considered informally resolved. If the PREA unit determines an issue is not PREA, the offender may pursue it through the Offender Grievance Program.

The audit team did not note any time limits for inmates to file a grievance alleging sexual abuse regardless of when it
occurred nor did the team note any requirement for an inmate to use an informal grievance process or attempt to resolve with staff an alleged incident of sexual abuse in either policy 490.800 Prison Rape Elimination Act (PREA) Prevention or Reporting nor in policy 550.100 Offender Grievance Program.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.252 (c)

PAQ noted one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state individuals may report PREA allegations anonymously, through a third party, calling the confidential PREA hotline, in writing to the PREA coordinator, through a grievance, or to an outside agency via grievance/medical envelope.

The PREA audit team noted multiple PREA postings throughout the facility and information brochures (English and Spanish) identifying methods for inmates to submit a grievance alleging sexual abuse without submitting it to a staff member who is the subject of the complaint or referring the allegation to a staff member who is the subject of the complaint.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.252 (d)

PAQ provided a memorandum from WADOC Sinclair (January 10, 2019) state if an investigation has been open for a period of 90 days or more, it is reviewed for status and issues that may need to be resolved by the agency PREA Coordinator and/or responsible Appointing Authority. This allows for oversight of investigations without restricting the investigation, particularly in cases involving law enforcement or issues such as witness availability, evidence processing, etc. Generally, offenders are required to exhaust their administrative remedies (i.e. the grievance process) before filing litigation. Since WADOC removes PREA allegations from the established grievance process, the submission of a formal grievance would not be a prerequisite for an offender to file related litigation.

Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state Copies of grievances alleging sexual misconduct will be forwarded immediately to the applicable authority per the Prison Rape Elimination Act (PREA) Response… The individual will be notified via the grievance response that the allegation was forwarded for review for a possible PREA investigation… The PREA coordinator/designee will notify the appropriate grievance staff of the determination on whether the allegation meets the definition of sexual misconduct… If the allegation does not, the individual may refile the grievance per DOC 550.100 Offender Grievance program.

The audit team noted WADOC does not process allegations of sexual abuse filed through the grievance program. These allegations are processed using the procedure outlined in DOC Policy 490.800 Prison Rape Elimination Act Prevention and Reporting. This process calls for resolution of the allegation within 30 days of assignment for investigation.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.252 (e)

PAQ noted one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state individuals, visitors, family members/associates, and other community members can report: allegations of sexual misconduct, retaliation by individuals or staff for reporting sexual misconduct, and/or staff actions or neglect that may have contributed to an incident of sexual misconduct.
The PREA audit team noted no requirement for the alleged victim to agree to have the request filed on his/her behalf or require the alleged victim to personally pursue any subsequent steps in administrative remedy process. Nor is there a requirement for agency documentation if the inmate declines to have third-party assistance in filing.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.252 (f)

PAQ noted one policy corresponding to this provision. Policy 550.100 Offender Grievance Program state grievances alleging sexual misconduct will be forwarded to the PREA coordinator per DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting and will not be reviewed through the grievance process.

WADOC Offender Grievance Program manual state emergency complaints are those that involve a potentially serious threat to the life or health of an offender or staff member, relate to severe pain being suffered by the offender, or that involve a potential threat to the orderly operation of a facility, and its resolution would be too late if handled through routine administrative or grievance channels... If an offender believes he/she has a complaint that is an emergency, he/she must check the “EMERGENCY” box at the top of the complaint form, write his/her complaint, and submit it to a staff person immediately after the incident so that it may be processed in a timely manner. Emergency Complaints are handled by the Grievance Coordinator or designee (most often, but not always, the Shift Lieutenant).

The PREA audit team reviewed the timeframes for emergency complaint responses. If grievance coordinator/designee determines complaint as operations related, the response will occur within 8 hours (within shift). If determined medical related, the response will occur within 1 hour.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.252 (g)

PAQ noted one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state a report of sexual abuse made in good faith will not constitute providing false information even if the investigation does not establish sufficient evidence to substantiate the allegation.

The PREA audit team noted BWRT reported zero number of inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith.

A final analysis of the evidence indicates the facility is compliant with this provision.
Resident access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)
b. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
c. Office of Crime victims Advocacy (OCVA) brochure and poster
d. WCSAP Information brochure
e. In-Person Victim Advocacy Services Guide
f. Advocate Confidentiality Summary
g. MOU WA Department of Commerce Office of Crime Victims Advocacy (OCVA)
h. WADOC Offender Orientation video

Interview(s)

a. Random inmates

Findings (By Provision)

115.253 (a)

PAQ indicated one policy corresponding to this provision. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state PREA coordinator… Maintain a memorandum of understanding for external victim advocacy services… Individuals will have toll-free access to Sexual Assault Support and Information Line operated by the Office of Crime victims Advocacy (OCVA).

19 Random inmates reported they were aware of the victim services availability for inmates and how to access them on the 1800 phone line. The phone numbers are posted next to the inmate phones on the living units and on all the bulletin boards. They were also given the Office of Crime Victims Advocacy brochure at Orientation. These brochures are in the resource room for anyone that wants one. They are aware of the services providing emotional support for victims of sexual abuse.

The PREA audit team observed postings of the number for Victim advocacy located by the inmate telephones within the facility as well as in all the common areas accessible to inmates, staff and public. Also, there are personal cell phones the inmates can purchase for their use.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.253 (b)

PAQ indicated inmates are informed prior to giving them access to outside support services that their communications will not be monitored. The facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law.
Random inmates reported the conversations with the victim advocates would be private and confidential unless you talk about hurting yourself or someone else.

The PREA audit team reviewed services provided by OCVA are confidential and that they are not associated with the DOC. Appointments for outside victims’ services are coordinated with the facility for scheduling. As neither BWRT nor WADOC is providing the victim advocacy service, the onus to educate the inmate on mandatory reporting laws prior to the appointment would be the service provider.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.253 (c)

PAQ indicated one policy corresponding to this provision. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state PREA coordinator… Maintain a memorandum of understanding for external victim advocacy services.

WCC PAQ indicated WADOC has an MOU with MOU WA Department of Commerce Office of Crime victims Advocacy (OCVA) for services.

The PREA audit team noted OCVA provide victim services for inmates seeking emotional support for sexual abuse. The MOU describes the responsibilities of the parties involved in an effort to facilitate and provide support services to inmates.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.254 Third party reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)
b. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
c. WADOC Information for Family and Friends brochure
d. WADOC public website https://doc.wa.gov/corrections/prea/default.htm
e. WADOC Inmate Handbook

Findings (By Provision)

115.254 (a)

PAQ indicated one policy corresponding to this provision. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state PREA coordinator… Maintain PREA content for the department website, including publication of required information and documents… The PREA compliance manager will coordinate local PREA compliance and: Coordinate monthly check to verify: Posters and brochures provided by the PREA coordinator are posted in areas accessible to individuals and the public, including Health Services areas and case manager offices… Visitors, family members/associates, and other community members can report allegations by calling the PREA hotline, writing a letter to the PREA coordinator or sending an email to DOCPREA@doc.wa.gov.

The PREA audit team reviewed the public website to confirm information on how to report sexual abuse and sexual harassment on behalf of an inmate are identified for a member of the public to access.

Prior to the onsite the auditor submitted an email on the WADOC public website to test their electronic PREA allegation process. Audit received a follow up communication from the agency in a timely manner.

A final analysis of the evidence indicates the facility is compliant with this provision.
**Staff and agency reporting duties**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

**Documents**

- a. Pre-Audit Questionnaire (PAQ)
- b. 350.550 Reporting Abuse and Neglect/Mandatory Reporting
- c. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
- d. 490.850 Prison Rape Elimination Act (PREA) Response
- e. 490.860 Prison Rape Elimination Act (PREA) Investigation
- f. PREA brochure for Staff, Volunteers and Contractors
- g. PREA poster (English and Spanish)
- h. Offender Statewide Handbook

**Interview(s)**

- a. Random staff
- b. Community Corrections Supervisor (CCS)
- c. PREA Coordinator

**Findings (By Provision)**

**115.261 (a)**

PAQ indicated one policy corresponding to this provision. Policy 490.850 Prison Rape Elimination Act (PREA) Response state staff must immediately report any knowledge, suspicion, or information received, including anonymous and third-party reports regarding an allegation or incident of sexual misconduct occurring in any incarceration setting even if it is not a department facility. This also includes related retaliation and knowledge of staff actions or neglect that may have contributed to an incident.

11 Random staff reported they would immediately notify the Work Release administrator, duty officer or the CCS of any knowledge, information or suspicious of sexual abuse/sexual harassment, retaliation, or staff neglect.

A final analysis of the evidence indicates the facility is compliant with this provision.

**115.261 (b)**

PAQ indicated one policy corresponding to this provision. Policy 490.850 Prison Rape Elimination Act (PREA) Response state staff receiving any information regarding an allegation or incident of sexual misconduct must deliver the information confidentially and immediately per the PREA reporting process.

11 Random staff reported agency policy prohibits staff from revealing any information related to a sexual abuse report to
anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.261 (c)
PAQ indicated one policy corresponding to this provision. Policy 490.850 Prison Rape Elimination Act (PREA) Response state offenders will be informed of requirements of mandatory reporting at reception, and information will be posted in Health Services are where it can be seen by offenders… Health services providers must inform of the duty to report before providing treatment when an offender: Displays signs/symptoms of sexual misconduct that are identified or observed in the course of an appointment or examination or discloses to a medical or mental health provider sexual misconduct that occurred while in any correctional setting.

BRWT does not have medical or mental health staff on site. Inmates are serviced out in the community.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.261 (d)
PAQ indicated two policies corresponding to this provision. Policy 350.550 Reporting Abuse and Neglect/Mandatory Reporting state any employee, contract staff, or volunteer who has reasonable cause to believe, based on observations made or information received in the course of his/her duties, that a child has suffered abuse and/or neglect or vulnerable adult has suffered abuse, abandonment, financial exploitation, and/or neglect.

Policy 490.850 Prison Rape Elimination Act (PREA) Response state the department will report suspected child abuse/neglect and incidents of abuse, abandonment, financial exploitation, or neglect involving vulnerable adults to the appropriate authority.

The CCS reported anyone at a high risk of abuse whether they were a youthful offender, they would be referred out to child services. The same for elder abuse it would be reported to adult protective services.

The PREA coordinator reported if an allegation of a sexual abuse or sexual harassment is made by someone under the age of 18 or someone considered a vulnerable adult under state law. Once the allegation is brought to our attention, the victim under 18 or vulnerable adult will be referred to the appropriate Protective Services agency.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.261 (e)
WCC PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state The PREA coordinator/designee will review all allegations, determine which allegations fall within the definition of sexual misconduct, and forward those allegations to the appropriate appointing authority for investigation.

The CCS reported, BRWT currently has no staff trained in PREA investigations. An allegation of sexual abuse or sexual
assault would go to our appointing authority or the state-wide duty officer. Headquarters (PREA coordinator) would triage the allegation and they would determine the PREA investigator.

A final analysis of the evidence indicates the facility is compliant with this provision.
Agency protection duties

Auditor Overall Determination: Meets Standard

Auditor Discussion
Documents

a. Pre-Audit Questionnaire (PAQ)
b. 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments
c. 490.850 Prison Rape Elimination Act (PREA) Response
d. Monitoring Plans for individuals

Interview(s)

a. Agency Head
b. Community Corrections Supervisor (CCS)
c. Random Staff

Findings (By Provision)

115.262 (a)

PAQ indicated two policies corresponding to this provision. Policy 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments identify monitoring plans for offenders at increased risk for sexual victimization or predation as well as monitoring plans for transgender and intersex offenders… Immediate actions will be taken to protect the offender when it has been determined that she/he is at substantial risk of immediate sexual assault or abuse.

Policy 490.850 Prison Rape Elimination Act (PREA) Response identify the appointing authority’s responsibilities regarding an Offender on Offender misconduct as well as Staff Sexual Misconduct incidents… The Appointing Authority/designee will attempt to minimize any disturbance to the alleged victim's housing location, program activities, and/or supervision during the investigation… In Work Releases, an alleged victim will be transferred to a Prison only at his/her documented request, or when community medical or mental health services are insufficient to meet his/her needs.

The Agency head reported to address concerns of imminent risk of sexual abuse. First, upon arrival residents are screened for possible PREA concerns, if they are at possible risk of perpetrating or possible risk of being victimized. Depending on risk, we could move the possible perpetrator or if it’s a staff member, I could have them temporarily moved to another location. If it’s a resident, I would put them in a location for easy monitoring and this would allow staff to pay more attention to this person’s base line behavior or they may need to be moved from the facility.

The CCS reported There is a monitoring plan process for the residents. The monitoring plan encompasses tracking any changes in baseline behavior, if there are mental health issues they will be referred to outside community services. We also track for any reports of retaliation. Protective action for vulnerable res is based on their need. We may increase monitoring on the resident or increase their check in times. Anyone classified as a potential victim are housed in locations accessible by camera or within the line of sight of staff.

11 Random staff reported they would isolate the inmate while notifications are made to the appropriate staff (e.g. CCS or statewide duty officer). Ensure inmate is remains in a safe place and start the documentation.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.263 Reporting to other confinement facilities

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)

b. 490.850 Prison Rape Elimination Act (PREA) Response

c. 490.860 Prison Rape Elimination Act (PREA) Investigation

Interview(s)

a. Agency Head

b. Community Corrections Supervisor (CCS)

Findings (By Provision)

115.263 (a)

PAQ indicated one policy corresponding to this provision. Policy 490.850 Prison Rape Elimination Act (PREA) Response state the appointing authority will notify the appropriate appointing authority or facility administrator within 72 hours of receipt of an allegation when the alleged incident; Occurred in another department location or another jurisdiction... Involve a staff who reports through another appointing authority.

The PREA audit team noted in the past 12 months, BWRT received zero allegations that an inmate was abused while confined at another facility.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.263 (b-c)

PAQ indicated one policy corresponding to this provision. Policy 490.850 Prison Rape Elimination Act (PREA) Response state the appointing authority will notify the appropriate appointing authority or facility administrator within 72 hours of receipt of an allegation when the alleged incident; Occurred in another department location or another jurisdiction... Involve a staff who reports through another appointing authority.

The PREA audit team noted in the past 12 months, BWRT received zero allegations that an inmate was abused while confined at another facility.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.263 (d)
PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the department will thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving individuals under the jurisdiction or authority of the department.

The Agency head reported WADOC would determine the nature of the accusation. We’d go through the process of referral to law enforcement or possibly remove the individual (alleged perpetrator) to not have access to (alleged victim).

The CSS reported the allegation would still be referred to the appointing authority, it would be triaged by headquarters (PREA coordinator) and it would be assigned to a PREA investigator.

The PREA audit team noted in the past 12 months, BWRT received zero allegations that an inmate was abused while confined at another facility.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.264 **Staff first responder duties**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

**Documents**

a. Pre-Audit Questionnaire (PAQ)

b. 420. 365 Evidence Management for Work/Training Release

c. 490.850 Prison Rape Elimination Act (PREA) Response

d. First Response Actions

e. Aggravated sexual assault check list (DOC 490.820 attachment 1)

f. PREA reporting process flow chart (DOC 490.820 attachment 3)

g. PREA response and containment checklist (DOC 490.850 attachment 4)

h. PREA response kit contents list (DOC 490.850 attachment 5)

**Interview(s)**

a. First Responders

b. Random Staff

**Findings (By Provision)**

115.264 (a-b)

PAQ indicated one policy corresponding to this provision. Policy 490.850 Prison Rape Elimination Act (PREA) Response – Aggravated Sexual Assault Checklist (Attachment 1) provides an orderly process in which to respond to an aggravated sexual assault.

Policy 420.365 Evidence Management for Work/Training Release state the Community Corrections Supervisor (CCS) will assign and evidence officer to ensure all evidence seized during searches has been properly secured and DOC 05-132 Evidence/Property Records-Work Release has been completed… All physical evidence obtained in connection with a violation will be handled in the following manner… Evidence records will be reviewed at 6 months intervals by the evidence officer… The CCS will approve the disposal of items and will select and employee/contract staff to witness the disposal procedure… The evidence officer will inventory items identified for disposal, record them.

11 First responders reported they would separate the alleged victim and abuser, protect any crime scene, if with 120 hours of incident caution the alleged victim and perpetrator not to destroy any physical evidence in their body or on their body. Start the notification process and use the PREA response check list form.

11 Random staff reported they’d protect the victim and keep them and in a safe area. Ensure perpetrator is separated. Utilize our checklist, follow the protocols and if necessary contact law enforcement. As soon as possible contact the appointing authority or duty officer. Then make arrangement for victim services, contact the local hospital for SAFE/SANE. There may be physical evidence on the person.

A final analysis of the evidence indicates the facility is compliant with this provision.
Coordinated response

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)
b. 490.850 Prison Rape Elimination Act (PREA) Response
c. PREA Response Plan

Interview(s)

a. Community Corrections Supervisor (CCS)

Findings (By Provision)

115.265 (a)

PAQ indicated one policy corresponding to this provision. Policy 490.850 Prison Rape Elimination Act (PREA) Response state each prison, work release, and field office will maintain a PREA response plan providing detailed instruction for responding to allegations of sexual misconduct… The PREA response plan will consist of 4 sections composed of the document listed in PREA response plan contents (Attachment 7) … The plan will be maintained by the PREA compliance manager/specialist: In the shift commander's office for prisons… with the emergency management plan for work release and field offices.

The CCS reported BRWT has a coordinated response plan located in the PREA response kit. It's located in the control station. It lays out the instructions for staff to follow. All staff are trained to be first responders (Detection, notification, isolate and detain).

The audit team reviewed the PREA Response plan. The plan contains 4 sections. Response to Aggravated Sexual Assault Allegations, Response to all other Sexual Misconduct Allegations, Checklists and Forms for use in all sexual Misconduct Allegations and Policies/Operational Memorandums.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.266 Preservation of ability to protect residents from contact with abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)

b. Collective Bargaining Agreement (2021-2023) WADOC

Interview(s)

a. Agency Head

Findings (By Provision)

115.266 (a)

PAQ noted a Collective Bargaining Agreement (2021-2023) WADOC corresponding to this provision.

The Agency head reported all collective bargaining agreements (CBA) contain language allowing the removal of alleged staff from contact with alleged inmate victim pending investigation or determination of discipline warranted. The CBAs do not preclude our PREA investigative process, even if the staff member resigns, we’ll continue the investigation to its conclusion.

The PREA audit team reviewed CBA language and noted that it does not contain language limiting the agency’s ability to remove an alleged staff sexual abuser from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

A final analysis of the evidence indicates the facility is compliant with this provision.
Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)

b. 490.860 Prison Rape Elimination Act (PREA) Investigation

c. DOC 03-503 PREA Monitoring Retaliation Report

Interview(s)

a. Agency Head

b. Community Corrections Supervisor (CCS)

c. Retaliation Monitoring staff

Findings (By Provision)

115.267 (a)

PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state retaliation against anyone for reporting sexual misconduct or participating in an investigation of such misconduct is prohibited and may result in disciplinary actions.

The audit team noted that the CCS was also the retaliation monitor for BWRT.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.267 (b)

PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the appointing authority of the facility where the alleged victim is housed will notify the following employees, as applicable, when monitoring is required, but will not provide specific details regarding the allegation and investigation... PREA Compliance Manager/Specialist at the facility where the report was made will ensure alleged victims and offender reporters are monitored and met with at least monthly... The local Human Resource Manager/Community Corrections supervisor (CCS) will monitor employee reporters... The PERA Compliance manager/Specialist at the facility where the report was made will monitor contract staff and volunteer reporters.

The Agency head reported WADOC conducts retaliation monitoring - the CCO meets with the resident monthly to discuss retaliation and if their mental health needs are being met. Retaliation is not tolerated.

The CCS reported BWRT has two floors or living space, we can separate inmates between floors, facilitate a transfer out if necessary to another facility. The person alleging retaliation have the option of receiving emotional support services. They can report their level of safety when meeting with their retaliation monitor.
The audit team noted that the CCS was also the retaliation monitor for BWRT.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.267 (c)

PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state Retaliation monitoring will continue for 90 days following notification or longer if the appointing authority determines it is necessary.

The CCS reported in regards to the monitoring plan, staff will pay special attention to anyone at high risk. We check for signs/symptom of exploitation of someone reporting a sexual abuse or sexual harassment. We try to take a wraparound approach to monitoring. We look for any changes in appearance or behavior. It requires a higher level of scrutiny. We'll forward any concerns to our approving authority to assign for investigation.

The audit team noted that the CCS was also the retaliation monitor for BWRT. In the past 12 months BWRT has not had an incident requiring monitoring for staff or inmate.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.267 (d)

The audit team reviewed DOC 03 503 DOC 03-503 PREA Monitoring Retaliation Report and noted each month is represented on its own line, indicating a show of timeliness as well as documentation of when the meeting occurred.

The CCS reported she would check in with them for any reports of threats or problems. Substantiated reports are maintained at HQ level where they are also tracked by HQ. Retaliation monitoring would be on my radar for any investigation. Currently we don’t have that level of monitoring. I have not had to do that.

The audit team noted that the CCS was also the retaliation monitor for BWRT. In the past 12 months BWRT has not had an incident requiring monitoring for staff or inmate.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.267 (e)

PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state any report of retaliation expressed or indicated during the monitoring period will immediately reported to the appointing authority, who will take appropriate action.

The Agency head reported the CCO meets with the resident monthly to discuss retaliation and if their mental health needs
are being met. Retaliation is not tolerated.

The CCS reported, BWRT has two floors or living space, we can separate inmates between floors, facilitate a transfer out if necessary to another facility. The person alleging retaliation have the option of receiving emotional support services. They can report their level of safety when meeting with their retaliation monitor. For our monitoring plan, we pay special attention to anyone at high risk. We check for signs/symptom of exploitation of someone reporting a sexual abuse or sexual harassment. We try to take a wraparound approach to monitoring. We look for any changes in appearance or behavior. It requires a higher level of scrutiny. We’ll forward any concerns to our approving authority to assign for investigation.

The audit team noted that the CCS was also the retaliation monitor for BWRT. In the past 12 months BWRT has not had an incident requiring monitoring for staff or inmate.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.267 (f)

Auditor is not required to audit this provision.
Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)
b. 400.360 Polygraph Testing of Offenders
c. 420.375 Contraband and Evidence Handling
d. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
e. 490.860 Prison Rape Elimination Act (PREA) Investigation
f. Investigator transcript samples of completed Investigator training
g. Investigator Training Guide
h. MOU with WA State Patrol
i. PREA for Appointing Authorities
j. Local PREA Investigation Review Checklist
k. WADOC Records Retention Schedule Version 1.5 (April 2018)

Interview(s)

a. Investigative staff
b. Community Corrections Supervisor (CCS)
c. PREA Coordinator

Findings (By Provision)

115.271 (a)

PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the department will thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving individuals under the jurisdiction or authority of the department.

PAQ noted the following information corresponding to this provision. The last PREA investigation at BWRT was conducted in 2019, three years prior to the current PREA audit on-site review (05/10/22-5/11/22).

The investigative staff reported, following an allegation of sexual abuse or sexual harassment and once the electronic reporting is done, then it’s triaged by headquarters (PREA coordinator). All allegations go through the same process, it would be conducted promptly, thoroughly, and objectively to include a third-party or an anonymous report.

The auditor reviewed the investigation file from 2019 and noted it was conducted promptly, thoroughly, and objectively. The allegation was initially reported to staff and within 24 hours an investigator and a retaliation monitor was assigned. The investigation concluded within 38 days.
A final analysis of the evidence indicates the facility is compliant with this provision.

115.271 (b)

PAQ indicated two policies corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state PREA investigators will be trained in: Crime scene management/investigation, including evidence collection in Prisons and Work/Training Releases… Confidentiality of all investigation information… Miranda and Garrity warnings, compelled interviews, and the law enforcement referral process… Crisis intervention… Investigating sexual misconduct… Techniques for interviewing sexual misconduct victims… and Criteria and evidence required to substantiate administrative action or prosecution referral.

Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state investigators will be assigned by the Appointing Authority/designee and must be trained per DOC 490. 800 Prison Rape Elimination Act (PREA) Prevention and Reporting. Investigators will; Interview alleged victims, accused individuals/staff, and witnesses. Persons interviewed will be asked tossing DOC 03-484 Interview Acknowledgment… Refer the individual for mental health assessment using DOC 13-509 PREA Mental Health Notification if the investigation uncovers new information that the individual was the victim of any physical and/or emotional trauma of a sexual nature, whether in an institutional setting or in the community… Collect any additional evidence per 420.375 Contraband and Evidence Handling, DOC 420.365 Evidence Management for Work/Training Release, or 420.395 Evidence/Property Procedures for Field.

The Investigative staff reported, the original investigator training for the agency lasted 4 days. The training covered policy, WA Administration Code, revised codes of WA, legal aspects of investigations, staff scenarios, debriefing, conducting mock interviews, how to develop a list of questions as an investigator, gathering evidence, interviewing techniques, documentation requirements, recording interviews, Garrity Rights specifically how they get waived, reviewing the investigation report, confidentiality and what forms to use.

The auditor reviewed the WADOC Investigator Training Guide and noted it was in compliance with the PREA standards. The investigator’s completion certificate from Investigator training was crossed referenced with the agency’s trained investigator list.

A final analysis of the evidence indicates the facility is compliant with this provision

115.271 (c)

PAQ indicated one policy corresponding to this provision. Policy 420.375 Contraband and Evidence Handling state the shift commander/investigator will ensure evidence collected is handled using standard precautions. Employees/contract staff must wear gloves whenever handling evidence.

Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state Collect any additional evidence per DOC 420.375 Contraband and Evidence Handling, DOC 420.365 Evidence Management for Work/Training Release, or DOC 420.395 Evidence/Property Procedures for Field.

PAQ noted the following information corresponding to this provision. The last PREA investigation at BWRT was conducted in 2019, three years prior to the current PREA audit on-site review (05/10/22-5/11/22).

The Investigative staff reported, following an allegation of sexual abuse or sexual harassment and once the electronic reporting is done, then it’s triaged by headquarters (PREA coordinator). All allegations go through the same process, it would be conducted promptly, thoroughly, and objectively to include a third-party or an anonymous report. An investigator would
receive an email from appointing authority. PREA will triage if it reaches the level of investigation. Assigned investigator will receive a formal letter with instructions (basic information from the report). The time frame depends on scope of investigation, usually 30 - 60 days. The investigator will identify individuals to interview, collect evidence, review any electronic monitoring systems and records. During the interview process ensure the appropriate rights (Garrity or Miranda) are given to persons being interviewed. Any statements attained will be typed. Allow the person the opportunity to review their statements and allow corrections to be made, then both sign off on the statement form. Collect the summary of facts, determine if they are valid or invalid and then send the investigation report to the administrator for review.

The auditor reviewed the investigation file from 2019 and noted interviews of the alleged victim, suspected perpetrator and witnesses were conducted in a timely manner. Auditor also noted a review was conducted for prior complaints and reports of sexual abuse involving the suspected perpetrator.

A final analysis of the evidence indicates the facility is compliant with this provision

115.271 (d)

PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state all allegations that appear to be criminal in nature will be referred to law enforcement for investigation by the appointing authority/designee… When a substantiated allegation is criminal in nature, the appoint authority/designee will notify law enforcement

PAQ noted the following information corresponding to this provision. The last PREA investigation at BWRT was conducted in 2019, three years prior to the current PREA audit on-site review (05/10/22-5/11/22).

The Investigative staff reported, the investigation would be paused at that point and they would notify the administrator as well as PREA headquarters. Wait for their review and any law enforcement referrals as they have the first right of refusal. Upon notification from headquarters to resume, the investigation will continue. WADOC conducts administrative investigations only, not criminal investigations. Law enforcement will determine whether to move forward with a prosecutor, That is not within our scope as WADOC investigators.

The auditor reviewed the investigation file from 2019 and noted there were no indicators of anything criminal in nature during the investigation process.

A final analysis of the evidence indicates the facility is compliant with this provision

115.271 (e)

PAQ identified one policy corresponding to this provision. Policy 400.360 Polygraph testing of Offenders prohibit asking or requiring offenders who are alleged victims, reporters, or witnesses in Prison Rape Elimination Act (PREA) investigations to submit to a polygraph examination regarding the alleged misconduct under investigation.

PAQ noted the following information corresponding to this provision. The last PREA investigation at BWRT was conducted in 2019, three years prior to the current PREA audit on-site review (05/10/22-5/11/22).

The Investigative staff reported, the credibility of an alleged victim, suspect or witness is based on the facts supporting their
The information and evidence collected will determine the validity of their statements. Also, there is no requirement for an inmate to submit to a polygraph exam to proceed with an investigation of a sexual abuse.

A final analysis of the evidence indicates the facility is compliant with this provision

115.271 (f)

PAQ noted the following information corresponding to this provision. The last PREA investigation at BWRT was conducted in 2019, three years prior to the current PREA audit on-site review (05/10/22-5/11/22).

The Investigate staff reported, a thorough investigation looks at what may have led to the incident. The findings are included in the investigation report so the agency can make their determinations. It may lead to a change in policy and procedures. All investigations are documented in reports with a description of all evidence and justifications of assessments based on facts.

The auditor reviewed the investigation file from 2019 and noted sections for the investigator to document whether staff actions or failures to act contributed to the abuse, an evidence log which includes descriptions of the evidence, a section to summarize testimonial evidence a findings section where the appointing authority assesses credibility and documents their findings

A final analysis of the evidence indicates the facility is compliant with this provision

115.271 (g)

PAQ noted MOU with WA State Patrol for criminal investigations. Criminal investigations will be conducted by the local law enforcement agency, Spokane Police Department. If for any reason the SPD cannot take the criminal investigation the WA State Patrol will investigate.

PAQ noted the following information corresponding to this provision. The last PREA investigation at BWRT was conducted in 2019, three years prior to the current PREA audit on-site review (05/10/22-5/11/22).

The Investigative staff reported, criminal investigations are conducted by law enforcement. As a WADOC investigator who is only authorized to conduct administrative investigations would not have access to their investigation. The decision to refer to law enforcement is at the PREA headquarters level.

The auditor reviewed the investigation file from 2019 and noted it was not a criminal investigation.

A final analysis of the evidence indicates the facility is compliant with this provision

115.271 (h)

PAQ noted the following information corresponding to this provision. BWRT had zero substantiated allegations of conduct
that appear to be criminal that were referred for prosecution since the last PREA audit.

The Investigative staff reported, WADOC investigators do not have the authority to refer a case for prosecution. Referrals for prosecution is for the law enforcement agency to decide. WADOC conducts administrative investigations only.

A final analysis of the evidence indicates the facility is compliant with this provision

115.271 (i)
PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the PREA coordinator/designee will maintain electronic PREA case records per the Records Retention Schedule.

PAQ noted WADOC Records Retention Schedule indicates that Investigations – Prison Rape Elimination Act (PREA) – Records relating to prison rape investigations as designated by 27CFR Parts 115.71 and 115.271 involving but not limited to offenders and staff. Includes, but is not limited to: Incident and investigation reports... Copies of evidence cards... Photographs... Interview acknowledgment forms. RETAIN for 50 years after close of investigation then DESTROY.

PAQ noted the following information corresponding to this provision. The last PREA investigation at BWRT was conducted in 2019, three years prior to the current PREA audit on-site review (05/10/22-5/11/22). The auditor reviewed the investigation file from 2019 as it was the most recent and only investigation for BWRT in the past three years.

A final analysis of the evidence indicates the facility is compliant with this provision

115.271 (j)
PAQ indicated one policy corresponding to this provision. Policy 490.860 also states Investigations will be completed even if the individual is no longer under department jurisdiction or authority and/or the accused staff, if any, is no longer employed by or providing services to the department.

The Investigative staff reported, they would continue with the investigation regardless of whether the staff member quits. They can request that the former staff member cooperates with the investigation however, they can use the information collected to complete the investigation process.

A final analysis of the evidence indicates the facility is compliant with this provision

115.271 (k)
Auditor is not required to audit this provision

115.271 (l)
PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation
state all allegations that appear to be criminal in nature will be referred to law enforcement for investigation by the Appointing authority/designee. Referrals may be made using DOC 03-505 Law Enforcement Referral of PREA allegation…
Investigation reports received from law enforcement will be an attachment to the final PREA investigation report submitted…
When a substantiated allegation is criminal in nature, the Appointing authority/designee will notify; Law enforcement, unless such referral was made previously during the cause of the investigation, and relevant licensing bodies.

The CCS reported the outside agency would most likely be the Spokane Police Department. All investigations are a need to know basis and confidential in nature. If an employee is the alleged perpetrator, they would no longer be at this facility, they would be placed on temporary administrative leave or reassigned to another post until the conclusion of the investigation.

The PREA coordinator reported each facility has a designated liaison with their local law enforcement agency. WADOC promotes open communication with the facility and their LE agency. Each facility has its own designated LE agency based on their location. For Brownstone its Spokane Police Department.

The Investigative staff reported their role in this circumstance is to support the CCS and ensure investigation protocols are followed and our LE partners have access to what they need for their investigation (e.g. access to facility and occupants).

A final analysis of the evidence indicates the facility is compliant with this provision
115.272 Evidentiary standard for administrative investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)

b. 490.860 Prison Rape Elimination Act (PREA) Investigation

c. PREA for Appointing Authorities – Determination of Findings

d. RCW 72.09.225 Sexual misconduct by state employees, contractors

Interview(s)

a. Investigative staff

Findings (By Provision)

115.272 (a)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state for each allegation in the report, the Appointing authority will determine whether the allegation is: Substantiated… Unsubstantiated… or Unfounded.

PAQ provided an excerpt of PREA for Appointing Authorities – 4.13 Determination of Findings. No standard higher than preponderance of the evidence is to be used in determining whether allegations are substantiated.

The Investigative staff reported the standard of evidence required to substantiate allegations of sexual abuse or sexual harassment was preponderance of the evidence.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.273 Reporting to residents

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)
b. 490.860 Prison Rape Elimination Act (PREA) Investigation
c. OM BSWTR 490.860 Prison Rape Elimination Act (PREA) Investigation
d. Sample HQ Notification log of closed investigations and notification dates to the alleged victims

d. Sample DOC 02-400 Notice of PREA Investigation Findings

Interview(s)

a. Community Corrections Supervisor (CCS)
b. Investigative Staff

Findings (By Provision)

115.273 (a)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state once the appointing authority has made a determination, the alleged victim will be notified of the findings. The appointing authority/designee of the facility where the individual is housed will inform the individual of the findings in person, in a confidential manner. Notification may be provided in writing if the individual is in restrictive housing. If the individual has been released, the appointing authority will inform the individual of the findings in writing to the last known address as documented in the electronic file.

The CCS and the investigative staff reported once a sexual abuse investigation is completed, the victim will be notified in writing of the determination. The letter will come from the Appointing Authority as to whether the allegation was substantiated, unsubstantiated, or unfounded.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period, however the audit team were able to review a sample of the tracking log identifying closed PREA investigations. The dates of notification to the alleged victims and the results of the investigation.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.273 (b)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state all allegations that appear to be criminal in nature will be referred to law enforcement for investigation by the appointing authority/designee. Referrals may be made using DOC .3-505 Law Enforcement Referral of PREA Allegations. Investigation reports received from law enforcement will be an attachment to the final PREA investigation report submitted.
The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.273 (c)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state substantiated/unsubstantiated allegations of staff sexual misconduct against employees: the alleged victim will be notified: When the accused employee is no longer regularly assigned to the individuals housing unit… when the accused employee no longer works at the facility and… If the department learns that the accused employee has been indicted on or convicted of any charge rated to staff sexual misconduct within the facility… the appoint authority/designee will track all cases, make required notifications and forward copies to the PREA coordinator… Notifications will be provided to the alleged victims in a confidential manner through legal mail or by another method determined by the appointing authority.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period, however the audit team were able to review a sample of the tracking log identifying closed PREA investigations. The dates of notification to the alleged victims and the results of the investigation.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.273 (d)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the department will make the following notifications, in writing, to alleged victims until they are no longer under department jurisdiction… Individual on individual allegations of sexual assault or abuse: … the alleged victim will be notified if the department learns the accused has been indicted on or convicted of a charge related to sexual assault or abuse within the facility…

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period, however the audit team were able to review a sample of the tracking log identifying closed PREA investigations. The dates of notification to the alleged victims and the results of the investigation.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.273 (e)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the PREA coordinator/designee will track all cases and make required notifications.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period, however the audit team were able to review a sample of the tracking log identifying closed PREA investigations. The dates of notification to the alleged victims and the results of the investigation.
A final analysis of the evidence indicates the facility is compliant with this provision.

115.273 (f)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the department will make the following notifications in writing to the alleged victims until they are no longer under department jurisdiction.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period, however the audit team were able to review a sample of the tracking log identifying closed PREA investigations. The dates of notification to the alleged victims and the results of the investigation.

A final analysis of the evidence indicates the facility is compliant with this provision.
Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

Auditor Discussion
Documents

a. Pre-Audit Questionnaire (PAQ)
b. 450.050 Prohibited Contact
c. 490.860 Prison Rape Elimination Act (PREA) Investigation
d. RCW 72-09-225 Sexual Misconduct by State Employee, Contractors

Interview(s)

a. Community Corrections Supervisor (CCS)

Findings (By Provision)

115.277 (a)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state any contractor or volunteer who engages in sexual abuse is prohibited from contact with residents and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

RCW 72-09-225 Sexual Misconduct by State Employee, Contractors state when the secretary has reasonable cause to believe that sexual intercourse or sexual contact between the employee of a contractor and an inmate has occurred, the secretary shall require the employee of a contractor to be immediately removed from any employment position which would permit the employee to have any access to any inmate.

The PREA audit team noted in the past 12 months there were no BWRT contractors or volunteers reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates also there were zero in the past 12 months, of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.277 (b)

PAQ identified one policy corresponding to this provision. Policy 450.050 Prohibited Contact state presumptive restrictions for contact between an individual found to have engaged in staff sexual misconduct and any offender will result in permanent restriction on visitation (maybe appealed after 3 years) or an 18-month restriction on telephone and mail communication including eMessaging. All other substantiated allegations of staff sexual misconduct will result in a one-year restriction on telephone and mail communication including eMessaging, and a 2-year restriction on visitation.

The CSS reported before a contractor or volunteer is hired, a background check is conducted and disclosure forms to report any sexual abuse or sexual harassment history. This is their opportunity to report. If there is a previous history of sexual abuse that contractor/volunteer will not to be allowed on facility grounds. If they’ve already been hired and we find out about it, they will not be allowed to work with offenders. Termination is possible. Remedial measures will be determined by human resources.

A final analysis of the evidence indicates the facility is compliant with this provision.
Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents
a. Pre-Audit Questionnaire (PAQ)
b. 450.050 Prohibited Contact
c. 490.860 Prison Rape Elimination Act (PREA) Investigation
d. RCW 72-09-225 Sexual Misconduct by State Employee, Contractors

Interview(s)
a. Community Corrections Supervisor (CCS)

Findings (By Provision)

115.277 (a)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state any contractor or volunteer who engages in sexual abuse is prohibited from contact with residents and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

The PREA audit team noted in the past 12 months there were no BWRT contractors or volunteers reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates also there were zero in the past 12 months, of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates.

A final analysis of the evidence indicates the facility is compliant with this provision

115.277 (b)

PAQ identified one policy corresponding to this provision. Policy 450.050 Prohibited Contact state presumptive restrictions for contact between an individual found to have engaged in staff sexual misconduct and any offender will result in permanent restriction on visitation (maybe appealed after 3 years) or an 18-month restriction on telephone and mail communication including eMessaging. All other substantiated allegations of staff sexual misconduct will result in a one-year restriction on telephone and mail communication including eMessaging, and a 2-year restriction on visitation.

The CSS reported before a contractor or volunteer is hired, a background check is conducted and disclosure forms to report any sexual abuse or sexual harassment history. This is their opportunity to report. If there is a previous history of sexual abuse that contractor/volunteer will not to be allowed on facility grounds. If they've already been hired and we find out about it, they will not be allowed to work with offenders. Termination is possible. Remedial measures will be determined by human resources.

A final analysis of the evidence indicates the facility is compliant with this provision
Disciplinary sanctions for residents

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)

b. 460.135 Disciplinary Procedures for Work Release

c. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting

d. 490.860 Prison Rape Elimination Act (PREA) Investigation

e. WAC 137-28

f. WAC 137-25-020 Definitions

g. WAC 137-28-310 Decision of Hearing Officer

h. WAC 137-28-360 Sanctions and Mental Status

Interview(s)

a. Community Corrections Supervisor (CCS)

Findings (By Provision)

115.278 (a)

PAQ identified two policies corresponding to this provision. Policy 460.050 Disciplinary Sanctions state the disciplinary hearing officer will determine the appropriate sanction(s) when an offender is found guilty of a violation... For substantiated PREA allegations against an offender, an infraction report must be written against the accused per DOC 490.860 Prison Rape Elimination Act (PREA) Investigation.

Policy 460-135 Disciplinary Procedures for Work Release the process for disciplinary action for resident found to have engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for resident-on-resident sexual abuse.

The PREA audit team noted zero administrative findings of inmate on inmate sexual abuse at BWRT in the past 12 months and zero criminal findings of guilt for inmate on inmate sexual abuse at BWRT in the past 12 months.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.278 (b)

PAQ identified two policies corresponding to this provision. Policy 460.050 Disciplinary Sanctions state the offender’s disciplinary record, prior conduct, mental status, overall facility adjustment, and employee/contract staff recommendations may be considered.

Policy 460.135 Disciplinary Procedures for Work Release state The Hearing Officer will conduct the Work Release major infraction hearing, assess the evidence, and render decisions in a fair and impartial manner in accordance with statute, case law, Washington Administrative Code, and Department policy.
The CCS reported the sanctions would be based on behavior, their disciplinary histories, and the sanction will have to be similar to other inmates with similar histories. Disciplinary sanctions would be progressive.

The PREA audit team noted zero administrative findings of inmate on inmate sexual abuse at BWRT in the past 12 months and zero criminal findings of guilt for inmate on inmate sexual abuse at BWRT in the past 12 months.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.278 (c)

PAQ noted the following information corresponding to this provision. WAC 137-28-360 Sanctions and Mental Status state in determining an appropriate sanction, the hearing officer should consider the offender's mental health and his/her intellectual, emotional, and maturity levels and what effect a particular sanction might have on the offender in light of such factors. The hearing officer may request the assistance of other department staff members, including mental health staff members, in determining appropriate sanctions.

The CCS reported disciplinary sanctions would be progressive and mental health status will be considered.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.278 (d)

PAQ identified one policy corresponding to this provision. DOC 460.135 Disciplinary Procedures for Work Release states an offender who is found guilty of a 611, 613, 635, or 637 violation may be sanctioned to a multidisciplinary FRMT review for consideration of available interventions (e.g., Mental Health therapy, Sex Offender Treatment Program, Anger Management).

A final analysis of the evidence indicates the facility is compliant with this provision.

115.278 (e)

PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state that a resident may not be disciplined for sexual contact with a staff member unless it is found that the staff member did not consent to such contact.

The PREA audit team noted there were no allegations in the past 12 months of sexual contact between an offender and a staff member.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.278 (f)

PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation section state that a resident who reports sexual abuse in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

The PREA audit team noted there were no allegations in the past 12 months of sexual contact between an offender and a staff member or offender and another offender.

A final analysis of the evidence indicates the facility is compliant with this provision

115.278 (g)

PAQ indicated one policy corresponding to this provision. Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (Definitions) states consensual, non-coerced sexual activity between individuals under the department’s jurisdiction is prohibited by department rule, but is not defined as a violation of PREA policies.

A final analysis of the evidence indicates the facility is compliant with this provision
**Access to emergency medical and mental health services**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

**Documents**

a. Pre-Audit Questionnaire (PAQ)

b. 490.850 Prison Rape Elimination Act (PREA) Response

c. 610.300 Health Services for Work Release Offenders

d. Aggravated Sexual Assault Checklist (Attachment 1)

e. Aggravated Sexual Assault Medical Follow-Up Checklist (Attachment 2)

**Interview(s)**

a. CSS

b. First Responders

**Findings (By Provision)**

**115.282 (a)**

PAQ identified two policies corresponding to this provision. 490.850 Prison Rape Elimination Act (PREA) Response Aggravated Sexual Assault Checklist (Attachment 1) state 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.

Policy 610.300 Health Services for Work Release Offenders state offenders who are on Work Release status will have unimpeded access to health care.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period or to the last audit period.

A final analysis of the evidence indicates the facility is compliant with this provision.

**115.282 (b)**

PAQ identified two policies corresponding to this provision. Policy 490.850 Prison Rape Elimination Act (PREA) Response state victims in all cases of reported sexual misconduct, regardless of who the misconduct is reported to, will receive immediate medical and mental health services per DOC 610.025 Health Services Management of Offender in Cases of Alleged Sexual Misconduct.

Policy 490.850 Prison Rape Elimination Act (PREA) Response Aggravated Sexual Assault Checklist (Attachment 1) state the steps to protect the victim and to notify and provide medical and mental health services.
First responders reported they would immediately notify the statewide duty officer or the director. All were able to articulate how they would respond to an allegation of sexual abuse. Separate the victim and abuser, preserve and protect evidence/crime scene and request the victim and abuser not destroy physical evidence.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period or to the last audit period.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.282 (c)
PAQ indicated one policy corresponding to this provision. Policy 490.850 Prison Rape Elimination Act (PREA) Response Aggravated Sexual Assault Medical Follow-up Checklist (Attachment 2) state sex acts that occurred within the previous 120 hours and involve penetration or exchange of body fluids… With informed patient consent, initiate medical testing as needed per established post exposure prophylaxis, communicable disease, infection prevention, and blood borne pathogens protocols and policies… Prison and Work Releases will maintain PREA response kits for responding to allegations of aggravated sexual assault… The PREA compliance manager/designee will immediately replace any used items and inspect the kits regularly. Work Releases will develop local procedures to ensure alleged victims of aggravated asexual assault are provided with emergency medical care to include forensic medical examinations as applicable.

BWRT does not employ medical or mental health staff. Inmates have access to medical and mental health services in the community.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.282 (d)
PAQ indicated one policy corresponding to this provision. Policy 490.850 Prison Rape Elimination Act (PREA) Response state all medical and mental health services for victims of sexual misconduct be provided at no cost to the offender.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period or to the last audit period.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.283 Ongoing medical and mental health care for sexual abuse victims and abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)
b. 490.850 Prison Rape Elimination Act (PREA) Response
c. 610.300 Health Services for Work Release Offenders
d. 630.500 Mental Health Services
e. BSWRT Facility Profile
f. WADOC Health Services Offender Health Plan manual
g. WADOC public website https://doc.wa.gov/corrections/incarceration/prisons/wcc.htm

Findings (By Provision)

115.283 (a)

PAQ identified three policies corresponding to this provision. Policy 610.300 Health Services for Work Release Offenders state offenders who are on Work Release status will have unimpeded access to health care...

Policy 630.500 Mental Health Services state a mental health provider will assess the need for mental health services in cases where the offender reports sexual abuse or has been identified as a victim or perpetrator of sexual abuse and is requesting mental health services.

Policy 490.850 Prison Rape Elimination Act (PREA) Response state medical and mental health services for all other offenders will be coordinated by the Work Release Administrator or applicable Field Administrator or their designees.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period or to the last audit period.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.283 (b-c)

PAQ identified two policies corresponding to this provision. Policy 630.500 Mental Health Services state 6 months prior to the offender’s Earned Release Date (ERD), the mental health employee/contract staff designated to facilitate care coordination will review seriously mentally ill offenders, along with supporting information, to determine which offenders will need community mental health aftercare... 3 months prior to ERD, the mental health employee/contract staff designated to facilitate care coordination, in collaboration with the supervising psychologist, will identify offender that may be eligible for Department of Social and Health Services (DSHS) disability-based benefits.

Policy 610.300 Health Services for Work Release Offenders state facilities will ensure that all offenders who report being a victim of sexual misconduct have access to local community providers for medical treatment and mental health evaluation as
appropriate.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period or to the last audit period. There were no applicable referrals for community health care resources due to allegations of sexual misconduct.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.283 (d-e)
PAQ identified two policies corresponding to this provision. Policy 640.300 Health Services for Work Release Offenders state female offenders housed in a Work Release will have access to pregnancy management services… If the pregnancy is the result of sexual misconduct which took place while incarcerated, the offender will receive timely and comprehensive information and treatment related to lawful pregnancy-related services.

BWRT does not house female offenders as confirmed by the WADOC public website and from the audit team’s observation of the population during the onsite.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.283 (f)
PAQ identified one policy corresponding to this provision. Policy 610.300 Health Services for Work Release Offenders state offenders who are victims of sexual misconduct which took place while incarcerated will receive information and access to services and treatment for sexually transmitted infections (STIs) and emergency contraception as medical appropriate.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period or to the last audit period. There were no applicable referrals for community health care resources due to allegations of sexual misconduct.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.283 (g)
PAQ identified one policy corresponding to this provision. Policy 610.300 Health Services for Work Release Offenders state in the case of sexual misconduct, the Appointing Authority will authorize payment and coverage of medically necessary treatment and any identified mental health treatment… A victim of sexual misconduct will not have debt added to his/her account for any medical or mental health treatment received as a result of reported sexual misconduct, whether or not s/he names the abuser or cooperates with any related investigation.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period or to the last audit period. There were no applicable referrals for community health care resources due to allegations of sexual misconduct.
A final analysis of the evidence indicates the facility is compliant with this provision.

115.283 (h)

PAQ identified one policy corresponding to this provision. Policy 610.300 Health Services for Work Release Offenders state

For offenders identified as the perpetrator in a substantiated allegation of sexual misconduct, employees/contract staff will submit a referral for a community mental health evaluation… If the offender refuses to participate in the evaluation, s/he will be transferred to a Prison for evaluation and offered ongoing treatment and to assess risk.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period or to the last audit period. There were no applicable referrals for community health care resources due to allegations of sexual misconduct.

A final analysis of the evidence indicates the facility is compliant with this provision.
**115.286 Sexual abuse incident reviews**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

**Documents**

a. Pre-Audit Questionnaire (PAQ)

b. 490.860 Prison Rape Elimination Act (PREA) Investigation

c. WADOC 02-383 Local PREA Investigation Review Checklist

**Interview(s)**

Community Corrections Supervisor (CCS)

Incident Review Team

**Findings (By Provision)**

115.286 (a)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the Appointing Authority/designee will convene a local PREA Review Committee to examine all substantiated and unsubstantiated investigations of sexual assault/abuse and staff sexual misconduct... For prisons, if the superintendent of the facility where the allegation occurred, the superintendent/designee will be on the committee... The committee will meet every 30 days or as needed... The committee will include facility management, supervisors, investigators, and medical/mental health practitioners... Hearing Officers cannot serve as a PREA Review Committee member for any violations for which they conducted the hearing... The committee will review policy compliance, causal factors, and systemic issues using DOC 02-383 Local PREA Investigation Review Checklist.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period or to the last audit period. The last PREA investigation completed for BWRT was in 2019 and was determined an unsubstantiated sexual harassment allegation. Therefore, not requiring a Sexual Abuse Incident Review pursuant to PREA standard (115.285)

A final analysis of the evidence indicates the facility is compliant with this provision

115.286 (b)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the committee will meet every 30 days or as needed.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period or to the last audit period. The last PREA investigation completed for BWRT was in 2019 and was determined an unsubstantiated sexual harassment allegation. Therefore, not requiring a Sexual Abuse Incident Review pursuant to PREA standard (115.285)

A final analysis of the evidence indicates the facility is compliant with this provision
115.286 (c)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the committee will include facility management, supervisors, investigators, and medical/mental health practitioners.

The audit team reviewed form WADOC 02-383 Local PREA Investigation Review Checklist and noted the section for attendees listed management, supervisors, investigators, medical or mental health, and other.

The CCS reported BWRT does not have a SAIR committee. If there was a need for a SAIR, they would be scheduled to meet at the direction of the Work Release Administrator within 30 days of an investigation finding. The BWRT team would consist of the Work Release Administrator, the Work Release Oversight and Compliance Administrator and all Community Corrections Supervisors (CCS), one of which served as the investigator.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period or to the last audit period. The last PREA investigation completed for BWRT was in 2019 and was determined an unsubstantiated sexual harassment allegation. Therefore, not requiring a Sexual Abuse Incident Review pursuant to PREA standard (115.285)

A final analysis of the evidence indicates the facility is compliant with this provision

115.286 (d-e)

The PREA audit team reviewed the DOC 02-383 Local PREA Investigation Review Checklist and noted that the 6 elements required by this provision is listed on the checklist to include any recommendations for improvement and to submit the Action Plan to the PREA coordinator when tasks have been completed.

The CCS and the incident review team member both reported any corrective action plan will be developed by the team and any tasks identified will be accomplished to promote sexual safety at the facility.

The PREA coordinator reported the work release SAIR committee is unique as the committees are not facility specific. When a SAIR is required the Work Release Administrator will schedule and designate available participants from other sites.

The PREA audit team did not note any investigations for alleged inmate sexual abuse at BWRT during the 12-month review period or to the last audit period. The last PREA investigation completed for BWRT was in 2019 and was determined an unsubstantiated sexual harassment allegation. Therefore, not requiring a Sexual Abuse Incident Review pursuant to PREA standard (115.285)

A final analysis of the evidence indicates the facility is compliant with this provision.
115.287  Data collection

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)
b. 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
c. 490.860 Prison Rape Elimination Act (PREA) Investigation
d. WADOC website https://www.doc.wa.gov/corrections/prea/resources.htm
e. WADOC PREA Annual Report (2013 – 2021)
f. DOJ BJS Survey of Sexual Victimization 2018, 2019 and 2020

Findings (By Provision)

115.287 (a)

WCC PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state Investigators will submit the investigation report and DOC 02-382 PREA Data Collection Checklist to the appropriate authority/designee... Data will be collected by the PREA Coordinator/designee for each allegation of sexual misconduct... Data will be aggregated at least annually and include available information from investigation reports and incident review committees, as well as from each private facility contracted to confine or house individuals under the department’s jurisdiction The PREA Coordinator will generate an annual report of findings... The report will include: An analysis of PREA prevention and response for the Department and for each facility, including high-level summary information and detailed facility data analysis... Findings and corrective actions at facility and Department levels... an assessment of the Department’s progress in addressing sexual misconduct, including a comparison and stat and corrective actions from previous years... The report requires Secretary approval. Approved reports will be made available to the public through the Department’s website... Information may be redacted from the report when publication would present a clear and specific threat to facility security, but the report must indicate the nature of the material redacted... All data/reports will be provided on request to the U.S. Department of Justice.

Policy 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting state the following terms are associated with this policy: Sexual misconduct incudes aggravated sexual assault, individual on individual sexual assault, sexual abuse, and sexual harassment. It also includes staff on individual sexual harassment and staff sexual misconduct... these terms are further defined in Prison Rape Elimination Act (PREA) Definitions (Attachment 1).

WADOC utilizes a standardized instrument to track PREA allegations and maintains a case database within the Offender Management Network Information (OMNI). The OMNI system records case determinations/sanctions, demographic information of the accused, interviews of staff and inmates, location of incident, date/time of incident, type of allegation, who reported the allegation, date/time reported, who the allegation was reported to, incident description, investigation finding, demographic information of the victim, were there any referrals and case notes. The system is on a secured network and only specialized staff in specific roles have access to portions of OMNI.

The PREA audit team accessed the agency’s public website and reviewed agency PREA annual reports from 2013-2021. All included a uniform standard of measuring sexual abuse and sexual harassment incidents, as well as a standardized set of definitions. The auditor reviewed the Survey of Sexual Violence from three previous years submitted to the Department of Justice. All confinement facilities under the purview of the agency were outlined in the annual reports to include contract facilities.

A final analysis of the evidence indicates the facility is compliant with this provision.
Data review for corrective action

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. Pre-Audit Questionnaire (PAQ)

b. 490.860 Prison Rape Elimination Act (PREA) Investigation

c. WADOC public website https://doc.wa.gov/corrections/prea/default.htm

d. WADOC PREA Annual Reports (2013-2021)

Interview(s)

a. Agency Head

b. PREA Coordinator

c. PREA Compliance Manager (CCS)

Findings (By Provision)

115.288 (a)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the PREA Coordinator will generate an annual report of findings... The report will include: An analysis of PREA prevention and response for the Department and for each facility, including high-level summary information and detailed facility data analysis... Findings and corrective actions at facility and Department levels.

The Agency head reported there is an annual report process for the agency. They also have a local strategic planning process for each facility. The agency will look at trends and adjust planning accordingly. WADOC has a robust PREA program.

The PREA coordinator reported the agency reviews data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies. The information collected will also affect their training. WADOC has a PREA advisory council (PAC). They assist with the agency level assessment. Each facility PREA Compliance Manager assists as well and the information is combined into annual report. WADOC will monitor trends as they occur. It's a continuous cycle of triage for all allegation. All data reviewed to include investigative files retained at HQ are in a restricted area of servers. The data entered into the tracking is secured. This information will be part of our annual report. Published reports are redacted of personal identifiers and we're conscious of way we report data.

The PREA audit team reviewed WADOC most recently completed and posted annual report (i.e. 2021) and confirmed it includes the following components: zero tolerance statement; review of critical definitions; summary data; compliance efforts and corrective action steps; and a summary statement.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.288 (b)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state an assessment of the Department’s progress in addressing sexual misconduct, including a comparison with data and corrective actions from previous years.

The PREA audit team reviewed WADOC annual reports from 2013 -2021. All included comparative data, corrective action, and a discussion of progress.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.288 (c)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state the report requires Secretary approval. Approved reports will be made available to the public through the Department’s website.

The Agency head reported that he is the reviewer for the annual reports and the Secretary of the Department approves them.

The PREA audit team reviewed annual reports from 2013 – 2020 The Secretary of the Department has approved and signed the reports. The audit reports from 2013 – 2020 are accessible on the WADOC public website.

A final analysis of the evidence indicates the facility is compliant with this provision.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.288 (d)

PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state Information may be reacted from the report when publication would present a clear and specific threat to facility security, but the report must indicate the nature of the material redacted.

The PREA coordinator reported WADOC is very careful about what's in the annual report. It's reviewed all the way up the chain of command to ensure no one is identified. If there was a need to redact information we would redact and then summarize the reason for redaction.

The PREA audit team reviewed annual reports from 2013 – 2021. There was no data enclosed that required redaction.

A final analysis of the evidence indicates the facility is compliant with this provision.
Data storage, publication, and destruction

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents
a. Pre-Audit Questionnaire (PAQ)
b. 280.310 Information Technology Security
c. 280.515 Data Classification and Sharing
d. 490.860 Prison Rape Elimination Act (PREA) Investigation
e. List of Offender Management Network Information (OMNI) PREA Access / Security Group
f. WADOC Records Retention Schedule
g. WADOC public website https://www.doc.wa.gov/information/records/publications.htm

Interview(s)
a. PREA Coordinator

Findings (By Provision)

115.289 (a)

PAQ identified three policies corresponding to this provision. Policy 280.310 Information Technology Security state All users with access to confidential Department data must maintain the integrity of the data per DOC 280.515 Data Classification and Sharing.

Policy 280.515 Data Classification and Sharing state data will be classified into 4 categories per the Data Classification Standards and Office of the Chief Information Officer (OCIO) 141.10 Security Information Technology Assets... Category 4 Data: Confidential Information Requiring Special Handling – Data that is specifically protected from release by law and: Has especially strict handling requirements by statute, regulation, or agreement... May result in serious consequences arising from unauthorized release (e.g., legal sanction, endanger health/safety) ... Per the Federal Information Processing Standers 140-2 or higher: Category 3 and 4 must be encrypted when storing/transferring data... Portable storage devices must be hardware encrypted when transferring data.

Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state all PREA data containing personal identifying information will be maintained as Category 4 data per 280.515 Data Classification and Sharing.

WADOC utilizes a PREA database Incident Management Report System (IMRS) within the Offender Management Network Information (OMNI) system for reporting, investigating and maintaining information which relates to PREA. Access is restricted and limited to staff with a need to know. Access to the drive is limited to the agency PREA Unit that is responsible for managing all allegations and maintain related information.

The PREA coordinator reported the agency reviews data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies. The information collected will also affect their training. WADOC has a PREA advisory council (PAC). They assist with the agency level assessment. Each facility PREA Compliance Manager assists as well and the information is combined into annual report. WADOC will monitor trends as they occur. It's a continuous cycle of triage for all allegation. All data reviewed to include investigative files retained at HQ are in a restricted area of servers. The data entered into the tracking is secured. This information will be part of our annual report. Published reports are redacted of personal identifiers and we’re conscious of way we report data.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.289 (b)
PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state Data will be aggregated at least annually and include available information from investigation reports and incident review committees, as well as from each private facility contracted to confine or house individuals under the Department’s jurisdiction… The PREA Coordinator will generate an annual report of findings… The report requires Secretary approval. Approved reports will be made available to the public through the Department’s website.

The PREA audit team reviewed WADOC public website. The annual reports were listed by year (2013-2021) and provided aggregated sexual abuse data.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.289 (c)
PAQ identified one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state information may be redacted from the report when publication would present a clear and specific threat to facility security, but the report must indicate the nature of the material redacted.

The PREA audit team reviewed WADOC public website. The annual report for 2021 did not contain any personal identifying information.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.289 (d)
PAQ indicated one policy corresponding to this provision. Policy 490.860 Prison Rape Elimination Act (PREA) Investigation state

The PREA audit team reviewed the State Government General Records Retention Schedule (SGGRRS) Version 6.0 (June 2016) and noted that State Publications, regardless of format, published by the agency and intended for distribution to state government, the public or the legislature, includes but not limited to: Annual reports and other reports, manuals, brochures… Agencies are required to transfer copies to Washington State Library for permanent retention.

The PREA audit team also reviewed the Department of Corrections Records Retention Schedule Version 1.5 (April 2018) and noted investigations-Prison Rape Elimination Act (PREA)… Records relating to prison rape investigations. Retain for 50 years after close of investigation then destroy.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.401 Frequency and scope of audits

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. PREA audit notices (English and Spanish)

b. WADOC Public website https://www.doc.wa.gov/information/records/publications.htm

Interview(s)

a. PREA Coordinator

Findings (By Provision)

115.401 (a)

WADOC public website indicated that beginning in Audit Cycle II, and during each three-year period thereafter, the agency ensured each facility operated by the agency, or by a private organization on behalf of the agency, was and is audited at least once as verified by the WADOC Annual Report on the WADOC public website.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.401 (b)

BWRT PREA audit onsite portion was initially scheduled for 10/21/2020 – 10/22/2020 (Cycle 3-Year 2). On 05/12/2021 PREA audit team received notification of cancelled PREA audit due to COVID Pandemic. PREA audit for BWRT would not proceed until 05/10/2022 – 05/11/2022, Cycle 3-Year 3, when the state agency travel ban for WI PREA audit team was lifted and the WADOC facilities allowed non-essential personnel into the prisons. WADOC did not achieve the one third requirement in Cycle 3-Year. WADOC resolution is to schedule the delayed PREA audits from year 2 in year 3.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.401 (h)

The PREA audit team had unrestricted access to all areas of the facility. The team was accommodated and allowed to observe any area or operation within the facility.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.401 (i)

The PREA audit team had access to documents, records, files, photographs, etc. as requested. Facility staff took photographs of specific items and areas within the facility upon request of the audit team and then provided copies to the team for the auditor's use and reference in preparing the audit findings. The team unrestricted access to files, reports, and automated information systems at the agency and facility levels.
A final analysis of the evidence indicates the facility is compliant with this provision.

115.401 (m)

The PREA audit team, WADOC leadership and BWRT support staff worked cooperatively to develop a private process and location for conducting interviews of both staff and inmates. Due to the COVID pandemic precautions the interviews were conducted wearing face masks in an effort to control exposure between people. A total of 19 staff and 22 inmate interviews were completed.

A final analysis of the evidence indicates the facility is compliant with this provision.

115.401 (n)

The PREA audit team and the BWRT facility staff conducted monthly telephone calls and discussed the pending on-site reviews. On 03/31/2022, the auditor requested that CCS post the PREA audit notices (English and Spanish) on colored paper in all staff and inmate common areas six weeks prior to the on-site review date. Audit notices included a confidentiality statement indicating outgoing mail to the auditor would be treated as legal mail, and instructions to contact the auditor via mail, if desired. The BWRT CCS responded via email on 4/11/2022 confirming audit notices were posted. She included 21 sample photos of the postings, which showed English and Spanish notices displayed on yellow paper. The auditor received no letters from offenders.

A final analysis of the evidence indicates the facility is compliant with this provision.
115.403 Audit contents and findings

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents

a. WADOC Public website https://www.doc.wa.gov/corrections/prea/resources.htm#reports

Interviews

PREA Coordinator

Findings (by provision)

115.403 (f)

The agency's website has a link dedicated to PREA-related information, including policies and procedures; reporting an allegation; audit schedules; and final audit reports. An interview with the PREA Coordinator and internet search confirmed that final audit reports are posted to the agency's public website. This is BWRT third US DOJ PREA Audit. Final audit reports for all WADOC facilities are on the agency public website.

The PREA coordinator reported the public website contains WADOC annual reports and PREA audit reports for each of their facilities.

The PREA audit team noted all PREA audit reports for confinement facilities under the purview of WADOC are listed on their public website.

A final analysis of the evidence indicates the facility is compliant with this provision.
### Appendix: Provision Findings

#### 115.211 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td>Does the written policy outline the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
</tbody>
</table>

#### 115.211 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has the agency employed or designated an agency-wide PREA Coordinator?</td>
<td>yes</td>
</tr>
<tr>
<td>Is the PREA Coordinator position in the upper-level of the agency hierarchy?</td>
<td>yes</td>
</tr>
<tr>
<td>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 community confinement facilities?</td>
<td>yes</td>
</tr>
</tbody>
</table>

#### 115.212 (a) Contracting with other entities for the confinement of residents

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If this agency is public and it contracts for the confinement of its residents with private agencies or other entities, including other government agencies, has the agency included the entity’s obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)</td>
<td>yes</td>
</tr>
</tbody>
</table>

#### 115.212 (b) Contracting with other entities for the confinement of residents

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)</td>
<td>yes</td>
</tr>
</tbody>
</table>

#### 115.212 (c) Contracting with other entities for the confinement of residents

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If the agency has entered into a contract with an entity that fails to comply with the PREA standards, did the agency do so only in emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)</td>
<td>na</td>
</tr>
<tr>
<td>In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)</td>
<td>na</td>
</tr>
</tbody>
</table>

#### 115.213 (a) Supervision and monitoring

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes/No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect residents against sexual abuse?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The physical layout of each facility?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the resident population?</td>
<td>yes</td>
</tr>
<tr>
<td>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?</td>
<td>yes</td>
</tr>
<tr>
<td>In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?</td>
<td>yes</td>
</tr>
</tbody>
</table>
115.213 (b) **Supervision and monitoring**

In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (NA if no deviations from staffing plan.)

115.213 (c) **Supervision and monitoring**

In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section?

In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to prevailing staffing patterns?

In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the facility’s deployment of video monitoring systems and other monitoring technologies?

In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels?

115.215 (a) **Limits to cross-gender viewing and searches**

Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?

115.215 (b) **Limits to cross-gender viewing and searches**

Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (NA if the facility does not have female inmates.)

Does the facility always refrain from restricting female residents’ access to regularly available programming or other outside opportunities in order to comply with this provision? (NA if the facility does not have female inmates.)

115.215 (c) **Limits to cross-gender viewing and searches**

Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?

Does the facility document all cross-gender pat-down searches of female residents?

115.215 (d) **Limits to cross-gender viewing and searches**

Does the facility have policies that enable residents to shower, perform bodily functions, and change clothing without non-medical 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?

Does the facility have procedures that enable residents to shower, perform bodily functions, and change clothing without non-medical 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?

Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?
**115.215 (e) Limits to cross-gender viewing and searches**

Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident’s genital status?  
Yes

If the resident’s genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?  
Yes

**115.215 (f) Limits to cross-gender viewing and searches**

Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?  
Yes

Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?  
Yes
## 115.216 (a) Residents with disabilities and residents who are limited English proficient

Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing? 

Yes

Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are blind or have low vision? 

Yes

Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have intellectual disabilities? 

Yes

Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have psychiatric disabilities? 

Yes

Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have speech disabilities? 

Yes

Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.) 

Yes

Do such steps include, when necessary, ensuring effective communication with residents who are deaf or hard of hearing? 

Yes

Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? 

Yes

Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities? 

Yes

Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills? 

Yes

Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision? 

Yes

## 115.216 (b) Residents with disabilities and residents who are limited English proficient

Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient? 

Yes

Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? 

Yes
115.216 (c)  Residents with disabilities and residents who are limited English proficient

Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident’s safety, the performance of first-response duties under §115.264, or the investigation of the resident’s allegations?

Yes

115.217 (a)  Hiring and promotion decisions

Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?

Yes

Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?

Yes

Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above?

Yes

Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?

Yes

Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?

Yes

Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above?

Yes

115.217 (b)  Hiring and promotion decisions

Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with residents?

Yes

Does the agency consider any incidents of sexual harassment in determining to enlist the services of any contractor who may have contact with residents?

Yes

115.217 (c)  Hiring and promotion decisions

Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?

Yes

Before hiring new employees who may have contact with residents, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?

Yes

115.217 (d)  Hiring and promotion decisions

Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?

Yes

115.217 (e)  Hiring and promotion decisions

Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?

Yes
115.217 (f)  Hiring and promotion decisions

Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?

yes

Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?

yes

Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?

yes

115.217 (g)  Hiring and promotion decisions

Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?

yes

115.217 (h)  Hiring and promotion decisions

Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)

yes

115.218 (a)  Upgrades to facilities and technology

If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012 or since the last PREA audit, whichever is later.)

no

115.218 (b)  Upgrades to facilities and technology

If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)

yes

115.221 (a)  Evidence protocol and forensic medical examinations

If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal proceedings? (N/A if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)

yes

115.221 (b)  Evidence protocol and forensic medical examinations

Is this protocol developmentally appropriate for youth where applicable? (NA 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? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)

yes
<table>
<thead>
<tr>
<th>Section</th>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>115.221 (c)</td>
<td>Evidence protocol and forensic medical examinations&lt;br&gt;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 evidently or medically appropriate?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>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)?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Has the agency documented its efforts to provide SAFEs or SANEs?</td>
<td>yes</td>
</tr>
<tr>
<td>115.221 (d)</td>
<td>Evidence protocol and forensic medical examinations&lt;br&gt;Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>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?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Has the agency documented its efforts to secure services from rape crisis centers?</td>
<td>yes</td>
</tr>
<tr>
<td>115.221 (e)</td>
<td>Evidence protocol and forensic medical examinations&lt;br&gt;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?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?</td>
<td>yes</td>
</tr>
<tr>
<td>115.221 (f)</td>
<td>Evidence protocol and forensic medical examinations&lt;br&gt;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.)</td>
<td>yes</td>
</tr>
<tr>
<td>115.221 (h)</td>
<td>Evidence protocol and forensic medical examinations&lt;br&gt;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 attempts to make a victim advocate from a rape crisis center available to victims per 115.221(d) above).</td>
<td>yes</td>
</tr>
<tr>
<td>115.222 (a)</td>
<td>Policies to ensure referrals of allegations for investigations&lt;br&gt;Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?</td>
<td>yes</td>
</tr>
</tbody>
</table>
115.222 (b) **Policies to ensure referrals of allegations for investigations**

Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?  
Yes

Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  
Yes

Does the agency document all such referrals?  
Yes

115.222 (c) **Policies to ensure referrals of allegations for investigations**

If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for conducting criminal investigations. See 115.221(a).)  
Yes

115.231 (a) **Employee training**

Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?  
Yes

Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?  
Yes

Does the agency train all employees who may have contact with residents on: Residents’ right to be free from sexual abuse and sexual harassment?  
Yes

Does the agency train all employees who may have contact with residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?  
Yes

Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement?  
Yes

Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?  
Yes

Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse?  
Yes

Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?  
Yes

Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?  
Yes

Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?  
Yes

115.231 (b) **Employee training**

Is such training tailored to the gender of the residents at the employee’s facility?  
Yes

Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?  
Yes
<table>
<thead>
<tr>
<th>Regulatory Number</th>
<th>Section</th>
<th>Description</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>115.231 (c)</td>
<td>Employee training</td>
<td>Have all current employees who may have contact with residents received such training?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Employee training</td>
<td>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?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Employee training</td>
<td>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?</td>
<td>yes</td>
</tr>
<tr>
<td>115.231 (d)</td>
<td>Employee training</td>
<td>Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?</td>
<td>yes</td>
</tr>
<tr>
<td>115.232 (a)</td>
<td>Volunteer and contractor training</td>
<td>Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures?</td>
<td>yes</td>
</tr>
<tr>
<td>115.232 (b)</td>
<td>Volunteer and contractor training</td>
<td>Have all volunteers and contractors who have contact with residents been notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?</td>
<td>yes</td>
</tr>
<tr>
<td>115.232 (c)</td>
<td>Volunteer and contractor training</td>
<td>Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?</td>
<td>yes</td>
</tr>
<tr>
<td>115.233 (a)</td>
<td>Resident education</td>
<td>During intake, do residents receive information explaining: The agency’s zero-tolerance policy regarding sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Resident education</td>
<td>During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Resident education</td>
<td>During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Resident education</td>
<td>During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Resident education</td>
<td>During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?</td>
<td>yes</td>
</tr>
<tr>
<td>115.233 (b)</td>
<td>Resident education</td>
<td>Does the agency provide refresher information whenever a resident is transferred to a different facility?</td>
<td>yes</td>
</tr>
<tr>
<td>Regulation</td>
<td>Description</td>
<td>Yes/No</td>
<td></td>
</tr>
<tr>
<td>------------</td>
<td>-------------</td>
<td>--------</td>
<td></td>
</tr>
<tr>
<td>115.233 (c)</td>
<td><strong>Resident education</strong>&lt;br&gt;Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient?</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>115.233 (c)</td>
<td><strong>Resident education</strong>&lt;br&gt;Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf?</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>115.233 (c)</td>
<td><strong>Resident education</strong>&lt;br&gt;Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired?</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>115.233 (c)</td>
<td><strong>Resident education</strong>&lt;br&gt;Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled?</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>115.233 (c)</td>
<td><strong>Resident education</strong>&lt;br&gt;Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills?</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>115.233 (d)</td>
<td><strong>Resident education</strong>&lt;br&gt;Does the agency maintain documentation of resident participation in these education sessions?</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>115.233 (e)</td>
<td><strong>Resident education</strong>&lt;br&gt;In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>115.234 (a)</td>
<td><strong>Specialized training: Investigations</strong>&lt;br&gt;In addition to the general training provided to all employees pursuant to §115.231, 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 criminal or administrative sexual abuse investigations. See 115.221(a)).</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>115.234 (b)</td>
<td><strong>Specialized training: Investigations</strong>&lt;br&gt;Does this specialized training include: Techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>115.234 (b)</td>
<td><strong>Specialized training: Investigations</strong>&lt;br&gt;Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>115.234 (b)</td>
<td><strong>Specialized training: Investigations</strong>&lt;br&gt;Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>115.234 (b)</td>
<td><strong>Specialized training: Investigations</strong>&lt;br&gt;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 criminal or administrative sexual abuse investigations. See 115.221(a)).</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>115.234 (c)</td>
<td><strong>Specialized training: Investigations</strong>&lt;br&gt;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 criminal or administrative sexual abuse investigations. See 115.221(a).)</td>
<td>yes</td>
<td></td>
</tr>
</tbody>
</table>
115.235 (a) Specialized training: Medical and mental health care

Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)

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.)

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.)

115.235 (b) Specialized training: Medical and mental health care

If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.)

115.235 (c) Specialized training: Medical and mental health care

Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)

115.235 (d) Specialized training: Medical and mental health care

Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)

Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)

115.241 (a) Screening for risk of victimization and abusiveness

Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents? yes

Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents? yes

115.241 (b) Screening for risk of victimization and abusiveness

Do intake screenings ordinarily take place within 72 hours of arrival at the facility? yes

115.241 (c) Screening for risk of victimization and abusiveness

Are all PREA screening assessments conducted using an objective screening instrument? yes
115.241 (d)  
**Screening for risk of victimization and abusiveness**

Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability?  
Yes

Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident?  
Yes

Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident?  
Yes

Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated?  
Yes

Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident’s criminal history is exclusively nonviolent?  
Yes

Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has prior convictions for sex offenses against an adult or child?  
Yes

Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the resident about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener’s perception whether the resident is gender non-conforming or otherwise may be perceived to be LGBTI)?  
Yes

Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization?  
Yes

Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident’s own perception of vulnerability?  
Yes

115.241 (e)  
**Screening for risk of victimization and abusiveness**

In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?  
Yes

In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?  
Yes

In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?  
Yes

115.241 (f)  
**Screening for risk of victimization and abusiveness**

Within a set time period not more than 30 days from the resident’s arrival at the facility, does the facility reassess the resident’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?  
Yes

115.241 (g)  
**Screening for risk of victimization and abusiveness**

Does the facility reassess a resident’s risk level when warranted due to a: Referral?  
Yes

Does the facility reassess a resident’s risk level when warranted due to a: Request?  
Yes

Does the facility reassess a resident’s risk level when warranted due to a: Incident of sexual abuse?  
Yes

Does the facility reassess a resident’s risk level when warranted due to a: Receipt of additional information that bears on the resident’s risk of sexual victimization or abusiveness?  
Yes
Screening for risk of victimization and abusiveness

Is it the case that residents 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

Screening for risk of victimization and abusiveness

Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident’s detriment by staff or other residents? yes

Use of screening information

Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? yes

Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? yes

Use of screening information

Does the agency make individualized determinations about how to ensure the safety of each resident? yes

Use of screening information

When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident’s health and safety, and whether a placement would present management or security problems (NOTE: If an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? yes

When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident’s health and safety, and whether a placement would present management or security problems? yes

Use of screening information

Are each transgender or intersex resident’s own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? yes

Use of screening information

Are transgender and intersex residents given the opportunity to shower separately from other residents? yes
Use of screening information

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: transgender residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)

115.251 (a) Resident reporting

Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment? yes

Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment? yes

Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? yes

115.251 (b) Resident reporting

Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? yes

Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials? yes

Does that private entity or office allow the resident to remain anonymous upon request? yes

115.251 (c) Resident reporting

Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? yes

Do staff members promptly document any verbal reports of sexual abuse and sexual harassment? yes

115.251 (d) Resident reporting

Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents? yes
115.252 (a) **Exhaustion of administrative remedies**

Is the agency exempt from this standard?  

**Note:** The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.

115.252 (b) **Exhaustion of administrative remedies**

Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)

Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)

115.252 (c) **Exhaustion of administrative remedies**

Does the agency ensure that: a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)

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.)

115.252 (d) **Exhaustion of administrative remedies**

Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)

If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)

At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)

115.252 (e) **Exhaustion of administrative remedies**

Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)

Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)

If the resident declines to have the request processed on his or her behalf, does the agency document the resident’s decision? (N/A if agency is exempt from this standard.)
115.252 (f)  Exhaustion of administrative remedies

Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)

- yes

After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)

- yes

After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)

- yes

After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)

- yes

Does the initial response and final agency decision document the agency’s determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)

- yes

Does the initial response document the agency’s action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)

- yes

Does the agency’s final decision document the agency’s action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)

- yes

115.252 (g)  Exhaustion of administrative remedies

If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)

- yes

115.253 (a)  Resident access to outside confidential support services

Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents 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 enable reasonable communication between residents and these organizations, in as confidential a manner as possible?

- yes

115.253 (b)  Resident access to outside confidential support services

Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?

- yes

115.253 (c)  Resident access to outside confidential support services

Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?

- yes

Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?

- yes

115.254 (a)  Third party reporting

Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?

- yes

Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?

- yes
### 115.261 (a) Staff and agency reporting duties

Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?  

Yes

Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?  

Yes

Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?  

Yes

### 115.261 (b) Staff and agency reporting duties

Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?  

Yes

### 115.261 (c) Staff and agency reporting duties

Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?  

Yes

Are medical and mental health practitioners required to inform residents of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of services?  

Yes

### 115.261 (d) Staff and agency reporting duties

If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?  

Yes

### 115.261 (e) Staff and agency reporting duties

Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility’s designated investigators?  

Yes

### 115.262 (a) Agency protection duties

When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?  

Yes

### 115.263 (a) Reporting to other confinement facilities

Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?  

Yes

### 115.263 (b) Reporting to other confinement facilities

Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?  

Yes

### 115.263 (c) Reporting to other confinement facilities

Does the agency document that it has provided such notification?  

Yes

### 115.263 (d) Reporting to other confinement facilities

Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?  

Yes
**115.264 (a) Staff first responder duties**

Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser? yes

Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? yes

Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? yes

Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? yes

**115.264 (b) Staff first responder duties**

If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? yes

**115.265 (a) Coordinated response**

Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? yes

**115.266 (a) Preservation of ability to protect residents from contact with abusers**

Are both the agency and any other governmental entities responsible for collective bargaining on the agency’s behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency’s ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? yes

**115.267 (a) Agency protection against retaliation**

Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff? yes

Has the agency designated which staff members or departments are charged with monitoring retaliation? yes

**115.267 (b) Agency protection against retaliation**

Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? yes
115.267 (c) **Agency protection against retaliation**

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?

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?

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any resident disciplinary reports?

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor resident housing changes?

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor resident program changes?

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?

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 reassignment of staff?

Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?

115.267 (d) **Agency protection against retaliation**

In the case of residents, does such monitoring also include periodic status checks?

Yes

115.267 (e) **Agency protection against retaliation**

If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?

Yes

115.271 (a) **Criminal and administrative agency investigations**

When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(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 115.221(a).)

Yes

115.271 (b) **Criminal and administrative agency investigations**

Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.234?

Yes
115.271 (c) **Criminal and administrative agency investigations**
Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? yes

Do investigators interview alleged victims, suspected perpetrators, and witnesses? yes

Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? yes

115.271 (d) **Criminal and administrative agency investigations**
When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? yes

115.271 (e) **Criminal and administrative agency investigations**
Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual’s status as resident or staff? yes

Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? yes

115.271 (f) **Criminal and administrative agency investigations**
Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? yes

Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? yes

115.271 (g) **Criminal and administrative agency investigations**
Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? yes

115.271 (h) **Criminal and administrative agency investigations**
Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? yes

115.271 (i) **Criminal and administrative agency investigations**
Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? yes

115.271 (j) **Criminal and administrative agency investigations**
Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation? yes

115.271 (l) **Criminal and administrative agency investigations**
When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.221(a).) yes

115.272 (a) **Evidentiary standard for administrative investigations**
Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? yes
115.273 (a) Reporting to residents
Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?  yes

115.273 (b) Reporting to residents
If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)  yes

115.273 (c) Reporting to residents
Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?  yes

Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?  yes

Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?  yes

Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?  yes

115.273 (d) Reporting to residents
Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?  yes

Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?  yes

115.273 (e) Reporting to residents
Does the agency document all such notifications or attempted notifications?  yes

115.276 (a) Disciplinary sanctions for staff
Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?  yes

115.276 (b) Disciplinary sanctions for staff
Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?  yes
### 115.276 (c) Disciplinary sanctions for staff

Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? yes

### 115.276 (d) Disciplinary sanctions for staff

Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies, unless the activity was clearly not criminal? yes

Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? yes

### 115.277 (a) Corrective action for contractors and volunteers

Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents? yes

Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? yes

Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? yes

### 115.277 (b) Corrective action for contractors and volunteers

In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents? yes

### 115.278 (a) Disciplinary sanctions for residents

Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, are residents subject to disciplinary sanctions pursuant to a formal disciplinary process? yes

### 115.278 (b) Disciplinary sanctions for residents

Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident’s disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories? yes

### 115.278 (c) Disciplinary sanctions for residents

When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident’s mental disabilities or mental illness contributed to his or her behavior? yes

### 115.278 (d) Disciplinary sanctions for residents

If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending resident to participate in such interventions as a condition of access to programming and other benefits? yes

### 115.278 (e) Disciplinary sanctions for residents

Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact? yes
<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Yes/No</th>
</tr>
</thead>
</table>
| 115.278 (f) | Disciplinary sanctions for residents  
For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? | Yes    |
| 115.278 (g) | Disciplinary sanctions for residents  
Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.) | Yes    |
| 115.282 (a) | Access to emergency medical and mental health services  
Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? | Yes    |
| 115.282 (b) | Access to emergency medical and mental health services  
If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262?  
Do security staff first responders immediately notify the appropriate medical and mental health practitioners? | Yes    |
| 115.282 (c) | Access to emergency medical and mental health services  
Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? | Yes    |
| 115.282 (d) | Access to emergency medical and mental health services  
Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? | Yes    |
| 115.283 (a) | Ongoing medical and mental health care for sexual abuse victims and abusers  
Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? | Yes    |
| 115.283 (b) | Ongoing medical and mental health care for sexual abuse victims and abusers  
Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? | Yes    |
| 115.283 (c) | Ongoing medical and mental health care for sexual abuse victims and abusers  
Does the facility provide such victims with medical and mental health services consistent with the community level of care? | Yes    |
| 115.283 (d) | Ongoing medical and mental health care for sexual abuse victims and abusers  
Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents 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    |
115.283 (e) Ongoing medical and mental health care for sexual abuse victims and abusers

If pregnancy results from the conduct described in paragraph § 115.283(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 residents 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.)

115.283 (f) Ongoing medical and mental health care for sexual abuse victims and abusers

Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?

115.283 (g) Ongoing medical and mental health care for sexual abuse victims and abusers

Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?

115.283 (h) Ongoing medical and mental health care for sexual abuse victims and abusers

Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?

115.286 (a) Sexual abuse incident reviews

Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?

115.286 (b) Sexual abuse incident reviews

Does such review ordinarily occur within 30 days of the conclusion of the investigation?

115.286 (c) Sexual abuse incident reviews

Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?

115.286 (d) Sexual abuse incident reviews

Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?  
Yes

Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?  
Yes

Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?  
Yes

Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  
Yes

Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  
Yes

Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?  
Yes

115.286 (e) Sexual abuse incident reviews

Does the facility implement the recommendations for improvement, or document its reasons for not doing so?
<table>
<thead>
<tr>
<th>Section</th>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>115.287 (a)</td>
<td>Data collection Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?</td>
<td>yes</td>
</tr>
<tr>
<td>115.287 (b)</td>
<td>Data collection Does the agency aggregate the incident-based sexual abuse data at least annually?</td>
<td>yes</td>
</tr>
<tr>
<td>115.287 (c)</td>
<td>Data collection Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?</td>
<td>yes</td>
</tr>
<tr>
<td>115.287 (d)</td>
<td>Data collection Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?</td>
<td>yes</td>
</tr>
<tr>
<td>115.287 (e)</td>
<td>Data collection Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)</td>
<td>yes</td>
</tr>
<tr>
<td>115.287 (f)</td>
<td>Data collection Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)</td>
<td>yes</td>
</tr>
<tr>
<td>115.288 (a)</td>
<td>Data review for corrective action Does the agency review data collected and aggregated pursuant to § 115.287 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?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Does the agency review data collected and aggregated pursuant to § 115.287 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?</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Does the agency review data collected and aggregated pursuant to § 115.287 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?</td>
<td>yes</td>
</tr>
<tr>
<td>115.288 (b)</td>
<td>Data review for corrective action Does the agency’s annual report include a comparison of the current year’s data and corrective actions with those from prior years and provide an assessment of the agency’s progress in addressing sexual abuse?</td>
<td>yes</td>
</tr>
<tr>
<td>115.288 (c)</td>
<td>Data review for corrective action Is the agency’s annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?</td>
<td>yes</td>
</tr>
<tr>
<td>115.288 (d)</td>
<td>Data review for corrective action Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?</td>
<td>yes</td>
</tr>
<tr>
<td>115.289 (a)</td>
<td>Data storage, publication, and destruction Does the agency ensure that data collected pursuant to § 115.287 are securely retained?</td>
<td>yes</td>
</tr>
<tr>
<td>Section</td>
<td>Title</td>
<td>Response</td>
</tr>
<tr>
<td>-----------</td>
<td>----------------------------------------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>115.289 (b)</td>
<td>Data storage, publication, and destruction</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>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?</td>
<td></td>
</tr>
<tr>
<td>115.289 (c)</td>
<td>Data storage, publication, and destruction</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?</td>
<td></td>
</tr>
<tr>
<td>115.289 (d)</td>
<td>Data storage, publication, and destruction</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?</td>
<td></td>
</tr>
<tr>
<td>115.401 (a)</td>
<td>Frequency and scope of audits</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>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.)</td>
<td></td>
</tr>
<tr>
<td>115.401 (b)</td>
<td>Frequency and scope of audits</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>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.)</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)</td>
<td>yes</td>
</tr>
<tr>
<td>115.401 (h)</td>
<td>Frequency and scope of audits</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Did the auditor have access to, and the ability to observe, all areas of the audited facility?</td>
<td></td>
</tr>
<tr>
<td>115.401 (i)</td>
<td>Frequency and scope of audits</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?</td>
<td></td>
</tr>
<tr>
<td>115.401 (m)</td>
<td>Frequency and scope of audits</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Was the auditor permitted to conduct private interviews with residents?</td>
<td></td>
</tr>
<tr>
<td>115.401 (n)</td>
<td>Frequency and scope of audits</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?</td>
<td></td>
</tr>
<tr>
<td>115.403 (f)</td>
<td>Audit contents and findings</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td>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.)</td>
<td></td>
</tr>
</tbody>
</table>