

PREA Facility Audit Report: Final

Name of Facility: Stafford Creek Corrections Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 05/13/2026

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: John N. Katavich	Date of Signature: 05/13/2026

AUDITOR INFORMATION	
Auditor name:	Katavich, John
Email:	John.Katavich@cdcr.ca.gov
Start Date of On-Site Audit:	11/03/2025
End Date of On-Site Audit:	11/06/2025

FACILITY INFORMATION	
Facility name:	Stafford Creek Corrections Center
Facility physical address:	191 Constantine Way, Aberdeen, Washington - 98520
Facility mailing address:	

Primary Contact

Name:	Stefanie Bloomingdale
Email Address:	stefanie.bloomingdale@doc1.wa.gov
Telephone Number:	(360) 537-1856

Warden/Jail Administrator/Sheriff/Director	
Name:	Karin Arnold
Email Address:	kbarnold@DOC1.WA.GOV
Telephone Number:	(360) 537-1810

Facility PREA Compliance Manager	
Name:	Misty Michalak
Email Address:	mmichalak@doc1.wa.gov
Telephone Number:	(360) 537-1800
Name:	Stefanie Bloomingdale
Email Address:	stefanie.bloomingdale@doc1.wa.gov
Telephone Number:	(360) 537-1856

Facility Health Service Administrator On-site	
Name:	Blaine MacDowell
Email Address:	blaine.macdowell@doc1.wa.gov
Telephone Number:	360-537-2194

Facility Characteristics	
Designed facility capacity:	1942
Current population of facility:	1859
Average daily population for the past 12 months:	1856

Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Men/boys
Age range of population:	19-88
Facility security levels/inmate custody levels:	Minimum, Medium, Max
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	613
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	39
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	109

AGENCY INFORMATION

Name of agency:	Washington State Department of Corrections
Governing authority or parent agency (if applicable):	State of Washington
Physical Address:	7345 Linderson Way Southwest, Tumwater, Washington - 98501
Mailing Address:	
Telephone number:	3607258213

Agency Chief Executive Officer Information:

Name:	Dr. Cheryl Strange
Email Address:	cheryl.strange@doc.wa.gov
Telephone Number:	360-725-8810

Agency-Wide PREA Coordinator Information			
Name:	Michelle Duncan	Email Address:	miduncan@doc1.wa.gov

Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

3	<ul style="list-style-type: none"> • 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator • 115.31 - Employee training • 115.83 - Ongoing medical and mental health care for sexual abuse victims and abusers
---	---

Number of standards met:

42

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

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

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-11-03
2. End date of the onsite portion of the audit:	2025-11-06

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	I interviewed the Director of Beyond Survival, victim advocate services. I requested any relevant information from Just Detention International.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1942
15. Average daily population for the past 12 months:	1856
16. Number of inmate/resident/detainee housing units:	8
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1825
25. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	127
26. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	5
27. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	30
28. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	76
29. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	106
30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	61

<p>31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>56</p>
<p>32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>8</p>
<p>33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>56</p>
<p>34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>623</p>
<p>37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>106</p>

<p>38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>46</p>
<p>39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>No text provided.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>26</p>
<p>41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>
<p>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>I interviewed inmates using the inmate roster making sure to interview inmates from each HU. About halfway through the process, I reviewed the information to make sure I was getting inmates from various races, ethnicity groups, age groups and length of time at SCCC.</p>

43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	26
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2
48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1

<p>49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
<p>52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>2</p>
<p>53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>5</p>
<p>54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>5</p>
<p>55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>5</p>

<p>56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>5</p>
<p>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>58. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>18</p>
<p>59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>60. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>I made sure to interview staff from all three shifts. I also made sure to interview staff from different classifications and work assignments.</p>

Specialized Staff, Volunteers, and Contractor Interviews

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

62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	22
63. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
65. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
66. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Shift Commander, Grievance Coordinator, Training Manager and Mailroom
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	2
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

70. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.
---	-------------------

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.

71. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
--	--

Was the site review an active, inquiring process that included the following:

72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
---	--

73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
--	--

74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
---	--

<p>75. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
--	---

<p>76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>No text provided.</p>
--	--------------------------

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.

<p>77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
--	---

<p>78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>I reviewed 33 inmate files (Initial PREA screening, follow-up PREA screening and PREA education), 18 investigations, 22 personnel files (hiring and promotional documentation) and 22 staff training files.</p>
---	--

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	17	4	17	4
Staff-on-inmate sexual abuse	31	3	31	3
Total	48	7	48	7

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	22	0	22	0
Staff-on-inmate sexual harassment	13	0	13	0
Total	35	0	35	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	2	2	2	0	0
Staff-on-inmate sexual abuse	0	1	1	1	0
Total	2	3	3	1	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	2	3	10	2
Staff-on-inmate sexual abuse	9	9	10	3
Total	11	12	20	5

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	2	17	3
Staff-on-inmate sexual harassment	7	1	4	1
Total	7	3	21	4

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

13

<p>86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>5</p>
<p>88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>8</p>
<p>91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>7</p>
<p>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>5</p>
<p>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	3
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	Sexual Harassment is not a criminal offence
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
102. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:	1

Non-certified Support Staff	
<p>103. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:</p>	<p>1</p>
AUDITING ARRANGEMENTS AND COMPENSATION	
<p>108. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input checked="" type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
<p>Identify your state/territory or county government employer by name:</p>	<p>California Department of Correctional and Rehabilitation</p>
<p>Was this audit conducted as part of a consortium or circular auditing arrangement?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • 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	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>DOC 490.800, Prison Rape Elimination Act Preventing and Reporting Policy, Page 2, Section I. A. states the Department has zero tolerance for all forms of sexual misconduct. Page 3 of this policy defines sexual misconduct as aggravated sexual assault, offender-on-offender sexual assault, sexual abuse, and sexual harassment. Additionally, staff-on-offender sexual harassment and staff sexual misconduct are defined as sexual misconduct. This policy addresses the department’s approach toward preventing, detecting and responding to such conduct.</p> <p>Stafford Creek Corrections Center (SCCC) Operational Memorandum, SCCC 490.800, Prison Rape Elimination Act Prevention and Reporting, section 1. A. re-emphasizes the Washington Department of Corrections’ zero-tolerance policy. The OM continues to state that SCCC does not recognize consensual sex between staff and individuals under its jurisdiction as a defense against allegations of sexual misconduct. OM SCCC 490.850, Prison Rape Elimination Act Response, explains staff’s responsibility to</p>

report all allegations of sexual abuse and sexual harassment. It provides the location of the detailed PREA response plan as well as the composure and duties of the PREA response team.

The responsibilities of the Washington Department of Corrections PREA Coordinator's duties are defined on page 3 and 4 of DOC 490.800. The PREA Coordinator for WADOC is Michelle Duncan. Ms. Duncan was assigned the PREA Coordinator for the State of Washington in March 2022. Ms. Duncan's classification is Director of PREA Services, and she reports directly to the Senior Director of Correctional Operations.

According to the WADOC PREA Coordinator Position Description, the PREA Coordinator administers development, implementation, and maintenance of strategies, departmental policies, and procedural operations for the Prison Rape Elimination Act federal legislation, to include compliance with federal and state legislation, federally mandated standards, and court decisions / settlement agreements. Liaison and subject matter expert to other stake holders throughout the state in areas of law enforcement, victim services, organizations, county prosecutor's offices, the State of Washington Attorney General's Office and Supreme Court Judges Association. The PREA Coordinator also over sees all PREA investigations assigned to agency appointing authorities, completes related analysis of data for strategic planning and deficiency correction, and provides related information to management throughout the agency. During the audit process Ms. Duncan was available to clarify some of the questions about the WADOC's PREA policies that this auditor had. She is extremely knowledgeable and well versed in PREA. She appears to know how to effectively manage PREA in a correctional setting.

Policy requires each prison to have a PREA Compliance Manager (PCM) appointed by the Superintendent of the prison. The duties of the PCM are addressed in this policy on pages 4 and 5 of DOC 490.800. OM SCCC 490.800, section II, B. assigns the Associate Superintendent of Programs as the PCM for SCCC. SCCC has one specialist position that is responsible for the tracking of the investigations, the monitoring, SAIR committees, the screening and all other PREA related processes. SCCC's PCM is Stefanie Bloomingdale, an Associate Superintendent. As the PCM, she reports directly to the Superintendent and has the authority to coordinate the facility's efforts to comply with the PREA standards. Ms. Bloomingdale has been the PCM for SCCC for about three months. According to Ms. Bloomingdale, she does have enough time to complete all the PREA related tasks at SCCC.

SCCC also has a PREA Compliance Specialist (PCS). Within the Department of Corrections, this position ensures facility compliance with Federal Prison Rape Elimination Act (PREA) standards to ensure facility readiness for Federal PREA Audits. The PCS works collaboratively with the PREA Compliance Manager (CPM) to document and track all PREA related incidents and develop and maintain federal standards for the facility. The current PCS at SCCC was assigned to the position on October 15,

	<p>2025.</p> <p>The PREA Coordinator and her assistant were at SCCC during the on-site portion of the audit. During the on-site portion of the audit, the PC, PCM, the Assistant PC, the PCS and the previous PCS were available to answer questions and discuss any concerns that the audit team had. The Superintendent and the PREA unit's commitment to preventing sexual abuse and sexual harassment of inmates was obvious during the time that the audit team was at SCCC. The Superintendent was very involved in the PREA process and was able to communicate her commitment to PREA during her discussion with the auditors. I have determined that SCCC exceeds this standard based on the level of preparedness that SCCC and WADOC PREA teams demonstrated.</p>
--	--

115.12 Contracting with other entities for the confinement of inmates	
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Policy DOC 490.800, section IX, page 9, requires that any new or renewed contracts for the confinement of offenders will include the requirement that the contracted facility comply with DOJ PREA standards and that the WADOC be allowed to monitor the PREA compliance.</p> <p>Washington Department of Corrections (WADOC) currently contracts with American Behavior Health Systems for housing offenders in residential treatment center. Copies of the contract were reviewed by this auditor. The contract contained language specific to the requirement that the facility/agency comply with the DOJ PREA standards. The contract also contained a clause allowing for WADOC to inspect the facility/agency for PREA compliance. All three ABHS facilities utilized by WADOC have been found compliant in the past three years.</p> <p>WADOC has interstate compact agreements with the departments of corrections in both Iowa and Minnesota. These agencies are included in compliance monitoring activities.</p> <p>WADOC houses inmates in local county jails for short periods of time to accommodate Parole adjudication or for out-to-court purposes. According to the PREA Resource Center's clarification dated February 19, 2014, this situation does not constitute a contract, therefore 112.12 does not apply in this situation.</p>

	<p>During the interview with the Contract Administrator for WADOC, he stated the agency has a template that goes in all new contracts for offender housing, which covers the PREA compliance and monitoring requirements. Prior to signing a new contract, the PC is provided a copy of the contract to ensure that it meets the PREA requirements. Once the contract is signed, the PC checks to see where the facility is at in the PREA audit process. She reviews the web site and talks to the local PCM or PC. The facilities are inspected by WADOC staff every couple of weeks. If something is none compliant, based on the severity, the contract could be suspended or cancelled.</p>
--	--

115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>DOC 490.800, Prison Rape Elimination Act (PREA) Prevention And Reporting, section VI, requires that each superintendent use the PREA Compliant Staffing Plan template to develop, maintain, and annually review a staffing plan that includes an objective analysis of the facility's staffing needs and establish a staffing model.</p> <p>The WADOC staffing model is based on an extensive review of national correctional practices and has been approved by the Washington State Legislature. The pre-audit materials include a vulnerability assessment that was completed on March 15, 2025. These assessments are completed annually by staff from the Washington Department of Corrections to help evaluate the safety and security of the facility. The assessment includes an evaluation of the on-site staffing at SCCC. These quality assurance audits are conducted to ensure compliance with the staffing model.</p> <p>Each year SCCC completes an annual staffing review report. The most recent staffing plan review is dated March 24, 2025. The staffing plan reviewed:</p> <ul style="list-style-type: none"> The staffing methodology; If there were any judicial findings of inadequacy (none noted); If there were any findings of inadequacy from Federal investigative agencies (none noted); If there were any findings of inadequacy internal or external oversight bodies (none noted);

All components of the physical plant (no PREA concerns noted);

The composition of the inmate population;

The number and placement of supervisory staff;

What institutional programs were occurring on a particular shift;

If there are any applicable state or local laws or standards (none noted);

The prevalence of any substantiated or unsubstantiated incidents of sexual abuse;

And any other relevant factors.

This staffing review addressed resources available to maintain the staffing plan. The staffing review was signed by the Superintendent on April 8, 2025, and reviewed by the Agency PREA Coordinator. The 2024 staffing plan was included in the pre-audit materials and reviewed by this auditor. During the interview with the Superintendent, she was able to explain how she utilizes the staffing plan to ensure the safety of the inmates, staff and the public.

SCCC is funded for 613 full-time employees, including 16 exempt full-time employees. SCCC employees 327 custody staff, including 287 Officers, 34 Sergeants and 6 Lieutenants. There are 78 full time medical staff and mental Health staff and the remainder of the 613 being support staff (maintenance, food services, administrative and other support services staff). The current vacancy rate at SCCC is 4.25%.

According to the Superintendent, there are no findings of inadequacies by a judicial decision, a Federal Investigation or internal/external oversight bodies. The staffing plan at SCCC is based on the custody level of the offenders, the physical design of the facility and the composition of the offender population. When re-evaluating the staffing plan, the facility management discusses the addition of video monitoring.

SCCC currently has 315 video cameras to enhance the security of the facility. The length of storage for these cameras is about 30 days. The cameras are monitored by various staff, depending on what the camera is monitoring and what the staff's area of supervision is.

WADOC requires each institution to complete a PREA Vulnerability Assessment. Once the initial assessment is complete it must be reviewed and updated at least annually

to ensure the corrective action plan is up to date. Any time there is a risk identified, it is tracked in the Vulnerability Assessment, and a corrective action item is created. As corrections are made, these are documented in this assessment tool. SCCC had a Vulnerability Assessment conducted on January 20, 2025. The Vulnerability Assessment was reviewed by this auditor.

SCCC has a minimum staffing requirement. If a mandatory post is vacant the post is filled with overtime or redirection from non-mandatory posts. Additionally, programs are closed if non-custody staff are not available to run the program. If a program is modified or closed due to lack of staffing, the reason for the modification/closure is documented. This program modification is documented in the daily shift logs. The program being modified and a short explanation of why, is listed at the bottom of the document. Examples of the documentation were provided to the audit team.

WADOC Policy DOC 110.100 requires that the facility executive team make unannounced tours of selected areas of the facility at least weekly. Policy prohibits employees from alerting one another that these tours are occurring. Policy requires correctional staff to log these tours in the post logs. Managers log their rounds in the Incident Command Walk about Report. This report contains the date, shift, area visited and observation. Examples of the housing unit logs were provided with the pre-audit material. The examples provided show the time, name and rank of the supervisor conducting the unannounced tour. The housing unit logs were reviewed during the audit. The managers sign the logbook in red ink while conducting their tours. This auditor observed the manager's signature in the logbooks. When managers were asked about the tours, they informed the audit team that they do not announce rounds, and they make their rounds at different times of day in random order (including weekends). The housing units are routinely toured by the lieutenants as noted in the logbook. First shift had significant time gaps between supervisor/manager visits according to the documents reviewed. Some of the housing unit's logbooks showed gaps of up to 15 days between tours.

During the tour the audit team noticed sufficient numbers of staff to provide adequate coverage during each shift. There were not any areas that offenders had access to that did not have a staff member present. A review of the video monitors showed that areas that are less likely to be in the direct line of staff sight, such as hallways and stairwells, had video coverage. During the offenders' interviews, offenders generally stated that they felt safe at SCCC.

Policy prohibits staff from alerting other staff during these supervisor/manager tours.

During the tour the audit team found a couple of areas that created victimization concerns. Corrections were made prior to the completion of the on-site portion of the audit.

These areas included:

Mirrors were added to the stairwells in the Hospital and the Education Department.

Excessive window covering was removed from the hobby craft inmate restroom.

Expectations were provided to staff on locking staff restrooms.

The blinds in Key Control were modified to allow visibility into the room.

This auditor found three non-compliance issues were present at the conclusion of the Interim PREA Audit Report:

Elevators in the hospital and education department lack staff's control and there is no video monitoring.

The training rooms cannot be seen from the outside, creating an area for victimization concerns.

There was lack of documentation that an upper-level supervisor or manager toured completed unannounced rounds in the housing units on grave shift.

The elevators in the hospital and education department lacked staff's control and there was no video monitoring available. During the Corrective Action Plan (CAP) meeting it was determined that the Hospital had sufficient security controls on the lower floor, in that inmates could not enter the hospital first floor without an officer allowing them in. Proof of these controls will be provided. During the CAP meeting it was decided that the Education Officer's post orders would be modified to include locking the elevator when the officer leaves the post.

The auditor received the corrected post orders for the hospital staff and the education staff on February 19, 2026. The staff are to control movement in the elevator, allowing only one inmate on the elevator at a time.

The training rooms had blinds completely covering the windows. Staff could not see in from the outside, creating an area for victimization concerns. The training rooms do require some degree of privacy because of the nature of the tactical training that is conducted in these classrooms. During the tour it was agreed that a small visual

	<p>opening would allow staff to check on the safety of the individuals in the room without compromising confidential training. During the CAP meeting the auditor was informed that blinds have been ordered. The blinds would have a small viewing area.</p> <p>On February 19, 2026, the auditor was provided with photos of the installed curtains, with cut outs, to allow staff to see into the training rooms.</p> <p>During the on-site portion of the audit, it was determined that supervisor manager tours were not occurring frequently enough. Specifically, Grave Shift. During the CAP meeting, it was agreed that, at the end of each month, the auditor would request a random week's documentation from the previous month, that shows that tours are occurring.</p> <p>During the CAP, the auditor requested copies of the housing unit logbook entries for the week of January 4-10, the week of February 15-21 and the week of March 8-14 graveyard only. Within a week of each request, the auditor received the copies of the logbooks needed to review. According to the documentation received, each HU was visited by an upper-level supervisor/manager at least twice during the week that was reviewed.</p> <p>Three consecutive months of documentation demonstrated compliance with this standard 115.13(d).</p>
--	---

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WADOC Policy 320.500, Youthful Offender Program, states that youthful offenders sentenced to the Department will be received at Washington Corrections Center (WCC) or Washington Corrections Center for Women (WCCW) Reception Diagnostic Center. Offenders admitted to WCC or WCCW will be housed to ensure direct supervision, safety, and security requirements are met. The youthful offender will not be housed or participate in a program/activity (e.g., recreation, visiting) with any adult offender. The youthful offender will be under direct supervision by 2 custody employees whenever s/he leaves his/her cell. Sight or sound contact with adult offenders will be minimal and brief, and conform to applicable legal requirements while the youthful offender is housed at Department facilities.</p> <p>Stafford Creek Corrections Center only houses adult felons and does not house youthful offenders.</p>

	<p>The WADOC recently entered a contract with Washington State Juvenile Rehabilitation to house WSJR wards at SCCC. The contract provides one housing unit, separate from SCCC inmate population, to house the wards. The contract also states that WSJR will not house any ward under the age of 18 at SCCC.</p>
--	---

115.15	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>WADOC Policy 420.310, Searches of Incarcerated Individuals, section IV, requires that a strip search must be conducted by two trained employees. Staffing will meet the following gender requirements, unless waiting for an employee of the designated gender may result in serious bodily injury to the offender, the employee, or others. Strip searches of male offenders require that one of the employees conducting the search be male. If the second person conducting the strip search is female, she will position herself to observe the employee doing the strip search but will not be in direct line of sight with the offender. A strip search of an individual who is transgender, non-binary or intersex will be conducted by the gender requested on the DOC 02-420 Preference Request and will not be considered cross gender. All strip searches will be documented before the search, or as soon as possible after the completion of an emergent strip search. If a strip search is conducted that does not meet these gender requirements for staffing, a confidential report will be completed before the end of the shift. Policy 420.312, Body Cavity Search, Requires that all cavity searches will performed by staff of the same gender as the offender. According to the memorandum signed by the Superintendent, there have not been any cross-gender strip searches conducted during this audit period.</p> <p>On January 22, 2020, WADOC drafted a new policy on transgender, intersex and/or gender non-conforming individuals. This policy allows inmates to request to be strip searched by the gender of staff that they identify as, not the inmates birth gender. The approval must be approved by the Headquarters Multi-Disciplinary Team and only employees who volunteer and receive approved training will conduct these strip searches. The individual's preference will be documented on Form DOC 02-420, Preference Request Form.</p> <p>WADOC Policy 420.310, Searches of Incarcerated Individuals, section III, states that male individuals may be searched by an employee/contract staff of any gender. Searches of an individual who is transgender and/or non-binary or is intersex will be conducted by the gender requested on the individual's DOC 02-420 Preference</p>

Request. According to the inmates who identified as transgender, they are strip searched by the gender of staff that they have requested on the DOC 02-420.

WADOC Policy 420.310, Searches of Incarcerated Individuals, section V, states that if gender requirements cannot be met for a pat/strip search, a confidential report will be completed in IMRS. All strip searches are logged by SCCC staff. The search logs for the previous year were provided with pre-audit materials. A review of the search logs did not review any cross gender viewing concerns. The Superintendent provided a memorandum stating that there was no cross-gender strip searches conducted in the past year.

Policy 490.800, section VIII, requires that offenders be provided with the opportunity to shower, perform bodily functions, and change clothes without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia. This includes video surveillance. An announcement will be made by anyone who does not identify with the facility's gender designation, loud enough and often enough to reasonably be heard by the occupants of a housing unit, including the living area (e.g., where incarcerated individuals sleep), or any common area designated for offenders to disrobe or change their clothing (e.g., bathrooms, showers). On December 13, 2016, the Assistant Secretary of Prisons Division authored a memorandum clarifying when opposite gender staff have to announce their presence in a housing unit. This directive requires opposite gender staff who work in the housing unit to announce their presence one time, at the beginning of the shift. They are not required to re-announce if they go in and out of the unit. All opposite gender staff who do not work in the unit must announce their presence each time they enter the unit.

SCCC has installed doorbells by the entrance of each housing unit. Female staff are required to ring the doorbell prior to entering the housing unit. The WADOC informs the inmates what the doorbell signifies during orientation at the reception center.

They are informed that the doorbell indicates that a female staff member is entering the housing unit and to be properly dressed. During the tour of the facility, the audit team observed staff using the doorbell and making the cross-gender announcements as they entered any living area. All most all of the inmates interviewed stated that the female staff routinely announce themselves or use the doorbell when they enter the living quarters.

During the tour of SCCC, the audit team noted that the offender restrooms allowed offenders to be able to toilet without female staff being able to observe their private areas. All of the housing unit showers provided adequate modesty screens to allow offenders to disrobe, and shower without staff observing their private body parts. The strip search areas provide sufficient modesty to prevent cross gender viewing.

In the medical clinic, there are modesty curtains in the exam rooms to allow for medical exams without other staff observing.

The video cameras are monitored in several locations throughout the facility. Most of the cameras did not create a cross gender viewing concern. The cameras that are in the observation cells in the hospital have the toilet areas blacked out. However, there is no location for the inmates to change clothes. The monitors for these cameras are visible by staff of both genders. The inmates are informed of the possibility of female staff observing them on camera and they should keep this in mind while changing clothes.

WADCO Policy 490.700, section II, prohibits employees and contract staff from searching an offender for the sole purpose of determining their genital status. If the offender's genital status is unknown, it will be determined by health care providers. Generally, the offender's disclosure of status is the determining factor which would then initiate housing review protocols. Offenders that are received at SCCC have already been determined to be male at the reception center. WADOC trains staff that it is against policy to strip search an inmate to determine their gender. The Superintendent of SCCC claims that staff at SCCC have not strip searched an offender to determine his/her genital status during this audit period. None of the offenders claimed to have been strip searched for this purpose and none of the staff claimed to have strip searched an inmate to determine their gender.

In 2014 all security staff were trained in pat-down searching of transgender/intersex offenders. This training was integrated into the academy training schedule at the same time to ensure that all security staff receive the training. A review of the lesson plan complies with the PREA requirement. A review of the training documents provided during the audit confirmed that all but seven custody staff have been through this training. That is 98% compliant. The staff that have not received the training are either new hires, or away from the institution for an extended period of time. During the interview with random staff who would conduct pat-down searches, they all claim to have received the training and were familiar with how to conduct a pat-down search of male, transgender and intersex inmates.

During the tour of the facility, there were two areas with cross gender viewing concerns. The showers in the inmate gym did not have curtains (staff claimed that inmates never use these showers) and the toilet stall in the inmate gym was exposed to staff walking in the hall. Both items were corrected prior to the audit team leaving the facility. The water to the showers was shut off and a modesty screen was placed in the toilet area.

	<p>The doorbell at the entrance to the hospital was not working at the time of the tour. Because this is the primary notification of female staff entering the living quarters, this needed to be repaired. On December 18, 2025, the facility provided this auditor with a completed work order, showing that the doorbell had been repaired.</p>
--	--

<p>115.16</p>	<p>Inmates with disabilities and inmates who are limited English proficient</p>
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>WADOC Policy 490.800, Prison Rape Elimination Act, Prevention and Reporting, section III, requires that only professional interpreters or translation services, including sign language, are available to assist offenders in understanding the PREA policy, reporting allegations, and/or participating in investigations of sexual misconduct. Offenders are not authorized to use interpretation/translation services from other offenders, family members, or friends for these purposes.</p> <p>Policy 450.500, Language Services for Limited English Proficient (LEP) Individuals, states that the department will provide interpretive and translation services through Department and/or contract services at all Department Facilities. The policy also requires non-Spanish limited English Proficient offenders, including those requiring American Sign Language, to receive orientation in a language that they understand. The orientation includes the WADOC PREA policy. The offenders are shown a video during orientation that explains the PREA policy. This video is in either English or Spanish and has subtitles for the hearing impaired. This auditor was provided copies of PREA brochures provided to offenders with limited intellectual capacities. If the inmate is hearing impaired, a transcript of the video is provided. If the inmate is unable to read, then other forms of communication are used by staff to inform the inmate of the WADOC PREA Policy.</p> <p>The department has several contracts with individuals who are certified in sign language. Additionally, this auditor was provided with a list of individuals and firms that are contracted with WADOC to provide interruptive services. The WADOC has a contract with the telephone vendor interpretive services, CTS Language Link Inc., available 24 hours a day, seven days a week. SCCC has PREA information posters located in all the housing units and common areas in both English and Spanish. Generally, it is determined if interpretive services are required at the reception</p>

center and a note is placed in the inmate's file. However, staff or the inmate can request interpretive services at any time it appears that these services are needed. According to the PREA Language logs, there have been 5 inmates that required outside interpreter services during the past year (four Spanish and one Vietnamese). WADOC does not use staff for language interpretation.

WADOC provides copies of the graphic novel, End Silence, to inmates who are developmentally disabled or slow learners. These novels use simple language and pictures to explain the PREA policies and how to report sexual abuse. Additionally, staff explain the PREA policies to the lower functioning inmates.

When an inmate arrives at SCCC, the Classification Counselor identifies the LEP or ADA offenders. Any accommodation required to assist the inmate during orientation are then documented. SCCC has a large number of inmates with mobility, hearing and vision concerns. The facility design and staff are well versed in dealing with inmates who have needs for special accommodations. Four inmates with physical disabilities were interviewed during the audit. All four stated that they are provided with access to the PREA process.

WADOC Policy 450.500, Language Services for Limited English Proficient Individuals, attachment 2, provides a breakdown of unauthorized use of an incarcerated individual for interpretation/translation services. One of the items listed in the attachment is "understanding department policies related to the Prison Rape Elimination Act (PREA) and reporting and/or participating in the investigation of incidents of sexual misconduct."

While interviewing staff, about half of them were unaware of the interpretive services and how to use these services if needed. None of the staff interviewed stated that they would use another offender to interpret for them in PREA cases.

During the interview process the audit team interviewed two non-English speaking offenders. Both interviews were conducted using the translator telephone service. Both inmates stated that they were provided the PREA information in their native language.

115.17	Hiring and promotion decisions
---------------	---------------------------------------

	Auditor Overall Determination: Meets Standard
--	--

Auditor Discussion

Policy 490.800, Prison Rape Elimination Act (PREA) Prevention and Reporting, section V, outlines the WADOC’s staffing practices related to PREA. The policy states that 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 center, juvenile facility or other institution; 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 activity described above.

WADOC requires perspective employees, promotions and contractors to complete form DOC 03-506, Sexual Misconduct and Institutional Employment/Services Disclosure. Additionally, all current employees are required to complete the DOC 03-506, during their annual PREA training. This form has five questions about previous sexual misconduct and sexual harassment, of an inmate, in an institutional setting. If the candidate answers yes to any of these questions, he/she may not be allowed access to the facility. Additionally, the form requires the candidate to disclose any previous institutional work history that they may have had. Seven samples of the DOC 03-506 were provided to this auditor with the pre-audit material. All of the documents were in compliance with policy. 14 samples of new hires and of promotions were provided with the pre-audit materials. Random reviews of 20 personnel files demonstrated compliance with this policy. All of the documents were in compliance with policy.

Prior to promoting a WADOC employee, the PREA database maintained within the Offender Management Network Information (OMNI) system is reviewed before an individual is hired or promoted to ensure there are no investigations or allegations requiring review.

Additionally, policy 490.800 requires that the department consider any incidents of sexual harassment in determining whether or not to hire, promote, or enlist the services of anyone who may have contact with an offender.

Policy 810.015, Criminal Record Disclosure and Fingerprinting, requires that all applicants will be background checked before initial appointment or promotion.

These background checks include the Washington Crime Information Center and National Crime Information Center. All external applicants must disclose any previous institutional employment. These applicants are required to complete a form to authorize the release of information so that the facility can complete a work history background check.

Policy 400.320, Terrorism Activity, requires a criminal record check be completed for all employees, contractors and volunteers. Additionally, contracts between workforce agencies and WADOC require the employment agency to complete background checks that comply with PREA hiring and promotion policy on all temporary employees that will have contact with offenders. The 5 sample files submitted with the pre-audit materials all contained background checks that were conducted prior to hiring/promoting. All 22 personnel files reviewed contained recent criminal background checks. Five contractors' proof of background checks were submitted with the pre-audit documentation. Five random volunteer and five random contractor records were reviewed during the on-site portion of the audit. All ten had proof of background checks.

WADOC policy states that failure to fully divulge criminal information may be cause for disciplinary action, up to and including dismissal or termination of service.

Policy allows for WADOC to provide information on substantiated allegations of sexual abuse or sexual harassment involving former employees upon receiving a request from an institutional employer for whom such employee has applied for work.

While reviewing the personnel files it was discovered that all staff background checks are completed by the HR department upon initial hiring. WADOC then completes a background check on all staff every five years. The WADOC just completed all the background checks in the spring of 2024. Contractors and volunteers must have a background check completed to receive an identification card. The card expires after five years. Seven examples of the background checks were provided with pre-audit materials. If an applicant had a record of criminal activity, the Captain reviewed the arrest record to ensure that all hire policies and standards are complied with.

When employee candidates, contractors and volunteers are initially hired they must self-certify that they have not had any criminal, civil or administrative action as a result of any sexual misconduct in a confinement setting. They are required to self-certify again, annually, as part of the training curriculum. A review of the training documents and personnel files demonstrated 100% compliance with this requirement.

	<p>When a perspective candidate applies for a position at SCCC, they are asked to disclose any previous employment with any other correctional employer. Of the 20 personnel files reviewed, two disclosed prior employment at other institutions/agencies. Both personnel files where the employee disclosed such previous employment contained records to show that an information request was submitted to the previous employer to check that the employee did not have any criminal, civil or administrative action as a result of any sexual misconduct in a confinement setting in the employment history.</p> <p>During the interview with the Human Resources supervisor, she stated that all employees have to complete a criminal background check before they are considered for employment. Additionally, the application process requires the potential employee to disclose any previous sexual abuse/harassment of an incarcerated individual. If the prospective employee provides false information on the application, they are eliminated as a candidate.</p>
--	---

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Policy 490.800, PREA Prevention and Reporting, section VII, B, states that the Department will consider the possible effects on its ability to protect offenders from sexual misconduct when: Designing a new facility; Planning substantial expansions or modifications of existing facilities, and; Installing or updating video monitoring systems, electronic surveillance systems, or other monitoring technology.</p> <p>According to the staff at SCCC, there have not been any physical structure changes to the facility since the last audit. We were also informed that the only upgrade to the video system was modernization of some of the cameras, increasing their clarity. No new cameras were added.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Policy 490.850, PREA Response, section III, B, addresses the WADOC's policy for responding to allegations of aggravated sexual assault. This policy contains a checklist that clearly addresses the process to preserve evidence for possible administrative proceeding or criminal prosecution. This process closely mirrors the Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Forensic Examinations, Adults/Adolescents". SCCC staff do not conduct criminal investigations. In the event that a case appears to be criminal in nature, the case and evidence collection is turned over to the Grays Harbor County Sheriff Office (GHCSO) or the Washington State Police. The Shift Commander for SCCC was interviewed and he was able to articulate the entire response process and demonstrated how he would ensure compliance with PREA policy.

SCCC has an annual Law Enforcement meeting with GHCSO to discuss each agency's role in the criminal investigation process. The most recent meeting was held on February 21, 2025. Copies of the minutes were provided to the audit team. SCCC and GHCSO have an excellent working relationship, according to the Grays Harbor Detective, that was interviewed for this audit.

Policy 490.850, section III, 5, a, requires that all offenders alleging sexual acts perpetrated by either staff or another offender that occurred within the previous 120 hours and involved penetration or exchange of body fluids will be assessed for immediate medical needs before transport to the designated community health care facility for a forensic exam. The department's response checklist also addresses the proper process to ensure the victim is seen by a forensic examiner. SCCC does not complete forensic medical exams. All cases that require SAFE/SANE services are transferred to Grays Harbor Community Hospital in Aberdeen or Providence St. Peter's Hospital in Olympia, Washington. According to the information provided and the observations of the auditors, during the past year, there were 3 PREA allegations that required the victim to be examined by the SAFE/SANE Nurse. The SAFE/SANE nurse was interviewed telephonically. She confirmed that Grays Harbor Community Hospital in Aberdeen or Providence St Peters Hospital handles all of the forensic exams for SCCC.

WADOC Policy DOC 600.025, Healthcare Copayment Program, section I, B, 6, indicates that individuals will not be charged a copayment for medical or mental health treatment required because of a sexual assault that occurred while in custody.

WADOC requires that victims of sexual assault be offered a victim advocate. WADOC has a contract in place with Washington Department of Commerce, Office of Crime Victims Advocacy to provide victim advocates for SCCC. Beyond Survival, Aberdeen, Washington provides victim advocates for inmates at SCCC. Beyond Survival was

contacted to confirm their role in a sexual assault response process. The Director of Beyond Survival stated that they require all Victim Advocates to attend 30 hours of training initially and 12 hours every year after that. Beyond Survival currently has four advocates. SCCC meets annually with Beyond Survival to discuss concerns and issues that might arise during the year. The minutes from the annual meeting that occurred between Beyond Survival and SCCC were provided with the pre-audit materials. This meeting took place on February 21, 2025. According to the Director, advocates respond to the facility about twice a month and receive phone calls about twice a week. She stated that if an advocate requests to speak with an inmate, SCCC staff grant those requests.

WADOC is responsible for conducting administrative investigations. WADOC staff do not have law enforcement powers and are not authorized to conduct criminal investigations. All criminal allegations are referred to GHCSO for investigation /prosecution. In the event that Grays Harbor County Sheriff's Office is unable to respond, SCCC is required to contact the Washington State Police. The Investigator for Washington State Police was contacted for this audit. He was very knowledgeable in the PREA requirements. He further stated that his agency is trained in and required to follow the sexual assault protocols that the PREA standards require. He claims that he has a very good working relationship with SCCC and WADOC.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy 490.860, PREA Investigation, requires the Department to thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving offenders under the jurisdiction or authority of the Department.</p> <p>When there is a reported PREA incident, regardless of how the information is received, the Shift Commander completes an incident report on the Incident Management Reporting System (IMRS). The IMRS is monitored by WADOC headquarters staff. All PREA incident reports are reviewed by the Headquarters PREA Unit to determine if the allegation meets the prima facie of PREA. If the allegation is determined to be a PREA incident, the report is returned to the institution and assigned an investigation number. This process takes as little as a couple of hours or as long as two days to assign an investigator. According to the PREA Coordinator, this process is tracked very closely and any delayed investigations are researched by the PREA Unit.</p>

	<p>During a review of the Washington Department of Corrections website, the PREA policies and investigation protocols were located using the search tool in “Policies”.</p> <p>WADOC staff are not sworn peace officers, therefore cannot conduct criminal investigations. If at any point during the administrative investigation, it appears that a crime was committed, the case should be referred to the Grays Harbor County Sheriff’s Office for criminal investigation. There were eighteen criminal PREA allegation referred to the local law enforcement during this audit period. Four were accepted, while all the others were declined. The management staff at SCCC meet with the representatives from Grays Harbor County Sheriff’s Office at least annually to discuss and coordinate each agencies responsibility during a criminal investigation. This auditor reviewed copies of the minutes from the last meeting, January 26, 2025, between the agencies.</p> <p>The agreement between Grays Harbor County Sheriff’s Office and SCCC state the facility’s Chief Investigator will contact the Grays Harbor Detective by work cell, email or 911 to report any allegation criminal in nature. Responding officers will have access to the evidence, victim, accused, witnesses and location of the incident. Five cases of nineteen were accepted by the outside law enforcement in the past year.</p>
--	---

115.31	Employee training
	<p>Auditor Overall Determination: Exceeds Standard</p> <p>Auditor Discussion</p> <p>Policy 490.800, Prison Rape Elimination Act Prevention and Reporting, section X, requires that all new employees, contract staff and volunteers receive initial PREA training upon hire/assignment, followed by annual training. A review of the training guide (DOC Preventing Sexual Harassment and Sexual Abuse in Prisons - AIS FY26) revealed that the training covers policies and operational memorandums related to the Prison Rape Elimination Act, and the criminal and disciplinary penalties for engaging in prohibited behavior. The training also covers:</p> <p>The WADOC zero tolerance policy;</p> <p>How to prevent, detect, report, and respond to sexual misconduct;</p> <p>Offender’s rights to a sexual abuse and sexual harassment free environment;</p> <p>Offender’s and staff’s right to be free from retaliation for reporting sexual abuse and sexual harassment;</p> <p>The dynamic of sexual abuse and sexual harassment in confinement;</p>

The common reactions of victims; How to detect and respond to signs of threatened or actual sexual abuse;

How to avoid inappropriate relations with offenders;

How to communicate effectively with LGBTI offenders and;

How to comply with laws related to mandatory reporting.

The PREA training curriculum provided with the pre-audit materials includes all the above-mentioned subjects. The class is designed to last about two hours.

The training provided by WADOC, addresses both male and female issues in some detail. Employees at SCCC receive training gender specific to both male and female offenders. Because of this training policy, staff do not need to be retrained when they transfer to a facility that houses offenders that are of a different gender.

The training year for SCCC starts in July and ends in July of the following year. The current training was initiated in 2014. All staff were required to take the training at that time. Since that date, all staff are required to take the training on PREA annually.

During this audit period, the training was completed through a computer delivered class. In addition to the annual PREA training, all staff, contractors and volunteers must self-certify that have not had any civil, criminal or administrative action taken against them for sexual misconduct involving an incarcerated individual. Ten examples of completed training were provided with the pre-audit materials.

According to the information provided with the pre-audit materials, over 98% of the employees did complete the training in 2023/24 and 98% completed the training in 2024/25. All Twenty-two random employee training files reviewed demonstrated compliance with the training.

The Facility Performance Coordinator explained to me how she makes sure staff attend training. Currently PREA training is an on-line class, and employees can take it at their convenience. The training year is from July 1 to June 30. In April she sends e-mails to the staff who have not completed the training explaining the requirements of compliance with mandatory training. Two weeks later she sends an email to the employee's supervisor advising them of the employee's non-compliance. In May, the Captain and the employee are provided with a notice to complete the training. If the employee fails to attend the training the Captain issues them a "letter of Concern" to initiate the disciplinary process.

WADOC requires employees to sign Form DOC 03-483, PREA Training

	<p>Acknowledgment, upon completion of the class. Thirteen examples were provided with the pre-audit materials, demonstrating compliance. All twenty-two random training files reviewed had these acknowledgment forms in the file.</p> <p>All the staff that were interviewed demonstrated knowledge in preventing, detecting, reporting and responding to sexual abuse/sexual harassment of an offender. They all knew that Washington had a zero-tolerance policy toward sexual abuse and sexual harassment. After interviewing staff, it was apparent that the training is effective.</p>
--	--

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Policy 490.800, section X, requires that all new employees, contract staff and volunteers receive initial PREA training upon hire/assignment, followed by annual training. The training that most volunteers and contractors are required to take “Prison Rape Elimination Act (PREA) and Sexual Misconduct Training” designed for Contractors and Volunteers. This training exceeds the requirement for this standard. The contractor is then required to sign the acknowledgment form (DOC 03-523) stating they understand WADOC PREA policy. WADOC Policy 530.100, Volunteer Program, section V, requires that volunteers attend this training annually. The agreement contracts with vendors and service providers include this information in the contracts.</p> <p>According to the information provided with the pre-audit materials, SCCC has 39 contractors and 109 volunteers on their approval list. Eleven samples of signed training acknowledgments were provided with the pre-audit materials. Five for contractors and six for volunteers. Five random volunteer files and five contractor files were reviewed. All ten of them have received the training within the past 12 months.</p> <p>Contractors and volunteers that have limited access to the facility (i. e. contractors filling the vending machine, fixing office equipment or one time repair services) are provided with the policy via pamphlet. The pamphlet includes the definition of PREA, the duty to report, the zero-tolerance policy and additional relevant information. These contractors and volunteers must also acknowledge that they received and understand the information by signing the form DOC 03-478.</p>

	<p>The contractors and volunteers that were interviewed stated that they had received the training and that they are required to take the PREA course annually. All four that were interviewed knew what PREA was, the zero-tolerance policy, and to report a PREA allegation to their supervisor or shift command.</p>
--	---

115.33	Inmate education
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>WADOC Policy 310.000, Orientation, section III, requires that all incarcerated individuals receive orientation within one week of arriving at the facility. The orientation will include information on the Prison Rape Elimination Act. Policy 490.800, PREA Reporting and Preventing, section XII, requires that all offenders will be provided with 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 manor allowing offenders to ask questions of the staff member facilitating the orientation.</p> <p>Offenders are provided with a brochure (English or Spanish) and shown a PREA video that explains the Department's policies and how to report sexual misconduct when they go through the reception center process. When they arrive at SCCC they receive the PREA handout at Intake. The inmate attends an orientation class which is typically given on the first week of arrival. During orientation, the offenders receive the offender handbook which explains the PREA policy and how to report any allegations. The staff member who is providing the information also explains the department's zero tolerance policy, what constitutes a PREA, how to avoid becoming a victim and how to report a PREA. The offenders sign a document demonstrating that they attended the class.</p> <p>Once the inmates have received the PREA education, they sign a form DOC 21-992. This form is an orientation check list. The inmates initial next to the PREA section of the check list. By initialing the DOC 21-992, the inmate acknowledges that he/she has received the PREA policies (including zero-tolerance and reporting) and had an opportunity to discuss PREA with staff. Copies of their completion certificate are placed in OMNI. Thirteen copies of signed documents were provided to this auditor with the pre-audit materials. A review of thirty-three random inmate files were reviewed to check for compliance with this policy. All thirty-three files had signed proof that the education was provided within 30 days of arrival.</p>

WADOC implemented educating offenders on the PREA policy in March 2006. At that time all offenders currently housed within the Department were given a copy of the PREA brochure and allowed to attend orientation. SCCC has twenty-two offenders that were housed at the facility prior to implementation of the PREA policy. Proof of education for all of these inmates was provided with the pre-audit materials.

The PREA video is available on the tablet that all inmates receive. The video is a PowerPoint style of presentation so that the hearing impaired can read the information. This video is also in Spanish. WADOC has several versions of PREA brochures available for low functioning offenders. These booklets are illustrated and use simple language to explain the PREA policy to individuals who may have a learning disability or limited understanding of English.

The list of all inmates who arrived at SCCC between September 1, 2024, and August 31, 2025, was provided with the pre-audit materials. Of approximately 851 inmates who arrived at SCCC during this time period, all of them received the PREA education within 30 days except 6 (99%). Most of the inmates received it within the first week of arrival.

During the offender interviews and while touring the facility, the audit team could not find any offenders that did not know the PREA policy and how to report it. The offenders all knew that they had a right to be free from sexual abuse and sexual harassment and that they could not be punished for reporting it. Every housing unit and program area had PREA posters in English and Spanish posted on the wall.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The first PREA investigative training offered by WADOC was in 2011. After the finalization of the PREA standards in 2012, a new class outline was created. Any PREA investigator that was already certified had to attend a booster course. This course included any relevant DOJ Policy changes, interviewing techniques and report writing. According to Policy 490.800, PREA Prevention and Reporting, section X, J, states that the current training requires that all PREA Investigators be trained in:</p> <p>Crime scene management and investigation, including evidence collection in Prisons and Work Releases;</p>

Confidentially 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.

There are six different courses that cover the Investigator's training. All six of these courses were updated in 2023. A review of the lesson plan provided to the auditor demonstrates compliance with this standard. All of the required topics are covered in the 14 hour training required to become an investigator.

SCCC currently has 38 trained investigators on staff, including the superintendent. When there is PREA allegation received, and it has been determined to be handled administratively, the Superintendent assigns one of the certified investigators to conduct the investigation. When an investigator is assigned, consideration is made as to their normal duties or assignments so as to not create a conflict of interest. Five certificates with transcripts were provided with the pre-audit materials as proof of training. The transcripts show the date that the course was completed. WADOC Headquarters also keeps a tracking log of which staff have completed the investigations course. Five random training certificates were also reviewed by the audit team.

While interviewing the staff trained for PREA investigations, they were able to articulate the investigation process and their responsibility. The training that they attended prepares the investigator on how to conduct an investigation without compromising the integrity of the investigation. If at any time the investigation appears to reveal possible criminal activity, the investigation is suspended and the case is referred to the local law enforcement agency. Five training certificates were provided with the pre-audit materials.

All criminal investigations are referred to either the Grays Harbor County Sherrif's Office or the Washington State Police. An investigator for the Washington State Police and a detective for the Grays Harbor Sherrif's Office were interviewed for this audit. They both stated that his investigation team received training specific to investigating sexual assaults in a confined setting. The training that their staff

	<p>receive is provided by the State of Washington. All Washington State law enforcement agencies (Sheriff Department, Police Departments and State Police) were mandated by the Washington Legislature to require all staff assigned to investigate sex crimes to attend specialized training. This training includes sexual assault evidence, victimization and trauma response.</p> <p>A review of the investigation files reflect that the investigators are conducting investigations in compliance with the training that is provided. The reports are clear, well organized, complete and do not violate any codes of conduct.</p>
--	--

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>SCCC 115.35</p> <p>Policy 490.800, PREA Prevention and Reporting, section X, G, requires that Health Service employees/contract staff, with exception of medical records, clerical, pharmacy personnel, the Dietary Services Manager, and the Psychologist assigned exclusively to sex offender treatment program, will be trained in:</p> <p>Detecting and assessing signs of sexual misconduct;</p> <p>Responding effectively and professionally to sexual misconduct victims;</p> <p>Completing DOC 02-348 Fight/Assault Activity Review;</p> <p>Preserving physical evidence;</p> <p>Reporting sexual misconduct, and;</p> <p>Counseling and monitoring procedures.</p> <p>Additionally all of the contract medical staff must attend the same PREA training that all employees receive every year.</p> <p>A review of the lesson plan that was provided demonstrates compliance with this training requirement. According to the Performance Coordinator, the medical and mental health staff are required to attend this training every year. The documents</p>

that were provided support her statement.

The pre-audit documents provided by SCCC show that all but one of the medical/mental health staff/contractors have received the required specialized PREA training. Five medical training certificates were reviewed for this audit. While on site five more certificates were randomly requested and reviewed.

The audit team interviewed 2 random medical staff and 2 random mental health staff. All four staff explained the training that they received relative to PREA. All four staff knew the zero-tolerance policy and what their role is in the event of a PREA incident. They all knew their responsibility to report it and what the limits of confidentiality are.

Medical staff at SCCC do not conduct forensic exams. The victim and suspect are taken to Grays Harbor Hospital, Aberdeen or Providence St Peter's Hospital in Olympia, Washington whenever a PREA allegation is made where there is a chance of exchange of body fluids or other physical evidence. The forensic medical exams are conducted by a SAFE/SANE at that time.

115.41	Screening for risk of victimization and abusiveness
---------------	--

	Auditor Overall Determination: Meets Standard
--	--

	Auditor Discussion
--	---------------------------

	Policy 490.820, PREA Risk Assessments and Assignments, requires Classification Counselors and designated Work Release employees will complete a PREA Risk Assessment within 72 hours of arrival for all offenders arriving at any Department facility. Facilities will establish procedures to ensure compliance within 72 hours, even on weekends and holidays. This policy requires that a follow-up assessment be completed on each offender between 21 and 30 calendar days after the offender's arrival at the facility. Additional assessments will be completed within 10 days by the assigned Classification Counselor when additional information is received, or the offender discloses information, that suggests potential for victimization or predation.
--	--

	WADOC uses an objective screening program called Offender Management Network Information (OMNI) to screen all offenders for risk of victimization and abusiveness. The OMNI program has "yes" and "no" check boxes and data fields for the screening staff to enter data about each offender. Based on the data entered, the offender is rated on their potential for victimization or abusiveness. The following nine
--	--

questions are asked of the inmate/ or observed in person or in documentation;

First incarceration;

Age less than 25 years or over 65 years;

Male size and stature: Less than 5' 8" and/or less than 140 lbs;

Previous or current commitment for sex offence/crime with sexual motivation in which the victim was a child of 13 years or younger or an elderly person of 65 years or older;

Mental impairment-developmentally or intellectually disabled, mentally ill or physically disabled;

History of sexual abuse-victimization;

Victim of sexual assault in confinement;

Behavior characteristics or display of sexual orientation is a way that projects vulnerability;

And Offender perceives themselves as vulnerable.

Nine of the ten criteria listed in PREA 115.41 (d) are included for entry in OMNI. There is not a location to enter information on civil immigration statuses. SCCC does not house offenders solely for civil immigration processing. OMNI also includes field to enter information about prior acts of sexual abuse, violent offences, and history of prior institutional violence or sexual abuse. Offenders are not disciplined for refusing to respond to these questions. Only a limited classification of staff have access to this program and offenders do not have access.

A list of all 851 offenders received between September 1, 2024 and August 31, 2025, was provided with the pre-audit materials. All but 2 offenders were retained longer than 72 hours. Based on the tracking 6 of the offenders did not have their initial screening completed within the required 72 hours. That is a completion rate of about 99%. Of the 851 offenders received during that time period, 826 stayed at the facility for more than 30 days. Of the 826 offenders who required the 30 day follow-ups all but 7 were completed within the required time frames. This is a completion rate of almost 99%. Twelve examples of the initial intake PREA screening and twelve examples of the follow-up screening were provided with the pre-audit materials. All the initial screening documents that were provided with the pre-audit materials were completed within 72 hours. All the follow-up documents were completed within the required 30 days. 33 random offender files were reviewed during the on-site portion of the audit. All 33 had the initial screening completed within 72 hours and the follow-up screening completed within 30 days.

SCCC completes a new risk screening on offenders if staff observe issues that may indicate that the offender may be at risk or predatory. The facility also completes new risk screenings if the offender is the victim or suspect in a substantiated sexual abuse/assault or if the offender requests to be re-evaluated. Sixteen examples of the re-assessments were provided with the pre-audit materials. Twelve samples of "for Cause" screening samples were provided with the pre-audit materials.

PREA Risk Assessments are completed within a restricted component of the Offender Management Network Information (OMNI) system. Access to this system is restricted to the following:

Classification Counselors and Work Release Community Corrections Officers responsible for the completion of assessments.

Correctional Unit Supervisors, Community Corrections Supervisors, Correctional Program Managers, Associate Superintendents, Superintendents, and the Work Release Program Administrator responsible for override approval and ensuring assessments are completed as required in agency policy.

Staff as identified by the facility Superintendents and the Work Release Program Administrator responsible for oversight of risk assessment for offenders who do not have an assigned Classification Counselor or Community Corrections Officer generally due to a vacancy.

Identified Information Technology and PREA Unit staff responsible for system maintenance.

This system maintains all completed assessments along with the response / detail associated with related scoring. All access to this system outside of access automatically assigned by position, per above, must be reviewed and approved by the agency PREA Coordinator to ensure compliance with established restricted access parameters. It is noted that no such access requests were made during the audit documentation period.

The intake process was explained to the audit team by one of the housing unit counselors. The Classification counselor, for the housing unit, is responsible for asking the risk screening questions and entering the information into the OMNI system. When inmates arrive at SCCC, the housing unit counselor receives a list of inmates newly assigned to his unit. He makes sure to screen the inmate within 72 hours, however he typically does it the next day. The screening is conducted in the counselor's office to ensure confidentiality. If the counselor is absent from the institution, his supervisor assigns another counselor to complete the screening. On long weekends, when the counselors may be off work for more than 72 hours, the screening is conducted by a lieutenant.

	<p>Within 30 days of arrival, the caseworker re-interviews the inmate and completes the follow-up screening. The counselor stated that they receive a notice when an inmate has been at the facility for 21 days and that their follow-up screening is due. Some high risk inmates (i.e. developmentally disabled, victim likely, transgender, mental health concerns) are re-screened every six months or every year depending on their case factors. The PREA Compliance Specialist tracks all the screenings.</p> <p>All random and targeted offender interviewed told the audit team that they were asked the series of questions from the screening form on the day they arrived or the next day. Most of the offenders who had been here less than two years also stated that they remember being asked those questions again after being here “a couple of weeks”.</p> <p>Risk Assessment are updated as a result of substantiated sexual abuse investigation. The tracking log confirms that the facility does this.</p>
--	--

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WADOC requires each facility to utilize the data obtained from the OMNI program to place offenders in the proper housing, bed, work, education and program assignment ensuing separation of potential victims and potential predators. Each offender is evaluated on his or her own case factors to ensure their safety.</p> <p>WADOC Policy 300.380, Classification and Custody Facility Plan Review, requires that committee members will review each offender on the transfer manifest before s/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. Any concerns regarding work programs, treatment, education, evidence-based programs, or other activities presented after reviewing the offender’s PREA 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.</p> <p>Policy DOC 490.820, Prison Rape Elimination Act Risk Assessments and Assignments,</p>

section V and VI, speak to work assignment and housing assignment screening. Before placing the offender in a multi-person cell/room, employees responsible for making housing assignments will review the PREA Risk Assessment identifier to ensure the compatibility of cell/roommates. PREA Risk Assessment information will be reviewed when making job and programming assignments per DOC 300.380 Classification and Custody Facility Plan Review.

If a monitoring plan is needed due to an offender's increased potential to be sexually victimized or for predation, a monitoring plan will be included in the comment section of the Custody Facility Plan and in an OMNI PREA Monitoring Chrono. The monitoring plan are set up based on each individuals need to ensure their safety. Monitoring plans are not just used for PREA concerns. The WADOC uses monitoring plans on offenders who fall under other high-risk categories such as mental health concerns. Twenty examples of monitoring plans were included with the pre-audit materials.

According to the PCM, offenders are given bed assignments prior to arriving at SCCC. Offenders that are deemed at risk for potential victimization are not placed in the same cell as offenders who are deemed to be potential predators. Once the offender arrives, their case factors are reviewed again to ensure that offenders are not housed in unsafe situations. The risk factors are reviewed again when placing the offenders in a program assignment so as to avoid placing potential victims with potential predators. Twelve examples of housing assessments, and thirteen examples of job screenings were reviewed for this audit.

Per policy each transgender or intersex offender is reviewed for any threats to their safety. WADOC utilizes form DOC 02-384, Protocol for the Housing of Transgender and Intersex Offenders, to evaluate each transgender and intersex offender prior to housing. The DOC 02-384 is a thorough assessment of the offender's case factors, and these reviews take into account the offender's own view of their safety.

According to the WADOC PC, there have been several trans-women and trans-men housed in a facility that does not conform with their birth gender in the State of Washington since the initiation of the process. This was completed after considering all of their case factors, physical and mental health and the offender's request to be housed in a women's/men's facility for their safety.

Every six months each transgender and intersex offender is re-evaluated utilizing form DOC 02-385, Protocol for Housing Review for Transgender and Intersex Offenders. These reviews are a comprehensive assessment of the offender's safety concerns, including the offender's own perceived views of his or her safety. The DOC 02-385 is forwarded to the Gender Responsive Administrator for final approval. Five DOC 02-385s were included in the pre-audit material. All five transgender inmates

	<p>that were interviewed for this audit stated that they receive reviews about every six months. They all stated that they are asked about their perceived safety.</p> <p>WADOC memorandum, dated August 29, 2019, authored by the Assistant Secretary of Prisons, directs the Superintendents to ensure that LGBTI offenders are not grouped together in a facility based solely on this status. There are LGBTI inmates housed in every unit within SCCC. They are not housed in just one location. The physical design of the showers at SCCC allows every offender to shower separately.</p>
--	--

115.43	Protective Custody
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy 490.820, PREA Risk Assessment and Assignment, states that offenders, who score at potential risk for sexual victimization, may be placed in Administrative Segregation if necessary to separate potential victims from potential predators. This placement shall only occur if no alternative housing is available. In the rare case that the offender is in Administrative Segregation for more than 30 days, a review will be conducted every 30 days to determine continued placement. Offenders on this type of placement will have access to programming and job assignments to the extent possible. When unavailable, the reason and duration will be documented in the offender’s electronic file.</p> <p>SCCC has one building with four pods for restricted housing. Each pod has 24 single cell segregation cells. One of the pods is used to house inmates in the transportation process and is not considered restricted housing.</p> <p>According to the Assistant Superintendent, an inmate’s placement is approved by the Lieutenant. The Associate Superintendent reviews all placements. Within 72 hours the case manager meets with the inmate to discuss their placement. By day 14 the Facility Risk Management Team reviews the placement to make sure it is appropriate. The case is reviewed every 30 days by the Facility Risk Management Team.</p> <p>The staff at SCCC stated that if they had an inmate who could not safely be housed in any general population housing unit due to victimization concerns, they would be placed in the hospital until they could be transferred to an alternate facility (usually within 72 hours). Placement in the hospital would allow for additional program not available in restricted housing.</p>

	<p>According to a memorandum dated October 24, 2025, authored by the Superintendent, SCCC has not had any offenders placed in involuntary segregation because of risk of victimization for more than 24 hours. All of the staff interviewed about this standard claimed that they do not know of a case where an inmate was placed in restricted housing because they were prone to victimization or a victim of sexual abuse.</p> <p>At the time of the on-site portion of the audit, there were no inmates in segregation based on potential victim concerns. None of the allegations reviewed by this auditor indicated that the victim was placed in restricted housing.</p>
--	--

115.51	Inmate reporting
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>WADOC provides several methods to report sexual abuse and sexual harassment, retaliations for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. The Offender’s handbook lists seven different options for offenders to report a PREA allegation. These options include:</p> <ul style="list-style-type: none"> Report verbally to a staff member, volunteer or contractor; Send a kite, written note or written statement to any staff; Send a KIOSK message; Call the PREA hotline toll free; Write the Department PREA Coordinator, State Attorney General or the Governor’s Office. Legal mail is an acceptable method for this purpose; Send an Offender Grievance; Send a report of Prison Rape Elimination Act Allegation form DOC 21-379 to the Colorado Department of Corrections. <p>All of these reporting options are addressed in Policy DOC 490.800, Prison Rape Elimination Act Prevention and Reporting, section XIII B. This information is provided to the offenders during orientation and in the handbook.</p>

Several of these methods of reporting allow the offender to remain anonymous.

When calling the headquarters' PREA Unit, offenders do not need to utilize their IPIN to identify the caller and the calls are not recorded by the facility. Additionally, if an offender chooses to report utilizing the DOC 21-379, they are not required to give their name. The telephones were tested by the audit team. We were able to place a call to the hot line without using any identifiers. According to the policy, mail addressed to the State PREA Coordinator, or a PREA Auditor is treated like legal mail and not opened or read by staff at SCCC. This auditor received two letters from inmates during this audit.

WADOC has a contract in place with the Colorado Department of Corrections to serve as each other's external reporting entity. If the offender chooses to report to an agency outside of the State of Washington, they complete the DOC 21-379 form. This form is pre-addressed to the Colorado Department of Corrections PREA Unit. Once Colorado receives the form they would then inform Washington State PREA Coordinator, providing enough information so that the allegation can be investigated without violating confidentiality. This contract with Colorado State was initiated in 2014 and, with the amendment, is valid until February 28, 2026. According to the PREA Coordinator for the Colorado Department of Corrections, they have received 145 PREA allegations from inmates in Washington in the past year. Fourteen of these came from SCCC.

The audit team reviewed the various forms of reporting. The information on how to report is posted in different locations, in various formats throughout SCCC. The PREA hotline and the Office of Crime Victim Advocacy are posted on the wall above the offender telephones and in all housing units and program areas. The phone lines were tested by the audit team. The phone numbers worked and did not require identification of funds to make the calls. All the housing units had pre-addressed envelopes for the Colorado PREA Unit in Colorado Springs, with complaint forms.

When the offenders were interviewed, they all knew of at least three ways to report a PREA allegation. When asked if they thought that staff would take a report seriously and follow through all except two said "yes".

Policy DOC 490.850, Prison Rape Elimination Act Response, section I. A., states 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. Staff are required to report any knowledge, suspicion, or information received, including anonymous and third-party reports, regarding an allegation or incident of sexual misconduct immediately and confidentially to the Shift Commander or the Appointing Authority. Staff may report any PREA allegation directly to the Duty Officer or the Appointing Authority if they felt that it is a conflict of interest to report to their supervisor.

Policy DOC 490.850, Prison Rape Elimination Act Response, section I. E., states “Staff receiving any information regarding an allegation or incident of sexual misconduct must deliver the information confidentially and immediately per the PREA Reporting Process”. The PREA training syllabus explains to staff how to report a PREA allegation confidentially. Staff are also issued a PREA pamphlet that provides different resources to report a PREA confidentially.

While interviewing staff each employee stated that if they received information about a PREA incident, they would report it immediately to the shift Commander or the PCM. They would not share the information with any other staff, noting that PREA reports are confidential.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>PREA standard 115.52(a) states that an agency is exempt from this standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse. Memorandum dated December 20, 2016, signed by the Secretary of Washington Department of Corrections, states that WADOC does not process PREA-related allegations through the offender grievance process.</p> <p>If an offender files a grievance alleging sexual misconduct, a copy of the grievance is forwarded to the WADOC PREA unit. If it is determined that the issue of the grievance is not related to PREA, the offender may pursue the issue through the grievance process. If the issue has been determined to be PREA related, the case is referred to the Appointing Authority who assigns the case to an investigator. The investigation is pursued like any other PREA investigation. This process requires that the allegation is investigated by a PREA trained investigator and that the Appointing Authority makes the final decision. Additionally, since PREA allegations are removed from the grievance process, offenders do not have to exhaust administrative remedies before attempting to resolve the issue through litigation. This information is available to the</p>

	<p>offenders in the grievance policy handbook and the offender handbook.</p> <p>There are no time limits to reporting an allegation of sexual misconduct. Since the PREA unit forwards the grievance to the appointing authority to initiate an investigation, the grievance is not submitted to the staff member who is the subject of the complaint.</p> <p>A review of the PREA investigation log revealed that there were several allegations through the grievance process during this audit period.</p> <p>Even though WADOC is exempt from this standard because it does not process PREA allegations as grievances, the policies and practices that are in place comply with this standard.</p> <p>The Resolution Coordinator explained the process of screening out PREA grievance to the audit team. Grievance forms are available in each housing unit. An offender can fill out the form and hand it to staff or place it in the grievance box. The box is checked and emptied twice a week. He reviews all grievances. If the grievance contains a PREA allegation, or the Resolution Coordinator is unsure if it is a PREA allegation, he forwards it to the Shift Commander and PCM. If the PREA Unit in Headquarters determines that it is a PREA allegation, the Superintendent is notified, and investigation is initiated. The inmate is informed the grievance was removed from the grievance process and it will be investigated as a PREA. If the PREA Unit deems that the grievance is not reporting a PREA allegation, it is returned to the Resolution Coordinator to handle through the normal grievance channel.</p> <p>The Resolution Coordinator does not require the offender to resolve the issue with the staff member that the complaint is about, nor would he forward the complaint to that staff member.</p>
--	--

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	WADOC has entered a contract with the Washington State Office of Crime Victims Advocacy (OCVA). A contract extension was recently signed, extending the contract

until June 30, 2027. When an Offender wishes to speak to a victim advocate, the offender calls the toll free number and the OCVA directs the call to the Rape Crisis Center designated to work with that particular facility. SCCC is partnered with Beyond Survival, Aberdeen, Washington. After the initial consultation, Beyond Survival will work with the offender so that the victim advocate will be available at a pre-determined time to receive follow-up phone calls from the offender. If needed, arrangements would be made with the facility to provide on-site support for the offender. Offenders are also provided a list of community rape crisis centers throughout the State of Washington in the event that they wish to seek these services when they are released from WADOC. All of the information is provided in both English and Spanish.

The information on how to contact the OCVA is provided to the offenders during the offender orientation video, on posters throughout the facility and via pamphlets. The OCVA pamphlet states that the calls are toll free, offenders are not required to use their personal identification number to make the call and these calls are not recorded. This information is available in both English and Spanish.

The Director of Beyond Survival was interviewed telephonically. She stated the advocates are required to attend a 30-hour training course upon initially being hired and then take 12 hours of annual training each year thereafter. She stated that confidentiality is maintained per law. The only time that confidentiality would be breached is if the victim signs a release, there is a court order ordering its release or there is an imminent risk of harm to self or others. Currently Beyond Survival has four victim advocates, either full-time or part-time that assist in helping victims of sexual assault.

SCCC meets annually with Beyond Survival to discuss concerns and issues that might arise during the year. The minutes from the annual meeting that occurred between Beyond Survival and SCCC were provided with the pre-audit materials. This meeting took place on February 21, 2025. According to the Director, advocates respond to the facility about twice a month and receive phone calls about twice a week. She stated that if an advocate requests to speak with an inmate, SCCC staff grant those requests. According to the Shift Commander, victims of sexual abuse are offered a victim advocate, the victim does not have to request it. Each of the investigators that were interviewed stated that they allow a victim advocate to attend the victim's investigative interview.

The information about the OCVA is posted throughout the facility and provided in the offender's handbooks. Some of the offenders were not aware of the program. When asked further about the posters, a couple of them admitted that they never paid attention, while others stated that if they needed it, they were sure they could find it.

115.54 Third-party reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy DOC 490.800, PREA Prevention and Reporting, assigns responsibility to the PREA Coordinator for ensuring that the WADOC website is current with information on how friends and families can report sexual abuse and sexual harassment. The PCM is responsible to ensure that posters are viewable by visitors and the public providing information on how to report an allegation of sexual abuse or sexual harassment. WADOC provides information on its web-site on how family, friends or visitors can report sexual abuse or sexual harassment on behalf of an offender. The information is also posted in the visiting room. Staff are required to forward any allegation of sexual abuse and sexual harassment to their supervisor upon receiving the information.

Policy DOC 490.850, Prison Rape Elimination Act Response, section I. A., states 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. Staff are required to report any knowledge, suspicion, or information received, including anonymous and third party reports, regarding an allegation or incident of sexual misconduct immediately and confidentially to their supervisor.

Inmate Orientation Handbook, page 11, tells the different methods that a PREA can be reported. It states that Inmates, visitors, inmate family members/associates and other community members can report any allegations of sexual misconduct, retaliation by inmates or staff for reporting sexual misconduct, and staff actions or neglect that may have contributed to an incident of sexual misconduct.

During the audit tour, posters and visitor handbooks relative to PREA were visible in the visiting room. Additionally the WADOC website has information on how to report a PREA allegation on behalf of an offender.

Several of the offenders interviewed knew that they could report a PREA to a third party. The shift commander stated that third party reports are forwarded to the PREA Unit the same as any other allegation, regardless of how it is received. The investigator stated that they would treat a third party report as any other allegation. All of the staff interviewed stated that anyone can report a PREA allegation for another individual. This includes other inmates.

115.61	Staff and agency reporting duties
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 340 1469 584">Policy DOC 490.850, PREA Response, section I, requires that staff immediately report any knowledge, suspicion, or information received, including anonymous and third-party reports, regarding an allegation of or incident of sexual misconduct. This also includes related retaliation and knowledge of staff actions or neglect that may have contributed to an incident. All staff receive this information during their annual training. Contractors and volunteers also receive this training via the PREA brochure.</p> <p data-bbox="256 694 1449 893">Policy DOC 490.850, PREA Response, states “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 decisions. Staff who breach confidentiality may be subject to corrective/disciplinary action”.</p> <p data-bbox="256 1003 1477 1202">DOC 490.850 requires that medical or mental health staff must disclose the limits to confidentiality to an offender who displays signs of sexual misconduct or discloses sexual misconduct that occurred in a correctional setting. The offenders are informed of this during reception center processing and the information is posted in the Health Services area.</p> <p data-bbox="256 1312 1465 1682">Policy DOC 350.550, Reporting Abuse and Neglect/ Mandatory Reporting, states that The Department will report suspected child abuse/neglect and incidents of abuse, abandonment, financial exploitation, or neglect involving vulnerable adults to the appropriate authority. Information regarding abuse and neglect must be immediately reported to the appropriate authority. The appropriate authority is provided as the Washington State Department of Children, Youths and Families, the Adult Protective Services or local law enforcement. This includes sexual abuse or sexual harassment of a juvenile offender or an offender who has been deemed by the Department to be a vulnerable adult.</p> <p data-bbox="256 1792 1437 2036">WADOC has a mutual aid agreement with Adult Protective Services to address the needs of a vulnerable adult who is a victim of sexual abuse while in custody. The mutual aid agreement states that WADOC is responsible for investigating all sexual abuse allegations of vulnerable adults in custody as well as providing medical and mental health needs for the victim. Adult protective Services is a consultation resource to provide direction on proper care for the victim.</p>

SCCC has not had any juveniles housed at their facility during this audit period. SCCC had 24 offenders that are classified as vulnerable adults housed at the facility during on-site portion of the audit.

All allegations of sexual abuse or sexual harassment at SCCC are reported to the Shift Commander. The Shift Commander enters the information into the Incident Management Reporting System (IMRS). Once in IMRS an email is forwarded to the PREA Coordinator. The PREA Unit in headquarters reviews the allegation to determine if it falls under the definition of PREA. If it does, a request for investigation is assigned to the appropriate Appointing Authority. The Appointing Authority then assigns the investigation to a trained PREA investigator at the facility.

Every staff member that the audit team interviewed knew the importance of reporting any PREA allegation to the Shift Commander. All of them said they would report it immediately. All the staff interviewed also stated that they would report if staff actions or neglect resulted in a sexual assault. Additionally, they stated that they would report any retaliation because of reporting a PREA that they witnessed. When the issue of maintaining confidentiality was discussed all the staff stated that they would not share the information with anyone other than staff who had a need to know.

The medical staff interviewed stated that they disclose the limits of confidentiality to offenders during exams or sessions. They understood what the law requires them to report as “mandatory reporters” and when they were required to obtain informed consent. The limits to confidentiality are signed by the inmate at the initiation of services.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy DOC 490.850, PREA Response, section V, states that upon receipt of an allegation of offender-on -offender sexual assault, the Appointing Authority/Shift Commander/CCS will immediately direct employees/contract staff to separate the accused from the alleged victim and witnesses. The accused may be placed in restrictive housing. Placement decisions will be based on the seriousness of the

allegation. Least restrictive housing should be considered. In the event that the allegation involves staff sexual misconduct, the one-on-one contact between the accused and alleged victim is prohibited while the allegation is investigated. The Appointing Authority can redirect or modify the duties of the staff member during the investigation. If the accused is a contract staff or volunteer, the Appointing Authority may restrict their entrance into the institution until the conclusion of the investigation.

WADOC also has a policy to monitor all offenders that are deemed victim likely or predator likely during the PREA Risk Assessment Screening or offenders identifies as transgender or intersex. Policy DOC 490.820, Prison Rape Elimination Act Risk Assessments and Assignments, directs staff to create a monitoring plan and meet with the offender on a regular basis to ensure that they are not experiencing any sexually motivated interactions. Additionally, the housing unit staff are notified to be aware of any sudden change in behavior, and the offender is encouraged to meet regularly with mental health. The monitoring plan is documented in the offender's electronic file and reviewed during Facility Risk Management Team Meetings. Victim likely, transgender and intersex offenders are not the only offenders that are monitored. If staff observe that an offender has difficulty adjusting to incarceration, or has mental health or medical concerns, these offenders would also be monitored. With such a diverse population being monitored, the victim likely offenders are not singled out. All of the PREA allegations that were reviewed for this audit included documentation showing that the alleged victim was immediately provided protection from the suspect.

The Superintendent and the Shift Commander both explained to the audit team the steps that the facility takes when they receive information that an offender is in imminent risk of sexual assault. They would separate the potential victim from the potential predator (if known) by completing a housing assignment change. They would interview the potential victim regarding their own perceived safety, and they would investigate the claim. Every staff member interviewed stated that, if they received information that an offender was at imminent risk of sexual abuse, they would separate the offender and notify shift command.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy DOC 490.850, PREA Response, section III, D, requires that the Appointing Authority notify the appropriate Appointing Authority or facility administrator within 72 hours of receipt of an allegation when an alleged incident occurred within another

	<p>Department or another jurisdiction or involves a staff who reports through another Appointing Authority.</p> <p>SCCC reported ten cases during the audit period when offenders reported a sexual assault to SCCC staff that allegedly occurred at another facility. Documentation that the facility attempted to contact the other facility/agency was provided during the audit. The Superintendent of SCCC is the one initiating contact with the manager of the other facility. According to the reviewed documentation all of the notifications were completed within 72 hours.</p> <p>Any allegations received by SCCC from another facility are handled in the same manner as any PREA allegation. According to the investigation log, they had six PREA allegations reported at another facility during this audit period. This allegation was investigated.</p> <p>During the interview with the Superintendent, she stated that when she is advised that an allegation occurred at a different facility/agency he sends an e-mail to the head of that facility providing as much information as possible about the incident. The correspondence is conducted via e-mail so that it can easily be tracked and monitored.</p>
--	---

115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy DOC 490.850, PREA Response, address how each facility shall respond to an allegation of sexual assault. Each institution is required to establish a response team consisting of a sergeant, investigator, medical staff, mental health staff and other classifications as necessary. This policy includes a checklist for the Shift Commander to follow. This checklist includes:</p> <p>Separating the victim from the suspect;</p> <p>Preserving the crime scene for evidence and;</p> <p>Requesting the victim and ensure the accused do not destroy any evidence by washing, toileting, changing clothes, eating, drinking, or smoking.</p> <p>The PREA Response plan is maintained in the Shift Office. The plan was reviewed</p>

during the on-site portion of the audit. The plan is very detailed and includes check lists to make sure that steps are not missed. The contact numbers for the various outside agencies as well as relevant departmental staff are included in this plan. The plan included how to properly preserve the crime scene, collect usable physical evidence, how to transfer the victim to the SAFE/SANE nurse for the forensic exam and who to contact for proper reporting and response.

The PREA training that all staff, volunteers and contractors receive, identifies any staff, volunteer or contractor, whoever receives the information first, as first responders. As a first responder, these employees are trained to take steps to isolate and contain the situation, secure the scene, separate the alleged victim from the suspect, remove uninvolved offenders and relay observations.

According to the investigation case log, SCCC had three allegations that were reported within a time period that allowed the collection of physical evidence at the crime scene. A review of the investigations indicates that the response policies were followed.

During an interview with the shift commander, he was able to tell this auditor, step by step, how SCCC responds to a PREA incident. All of the staff, volunteers, and contractors knew to separate the suspect and victim, preserve the crime scene and other physical evidence, seek medical aid (if needed) and report the incident. Most of the staff stated that they would not let the suspects or victims destroy usable evidence by showering, brushing their teeth, or going to the bathroom. However when asked to what extent they would prevent the victim from doing this, they stated that if the victim insisted on performing any of these functions, the staff said they would probably ask the victim not to do any of these things and explain why.

Most offenders interviewed stated that they feel very comfortable reporting a PREA incident to staff and they believe staff would take the allegation seriously and respond appropriately.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy DOC 490.850, PREA Response, address how each facility shall respond to an allegation of sexual assault. Each institution is required to establish a response team

	<p>consisting of a sergeant, investigator, medical staff, mental health staff and other classifications as necessary. This policy includes two checklists for the Shift Commander to follow (DOC 02-007 and DOC 02-011). The Sexual Assault Response Plan is maintained in all four Shift Offices at the complex.</p> <p>As mentioned in Standard 115.64, the shift commander was able to tell this auditor, step by step, how SCCC responds to a PREA incident. In addition to the policy and check list, the Shift Commander has contact information for managers who play a more significant role in the response to PREA so that they can be reached at any time of day. All of the staff, volunteers, and contractors knew what their specific role was when responding to a PREA incident.</p> <p>According to the first responder staff that were interviewed, the first staff to receive the information or come upon the scene notifies the Shift Commander. That staff member separates the suspect and victim and waits for back-up staff. The crime scene is secured and, if it is a criminal offence, the Grays Harbor County Sherrif's Department is called to process the scene. If the Sherrif Department is unavailable trained WADOC staff process the crime scene. The victim and suspect are taken to the clinic for emergency medical care. The victim is transported to Grays Harbor Community Hospital for a forensic exam, if appropriate. If the suspect also requires a forensic exam, s/he is transferred in a separate vehicle from the victim. Upon return to the facility, medical staff review the doctor's notes and provide appropriate treatment. This includes STI treatments, as prescribed. The victim is then evaluated by a mental health clinician. At no time during the process are the victim and suspect allowed to be within sight or sound of each other. This entire process is monitored by the Superintendent or the on call administrator.</p>
--	--

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>A review of the Collective Bargaining Agreements provide to this auditor demonstrate compliance with this standard. Management does have the right to separate the offender from a staff member who is the subject of an investigation either by temporarily reassigning the employee, redirecting the employee or restricting that employee from grounds during the investigation.</p> <p>All of the staff employed Stafford Creek Corrections Center are represented by the</p>

	<p>Teamsters Union. Section 8.4 of the Teamsters Union Contract states, “An employee accused of misconduct will not be removed from his/her existing work assignment unless there is a safety/security concern, including security issues due to any allegation that involves a conflict between staff.”</p> <p>During the audit interview, the Superintendent explained when and how employees may be removed from specific posts or prohibited from coming on grounds. Depending on the nature of the allegation, an employee will be moved from their post to separate the alleged victim from the alleged suspect during the investigation. If there appears to be retaliation or the allegation is more serious, the employee may be restricted from grounds until the completion of the investigation.</p>
--	--

115.67	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy 490.860, PREA Investigation, section II, explains the WADOC retaliation prevention policy. The policy prohibits retaliation against any individual for opposing or reporting sexual misconduct or participating in an investigation. Individuals may be subject to disciplinary actions if found to have engaged in retaliation, failed to report such activities, or failed to take immediate steps to prevent retaliation. Staff and offenders who cooperate with an investigation will report all concerns regarding retaliation to the Appointing Authority. The Appointing Authority will take appropriate measures to address the concerns</p> <p>The Appointing Authority at the facility where the victim is housed will notify the PCM that monitoring is required. The PCM will ensure alleged victims and offender reporters are monitored and meet with at least monthly. Retaliation against employees is monitored by the Human Resource Manager at the direction of the Appointing Authority. While monitoring, the PCM looks for housing unit/job changes, negative performance reviews or disciplinary reports. The monitoring is conducted for at least 90 days unless the Appointing Authority determines that the monitoring period should be extended.</p> <p>At SCCC monitoring for inmates is assigned to the PREA Compliance Specialist, Correctional Program Manager or the Correctional Unit Supervisor in the housing unit. The monitoring staff interviews the offender and documents the monitoring of offenders on a form DOC 03-503, PREA Monthly Monitoring Report, and returns it to the PCM. According to the documents that were provided, the Human Resource Staff</p>

or the PCM monitors the reporting staff for retaliation and then submits form DOC 03-503 to PCM. Monitoring of Volunteer and Contractors is conducted by the PCM or the PCS. Ten monitoring reports were provided to this auditor. Seven of the ten discontinued the monitoring prior to 90 days. Three of the ten did not start the monitoring within 30 days of discovery.

The PCM requires the counselor to interview the offender being monitored every 30 days over a period of 90 days. If retaliation is suspected, or circumstances dictate, the monitoring period can be extended. The PCM maintains a spread sheet that contains the dates that the counselor interviewed the offender and the date and results of the investigation.

The lack of monitoring for at least 90 days was discussed with the PC, PCM and Superintendent. They all agreed that the method of monitoring needs to improve. During the corrective action period, the auditor reviewed the investigation logs to determine which inmates required monitoring and what the earliest date the monitoring could be concluded. All the retaliation monitoring documents were reviewed during the corrective action period. By May 12, 2026, SCCC successfully demonstrated compliance with the retaliation monitoring requirements of standard 115.67 for a period of three consecutive months.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy 490.820, PREA Risk Assessment and Assignment, states that offenders, who score at potential risk for sexual victimization, may be placed in Administrative Segregation if necessary to separate potential victims from potential predators. This placement shall only occur if no alternative housing is available. In the rare case that the offender is in Administrative Segregation for more than 30 days, a review will be have access to programming and job assignments to the extent possible. When unavailable, the reason and duration will be documented in the offender’s electronic file. This is the same policy that CCCC uses for placement of offenders who alleged to have suffered sexual abuse.</p> <p>SCCC has one building with four pods for restricted housing. Each pod has 24 single cell segregation cells. One of the pods is used to house inmates in the transportation process and is not considered restricted housing.</p>

According to the Assistant Superintendent, an inmate's placement is approved by the Lieutenant. The Associate Superintendent reviews all placements. Within 72 hours the case manager meets with the inmate to discuss their placement. By day 14 the Facility Risk Management Team reviews the placement to make sure it is appropriate. The case is reviewed every 30 days by the Facility Risk Management Team.

The staff at SCCC stated that if they had an inmate who could not safely be housed in any general population housing unit due to victimization concerns, they would be placed in the hospital until they could be transferred to an alternate facility (usually within 72 hours). Placement in the hospital would allow for additional program not available in restricted housing.

According to a memorandum, signed by the Superintendent on October 24, 2025, there have not been any inmates placed in segregation, involuntarily, as a result of being a victim of a sexual assault. While reviewing the PREA allegations, there were no indicators that any offenders were involuntarily placed in segregation as a result of being a victim of a sexual assault. At the time of the on-site portion of the audit there were no inmates in segregation solely based on them being a victim of a PREA.

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy DOC 490.860, PREA Investigations, section I, requires that the Department will thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving offenders under the jurisdiction or authority of the Department. Allegations may be referred to law enforcement agencies for criminal investigation.</p> <p>When a staff member, contractor or volunteer receives information that a PREA violation has occurred they are required to report the incident to the Shift Commander or the Appointing Authority immediately. The Shift Commander completes a PREA report in the Incident Management Reporting System (IMRS). The PREA unit in Headquarters monitors the IMRS. They review all PREA allegations to determine if it meets the prima fascia of PREA. If it is determined to be a PREA case, the case is assigned a log number and returned to the Appointing Authority to assign an investigator. If the allegation is criminal in nature, the Grays Harbor County Sherriff's Office is contacted, and they (or the Washington State Police) conduct the</p>

criminal investigation.

Staff investigating PREA allegations will be trained in: Crime scene management, including evidence collection; Confidentiality; Miranda and Garrity warnings; Crisis intervention; Investigating sexual misconduct; Techniques for interviewing victims of sexual misconduct and; Criteria and evidence required to substantiate administrative action or prosecution referral. Training records were reviewed during the tour of the facility. SCCC has 38 local investigators that have completed all of the required courses to conduct PREA investigation.

Investigators are trained to follow the evidence protocol as called out by Policy DOC 420.375, Contraband and Evidence Handling. In general, the investigators followed the policy for collection of evidence. The investigators saved and reviewed all relevant electronic surveillance available, and any physical evidence. In every case the investigator interviewed the victim and the suspect, and witness. The reports included file reviews of the alleged suspect. During the interviews the investigators were able to articulate the evidentiary process that they follow while conducting an investigation. Most of the cases reviewed were based on circumstantial evidence, however if there was any physical evidence to collect it was done according to policy.

Policy requires that the potential criminal cases be referred to the Grays Harbor County Sheriff's Office (GHCSO) or the Washington State Police. Once the case is referred to the local law enforcement agency, that agency determines if the case will be referred for prosecution. WADOC investigators only conduct compelled interviews if the Prosecuting Attorney's Office has declined prosecution. According to the documentation provided, there were seven cases referred to GHCSO department in the past calendar year. Four cases were declined and three were accepted for criminal investigation.

WADOC policy requires that investigations are completed thoroughly even if the victim or suspect (offender or staff member) is no longer with WADOC. The GHCSO investigator stated that the investigation will be completed even if the offender is no longer under the jurisdiction of the Department or the accused staff is no longer employed by the Department. The Superintendent confirmed that this is the practice at SCCC. Three of the cases reviewed involved a staff member or contractor who had separated from the department during the investigation. The facility continued the investigation and reached a conclusion.

WADOC policy does not allow the use of a polygraph on alleged victims, reporters or

witnesses in PREA investigations. Both the Superintendent and the investigators informed the audit team that SCCC, GHCSO or Washington State Police do not use any form of polygraph or voice stress analysis on victims, reporters or witnesses during interviews. While reviewing the cases, the audit team did not see any indication that one individual's testimony was given more credibility than another. All the staff involved in the investigation process, which were interviewed, claimed that each individual's testimony is weighed on its own merit.

The investigations included all physical evidence, testimony, and investigative facts and findings. All administrative investigations are forwarded to the Appointing Authority who will decide if the staff actions of failure to act contributed to the abuse. The Appointing Authority then makes a determination of unfounded, unsubstantiated or substantiated. Once a case is closed all cases are discussed in the PREA Committee to evaluate policy, procedure, staff actions, investigative practices and other prevention and response concerns.

At the time of the on-site portion of the audit there were 95 allegations during the past 12 months. 31 were staff-on-inmate sexual abuse, 17 were inmate-on-inmate sexual assault, 13 were staff-on-inmate sexual harassment and 22 was inmate-on-inmate sexual harassment. The remainder of the cases were either retaliation, other staff misconduct or inmate abusive sexual contact. 19 of the allegations have not completed the investigation process at the time of the on-site portion of the audit. Ten were determined to be unfounded, 41 were unsubstantiated, and nine were substantiated.

Office of the Secretary of State, Washington State Achieves, Record Retention Schedule requires all PREA investigation documents be retained 50 years after the close of the investigation. A memorandum dated March 29, 2017, signed by the Deputy Secretary WADOC, states that "If a review of the investigatory records reveals that the accused individual does not meet the 5-year requirement outlined above (PREA standard 115.71 i), the records will be maintained until this requirement is met, even if it exceeds the 50-year retention time frame."

Eight of the PREA allegation investigations were included in the PAQ. The auditor reviewed all eight of them. Additionally, the auditor requested and reviewed an additional twelve PREA investigations. All twenty of the investigations that the auditor reviewed appeared to be in compliance with the PREA policy.

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy DOC 490.860, PREA Investigation, requires the Appointing Authority to determine if the allegation is substantiated, unsubstantiated, or unfounded. Substantiation is based on a preponderance of evidence.</p> <p>The training that all Appointing Authorities attend teaches that no standard higher than preponderance of the evidence is to be used in determining whether allegations are substantiation. The training also teaches that a case is unfounded if the investigation reveals that it did not occur. The Appointing Authority is the individual charged with determining the conclusion of the investigation. During her interview the Superintendent stated that she uses the standard of preponderance of evidence to determine if a case is substantiated.</p> <p>The conclusions of the investigations were consistent with policy and training. Ten cases were determined to be unfounded, 41 cases were unsubstantiated, and nine were substantiated. This auditor agrees with these findings. The unsubstantiated cases did not have any evidence that supported the allegation; however, it could not be proven false. The unfounded cases were proven to be false.</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy DOC 490.860, PREA Investigations, requires that the alleged victim will be informed in person, in a confidential manner, of the results of the investigation (substantiated, unsubstantiated or unfounded). If the allegation was investigated by the local law enforcement agency, the results of the investigation will be retained with the PREA case file and the offender will be notified of these results. In the event that the case was substantiated or unsubstantiated, and involves a staff member, the alleged victim will be notified if the accused staff member is no longer assigned to the unit, works at the same facility or the Department learns that the accused has been indicted on, or convicted of, staff sexual misconduct within the facility. In the event that the case was substantiated or unsubstantiated, and the suspect is an offender, the alleged victim will be notified if the Department learns that the accused has been indicted on, or convicted of, sexual misconduct within the facility.</p> <p>Once the Superintendent determines the result of the investigation, she notifies the</p>

	<p>Supervising Counselor who then informs the offender. This is documented in the investigative file. Each of the investigations reviewed during the audit contained proof that the offender was notified of the outcome of the investigation. During the interviews with inmates who had alleged a sexual assault, they stated that they were informed of the outcome of the investigation.</p>
--	--

115.76	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Washington State Human Resources policies state that the Secretary shall immediately institute proceedings to terminate the employment of any persons who is found to have had sexual intercourse or sexual contact with an inmate or pled guilty or convicted on a sex crime where the victim was an inmate.</p> <p>Per policy 490.800, Prison Rape Elimination Act Preventing and Reporting, 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. In the event that the employee resigns prior to the completion of the investigation, the investigation is continued. If the nature of the staff sexual misconduct is criminal in nature, the case is forwarded to the local law enforcement agency to conduct the investigation.</p> <p>During the interview with the Superintendent, she stated that, if an employee were found to have committed sexual misconduct on an inmate, she would immediately initiate termination proceedings on that employee. SCCC has had one case substantiated against an employee for sexual harassment/sexual abuse during this audit period. The employee resigned while under investigation. The case is being pursued by the Grays Harbor County Sherriff's Office.</p>

115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy DOC 490.860, PREA Investigations, requires any substantiated PREA allegation that is criminal in nature be referred to law enforcement and any applicable licensing</p>

	<p>board. Contract staff and volunteers who are found to have committed staff sexual misconduct will be terminated from service and prohibited from contact with offenders. For any other violations of Departmental PREA policies, appropriate actions will be taken.</p> <p>The Superintendent confirmed that she would not allow a contractor or volunteer on ground if they had committed a sexual assault. She would also place a gate stop on the individual and report the volunteer/contractor to their organization/employer.</p> <p>During this audit period there were two substantiated investigations involving volunteers or contractors at SCCC. One was for sexual abuse; the other was for sexual harassment. In both cases a gate stop was implemented, the contractor was not permitted on grounds and the agency that they worked for was notified.</p>
--	---

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy DOC 460.000, Disciplinary Process for Prisons, sets the due process requirements for offender disciplinary hearings. This includes a right to have copies of all non-confidential documents, a notice of when the hearing will be held, a right to call witnesses, a right to be present at the hearing, a right to written results of the hearing and a right to appeal. These are the same policies for all disciplinary hearings including offender-on-offender sexual abuse.</p> <p>In the event that the offender is found guilty of a disciplinary violation, the Disciplinary Hearing Officer (DHO) will determine the appropriate sanctions based on the Departmental guidelines. When determining sanctions, the DHO may consider factors in mitigation or aggravations based on the offender’s mental health status, prior conduct or overall prison adjustment. An offender that is found guilty of committing sexual abuse/assault/harassment against an offender may be sanctioned to a multidisciplinary review for consideration of available interventions (e.g. Mental Health Therapy, Sex Offender Treatment Program, and Anger Management).</p> <p>Offenders can be disciplined for filing a false PREA allegation; however, there must be proof of malicious intent. Offenders are subject to disciplinary action for consensual sexual behavior. WADOC does not consider consensual sexual behavior between offenders a PREA incident.</p>

	<p>According to the Superintendent of SCCC the offender disciplinary process is applied equally to all offenders. Each specific charge has a range of sanctions that can be imposed. The charge can be modified if the evidence implies that the misconduct was less serious than the original charge. Factors of mitigation and aggravation are considered when determining the level of sanction that are imposed.</p> <p>SCCC had five substantiated PREA investigations involving inmate-on-inmate behavior during this audit period. All five received appropriate disciplinary action.</p>
--	--

115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Policy DOC 490.820, PREA Risk Assessment and Assignment, requires that, at the time of the PREA Risk Assessment, the Classification Counselor complete a referral for mental health services if the screening indicates that the offender has perpetrated sexual abuse and/or has experienced prior sexual victimization, whether in an institution or in the community. The referring employee will ask the offender if they wish to meet with a mental health provider. Policy DOC 630.500, Mental Health Services, require that offenders be seen within 14 days of referral.</p> <p>When an offender arrives at SCCC, they are screened for sexual victimization and sexual predatory concerns. If, during the screening, the offender indicates that they have experienced prior sexual victimization, or previously perpetrated sexual abuse, the staff conducting the screening completes a Mental Health Referral form (DOC 13-509). If the offender declines the offer to meet with a Mental Health Clinician, this refusal is documented and the DOC 13-509 is placed in the offender's file. If the offender wishes to see a Mental Health Clinician, the DOC 13-509 is forwarded to the Mental Health Department. An appointment with Mental Health is scheduled to meet with the offender within 14 days of arrival at SCCC.</p> <p>According to the tracking document provided with the PAQ, there were 562 inmates that stated that they had either been a victim of sexual abuse or perpetrated sexual abuse during their initial screening. 59 of these inmates indicated that they wished to see MH. According to the tracking, only 38 of the 59 were seen within 14 days. This is a 64% compliance rate.</p> <p>Twenty-one random 13-509s, where an inmate requested to see MH were reviewed</p>

for this audit. 5 of the 21 were not seen within 14 days. The average length of time to be seen by mental health, when the inmate is seen within 14 days, is just over 7 days.

According to the Mental Health staff interviewed, SCCC offers therapy or counseling designed to address the underlying reasons for sexual abuse to sexual predators.

When it is discovered that an inmate has committed a sexual offence, the inmate is offered therapy. Ten of the twenty-one 13-509s that the auditor reviewed were inmates with documented sexual predatory behavior requesting to see MH. The inmate is not disciplined if they do not attend this type of counseling.

WADOC Health Records Guidelines require that confidentiality be maintained by Health Care staff. The only information that shall be disclosed is the information determined to be essential for management of the offender’s health and safety. Medical and Mental Health providers are required to gain informed consent prior to reporting any sexual abuse that occurred outside of an institutional setting. Interviews with medical staff confirmed this practice was in place.

As a result of the audit findings, Health Services Manager 3 released a memo, dated December 5, 2025, providing all medical and mental health staff with the time frame expectations once a 13-509 is received. During the corrective action period, the auditor requested a list of inmates who disclosed victimization or predatory behavior, who requested to be seen by mental health, at the end of each month. The auditor then requested the 13-509s for inmates who requested to be seen by MH. Eleven inmates were received at SCCC, between January 1, 2026, and May 1, 2026, that had disclosed victimization or predatory behavior, that requested to be seen by MH.

Based on the review of the documentation, SCCC demonstrated compliance with this standard.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>WADOC policy DOC 490-850, Prison Rape Elimination Act Response, section III, requires that victims in all cases of reported sexual misconduct, regardless of who the misconduct is reported to, will receive immediate medical and mental health care.</p> <p>The response to a PREA allegation is designed so that offenders are seen by emergency medical staff before being transferred out to the hospital for a forensic exam. In non-emergency cases, the medical/ mental health staff must assess the</p>

victim within 24 hours. Prior to being transported for the SAFE/SANE exam, the clinician will provide the offender with information on post-exposure prophylaxis for sexually transmitted infections.

Medical and mental health staff stated that they provide emergency medical treatment, when necessary, on PREA incidents. If the offender is sent to be seen by the SAFE/SANE nurse at Grays Harbor Hospital, the mental health clinician sees them upon their return. If they do not go out for a forensic exam the offenders are offered to be seen after reporting an incident. In each of the sexual assault investigations reviewed by the audit team, the victim was offered a mental health assessment according to the documentation that was included in the report.

According to the documentation that was provided, SCCC three aggravated sexual assault cases reported within time frames that forensic exam would be useful in collecting evidence. In all three cases the victim was sent to the outside hospital for a SAFE/SANE exam. Upon return the victim was seen by medical for follow-up of the hospital's medical orders.

In the past twelve months there were 48 sexual abuse/assault allegations that were reported to have occurred at SCCC. Ten sexual assault that had known victims. Of those ten investigations, the documentation provided (Form 13-509) indicates that the victim was not offered mental health timely (in some cases the offer was months later) five of the ten times. Mental health staff did not see the victim within 14 days of referral on three of the ten sexual assault cases reviewed (70% compliant).

According to medical staff, they make the determination on what medical and mental health services will be provided based on their professional training and judgment. The medical and mental health staff that were interviewed all stated that the level of care provided to the offenders at SCCC meets or exceeds the level of care that they would receive in the community.

Policy DOC 600.000, Health Services Management, states that all medical and mental health services allowed under the Offender Health Plan related to sexual misconduct as defined in DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting will be provided at no cost to the offender. According to the medical staff interviewed, they do not charge victims of sexual assault for medical treatment or after care.

	<p>On December 5, 2025, medical and mental health staff were provided with the time frame expectations for medical and mental health treatment for victims of sexual assault via memo authored by the Health Services Manager 3.</p> <p>During the corrective action period, a list of allegations was provided at the end of each month with the corresponding 13-509s. Between January 1, 2026, and May 1, 2026, SCCC was able to demonstrate compliance with this standard. When an inmate made an allegation of sexual assault, the Shift Commanders generated the 13-509 during the intake screening. If the inmate requested to be seen by MH, the inmate was seen in a timely manner.</p>
--	--

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Policy DOC 610.025, Health Services of Offenders in Cases of Alleged Sexual Misconduct, requires the facility to transfer the alleged victim to the designated health care facility within 2 hours when an offender makes an allegation of sexual assault within 120 hours of the alleged assault occurring. The offender is offered a mental health appointment and, unless the offender declines, will be seen by mental health within one business day. Policy requires immediate access to mental health services if the offender is in crisis. Once evaluated a treatment plan is put in place. This treatment plan may include individual/group therapy, referral to medical/mental health specialists, medication or outside medical/mental health treatment. The offender's file is transferred from facility to facility so that the treatment plan can be continued at the next institution.</p> <p>Seven examples of the mental health referrals for offenders who alleged sexual abuse at SCCC were provided with the pre-audit materials. Six inmates declined to see Mental Health and the other did not show up for the appointment.</p> <p>According to the medical and mental health staff that were interviewed, the level of care at SCCC is consistent with what the community offers. All medical decisions and treatments are based on their professional training and medical guidelines. When an offender is received at SCCC, and claims prior victimization, he is offered a mental health evaluation. If the offender accepts the offer, he is suppose to be evaluated by mental health within 14 days of arrival as spoken to in standard 115.81. If, during the initial evaluation, follow-up therapy or counseling is indicated a treatment plan is established. If the offender's medical file indicates that he was already under a treatment plan, that plan is continued at SCCC. Any medical treatment that the</p>

offender was receiving prior to arrival at SCCC is continued.

During the tour of the healthcare unit at CCCC the auditor noted how clean and well-staffed the facility was. The unit has sufficient resources to handle basic medical needs. If the offender needs more advanced medical care, he is transferred to Providence St Peter's Hospital in Olympia, Washington.

Policy DOC 610-025, Health Services Management of Offenders in Cases of Alleged Sexual Misconduct, follow-up appointments with a health care practitioner and mental health professional will be offered within a clinically appropriate timeframe to:

Testing for and treatment of sexually transmitted Infections;

Need for post-exposure prophylaxis for sexually transmitted infections;

Part of the medical response plan for PREA victims is to offer the offender tests for sexually transmitted infections. According to the SAFE/SANE nurse, these tests are conducted during the forensic exam. All medical and mental health services for victims of sexual misconduct will be provided at no cost to the offender while housed in a Department or contracted facility.

Policy DOC 610-025, Health Services Management of Offenders in Cases of Alleged Sexual Misconduct, requires Mental health professionals will attempt to conduct a mental health evaluation within 60 days of receiving the information for all offenders who have been identified as the perpetrator in substantiated allegations of sexual assault and/or sexual abuse, both within the Department and from other jurisdictions unless one has already been conducted for the specific allegation.

Three examples of Mental Health referrals were provided of inmates who committed a sexual assault, while in custody (as a result of a substantiated allegation). Two of the inmates were seen within 10 days. The other inmate did not show up for the appointment.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Policy DOC 490.860, PREA Investigation, section III, states that for each substantiated or unsubstantiated finding of offender-on-offender sexual assault and staff sexual misconduct, the Appointing Authority/designee will convene a local PREA Review Committee to examine the case. The committee will meet every 30 days or as needed. The committee will consist of facility managers, supervisors, investigators and medical/mental health practitioners. The committee will review policy compliance, causal factors, and systemic issues using DOC 02-383 Local PREA Investigation Review Checklist.

At SCCC the PREA review Committee is held at the direction of the Superintendent or PCM at the conclusion of the investigation. The committee can be comprised of the Superintendent, the PCM, Unit Supervisors, Correctional Counselor 3, Medical or Mental Health Staff, and the PREA investigator. The committee discusses the case and documents their discussion on the form DOC 02-383. The Superintendent signs the form at the conclusion of the committee.

The Local PREA Investigation Review Checklist, (form DOC 02-383) includes the questions:

As a result of the investigation, is a change in policy or local procedure indicated;

Was the incident motivated by race, sexual orientation, transgender or intersex statuses, gang affiliation or other group dynamic;

Did physical barriers or other physical plant layout enable the abuse;

Did the incident take place in an area subject to video monitoring;

Were the Department approved staffing models followed and; Was monitoring technology available/adequate?

According to the staff that were interviewed about the PREA review committee, the committee is held every Tuesday. The members are the PCM (Chair), PCS (scribe), the captain, medical staff, mental health staff, and the investigator. The Superintendent attends the committee and approves the minutes. Any corrective remedies that the committee recommends are monitored by the PCM and PCS.

All ten substantiated and unsubstantiated PREA Sexual Assault investigations that were reviewed, contained the PIRC DOC 02-383. All ten were completed within 30 days of the conclusion of the investigation. The committees were comprised of the Superintendent, the PCM, the investigator, and a representative from medical. The form 02-383 was completed thoroughly and addressed the relevant issues. None of the PIRC findings resulted in the need for corrective action. Based on the

	documentation provided, this auditor agreed with the committee’s findings. During the interviews, both the Superintendent and the PCM explained the process completely demonstrating their competence in the subject.
--	---

115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>WADOC has established a PREA allegation and case database within the Offender Management Network Information (OMNI) system. This system allows for a standardized collection of data. The data collected in OMNI is sufficient to complete the SSV-IV forms. The data includes:</p> <ul style="list-style-type: none"> Case outcomes and sanctions; Accused (gender, age, race, height and weight); Investigation Participants (witnesses, alleged victims, accused, reporter); Source of allegation; Location (facility and location within the facility); Date allegation was received; Date and time of incident; Type of allegation; Individual reporting the information; Date and time reported; Who the information was reported to; Incident description; Investigation finding; Alleged victim (gender, age, race, height and weight); Referral (law enforcement, prosecution, licensing body) and disposition of the referral; Case notes. <p>The PREA Coordinator collects the data annually form all WADOC facilities and contracted facilities and compile an annual report. The collected data is analyzed to</p>

	<p>identify factors contributing to sexual misconduct in Department Facilities and offices. The Annual Agency PREA report from the previous calendar year, including identified agency and facility level issues and corresponding action/strategic plans, is accessible at http://www.wa.gov/corrections/prea/resources.htm#reports. Reports beginning with calendar year 2013 are also available. These reports contain both agency level and facility-specific accurate and uniform data for every allegation of sexual misconduct for each calendar year. In 2024, DOJ requested the 2023 PREA report information from WADOC. This information was provided to the DOJ as requested. The DOJ has not requested the 2024 or 2025 PREA data as of this date.</p>
--	---

115.88	Data review for corrective action
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy DOC 490.860, PREA Investigations, requires the PREA Coordinator to generate an annual report of findings. This report includes an analysis of PREA prevention and response for the Department and each facility, including high-level summary information and detained facility data analysis. The report also includes findings and corrective action at the facility and Departmental levels.</p> <p>The PREA Coordinator completes an assessment of the Department’s progress in addressing sexual misconduct, including a comparison with data and corrective action from previous years. The Secretary of Corrections approves the report.</p> <p>This auditor reviewed the WADOC website and was able to easily find the annual PREA report at www.doc.wa.gov/orrections/prea/resources/reports. The report contains a thorough analysis of the PREA data collected during the previous year. It contains comparisons for each year since 2013. The report addresses what the actions the Department is currently doing to reduce sexual assault/harassment in their penal system. There is a report of findings and corrective actions for each facility under the jurisdiction of WADOC. The report does not contain any personal identifiers or confidential information.</p>

115.89	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p>

WADOC maintains the PREA reporting data in the OMNI system. The access to the data in this system is limited to staff who have a need to know. Access to the system is reviewed by the Emergency Operations Administrator to insure the integrity of the system. The PREA report is completed annually in accordance to PREA standard 115.88.

This report is posted on the WADOC website and can be found at www.doc.wa.gov/corrections/prea/resources/reports. This site contains all of the Annual PREA Reports since 2013. A review of the report posted on the website confirms that all personal identifier were removed prior to posting.

Office of the Secretary of State for the State Washington Record Retention Schedule requires that all PREA investigations be retained for 50 years. All sensitive documents, such as investigative reports, hotline call recordings and other allegation related material is maintained on a secure access restricted drive maintained in the Agency PREA Unit. The PREA database in OMNI is restricted to:

Agency Executive Administrators.

Appointing Authorities.

Facility Staff including investigators, Human Resources, Associate Superintendents, Captains and PREA Compliance Managers and support staff.

PREA Compliance Specialist.

Identified IT staff responsible for maintaining the system.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The WADOC website contains the results of all of the PREA audits conducted since 2014. A review of these audits appears to show that all of the facilities operated by WADOC are audited every three years. A list of facilities and when the PREA audits were conducted was provided to the auditors by WADOC. The list includes 22 facilities that are currently open. Eight of the facilities are scheduled to be audited the first year, seven on the second year and seven on the third year of a three-year cycle. This is the first year of the cycle.</p> <p>During this audit, the auditor had access to, and toured, the entire facility. This</p>

	<p>auditor had access to every inmate, staff member, volunteer and contractor that this auditor requested to interview. The interviews were all conducted in the privacy of a staff office either in person or telephonically. Each document that was requested was received, including sensitive documents, such as investigation reports, personnel information and inmate files. Inmates were allowed to send confidential correspondence to this auditor, if they wished. There were two letters received from inmates. One inmate requested to talk to the audit team while on site. There were no letters from any staff or interested parties prior to the audit.</p>
--	--

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The WADOC website contains a copy of the previous audit conducted at SCCC. The audit was completed on May 16, 2023. This report is posted on the WADOC web site.</p>

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	yes

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes

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

	formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42	yes

	U.S.C. 1997)?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b) Hiring and promotion decisions		
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c) Hiring and promotion decisions		
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d) Hiring and promotion decisions		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e) Hiring and promotion decisions		
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit,	na

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

	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	

	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with	yes

	inmates on how to avoid inappropriate relationships with inmates?	
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how	yes

	to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes

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

	prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes

115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes

	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	no
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	

	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g) Screening for risk of victimization and abusiveness		
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h) Screening for risk of victimization and abusiveness		
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i) Screening for risk of victimization and abusiveness		
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a) Use of screening information		
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of	yes

	being sexually abusive, to inform: Work Assignments?	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.42 (d)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.42 (e)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.42 (f)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.42 (g)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.43 (a)	Protective Custody	

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

	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials	na

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

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

	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	na
	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.)	na
	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.)	na
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	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.)	na
	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.)	na
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	na
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between	yes

	inmates and these organizations and agencies, in as confidential a manner as possible?	
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a	yes

	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?	
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	

	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities	yes

	responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report	yes

	of sexual abuse, does the agency: Monitor any inmate 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 inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations,	yes

	including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in	yes

	order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	
115.73 (c) Reporting to inmates		
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d) Reporting to inmates		
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	

	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does	yes

	the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	

	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation	yes

	has been determined to be unfounded?	
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	

	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	

	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401	Frequency and scope of audits	

(b)		
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse	yes

	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.)	
--	---	--