Disclaimer: This report, as required per 28 CFR §115.403, details the findings of an audit that was conducted by an outside contractor to determine the Federal Bureau of Prisons' (FBOP) compliance with the Prison Rape Elimination Act (PREA). As the work product of independent auditors subcontracted by <u>PREA Auditors of America (PAOA)</u>, the FBOP is <u>not</u> responsible for grammatical or typographical errors. Additionally, any questions or comments regarding the discrepancies or inaccuracies found within this report should be directed to the subcontracted independent auditor (name and email address can be found on page one of the report), for explanation and resolution.

PREA Facility Audit Report: Final

Name of Facility: USP Canaan Facility Type: Prison / Jail

Date Interim Report Submitted: NA **Date Final Report Submitted:** 03/09/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	
Auditor Full Name as Signed: Grace A Franks	Date of Signature: 03/09/ 2024

AUDITOR INFORMATION	
Auditor name:	Franks, Grace
Email:	gaf001984@gmail.com
Start Date of On- Site Audit:	01/23/2024
End Date of On-Site Audit:	01/25/2024

FACILITY INFORMATION		
Facility name:	USP Canaan	
Facility physical address:	3057 Eric J. Williams Memorial Drive, Waymart, Pennsylvania - 18472	
Facility mailing address:		

Primary Contact		
Name:	Danielle Stewart	
Email Address: CAA-PREAComplianceMgr@bop.gov		
Telephone Number:	570-488-8000	

Warden/Jail Administrator/Sheriff/Director		
Name:	F. Garza	
Email Address:	CAA-PREAComplianceMgr@bop.gov	
Telephone Number:	570-488-8000	

Facility PREA Compliance Manager		
Name:		
Email Address:		
Telephone Number:		

Facility Health Service Administrator On-site	
Name:	J. Simonson
Email Address:	CAA-PREAComplianceMgr@bop.gov
Telephone Number:	570-488-8000

Facility Characteristics		
Designed facility capacity:	1088	
Current population of facility:	1281	
Average daily population for the past 12 months:	1301	
Has the facility been over capacity at any point in the past 12 months?	No	

Which population(s) does the facility hold?	Males
Age range of population:	21-82
Facility security levels/inmate custody levels:	Minimum - High
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	400
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	6
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	7

AGENCY INFORMATION		
Name of agency:	Federal Bureau of Prisons	
Governing authority or parent agency (if applicable):	U.S. Department of Justice	
Physical Address:	320 1st Street Northwest, Washington , Dist. Columbia - 20534	
Mailing Address:		
Telephone number:	2023073250	

Agency Chief Executive Officer Information:		
Name:	Colette S. Peters, Director	
Email Address:	bop-rsd-preacoordinator@bop.gov	
Telephone Number:	(202) 307-3250	

Agency-Wide PREA Coordinator Information

Name:	Cynthia Campagna	Email Address:	ccampagna@bop.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:	
2	 115.17 - Hiring and promotion decisions 115.31 - Employee training
Number of standards met:	
39	
Number of standards not met:	
0	
Not audited at the facility level: Audited at the agency-level, and not relevant to the facility-level audit because the facility has no independent responsibility for the operation of these standards.	4

AGENCY AUDIT FINDINGS

Summary of Audit Findings

These standards were audited at the agency-level. For more information, please see the attached agency audit report found at the end of this document.

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:		
0		
Number of standards met:		
10		
Number of standards not met:		
0		

POST-AUDIT REPORTING INFORMATION	
GENERAL AUDIT INFORMATION	
On-site Audit Dates	
1. Start date of the onsite portion of the audit:	2024-01-23
2. End date of the onsite portion of the audit:	2024-01-25
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?	Yes No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	This auditor contacted Victims' Intervention Program and verified that USP Canaan utilizes their services. This auditor notified the organization of the audit and asked that they contact via telephone if there were any concerns regarding the facility of any additional input they wished to add.
AUDITED FACILITY INFORMATION	
14. Designated facility capacity:	1088
15. Average daily population for the past 12 months:	1391
16. Number of inmate/resident/detainee housing units:	14
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	No Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit **36.** Enter the total number of inmates/ 1288 residents/detainees in the facility as of the first day of onsite portion of the audit: 2 38. Enter the total number of inmates/ residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit: 39. Enter the total number of inmates/ 31 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: 40. Enter the total number of inmates/ 1 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: 41. Enter the total number of inmates/ 0 residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit: 42. Enter the total number of inmates/ 25 residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit: 43. Enter the total number of inmates/ 2 residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:

44. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	9
45. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	2
46. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	5
47. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	Some of the special populations are not tracked by the facility. This auditor asked all interviewees if they fell in any of the special populations. The facility was able to get a list from Psychology Services to identify those who reported prior history of sexual abuse during the risk screening.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	400
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	7

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	6
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	23
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	 Age Race Ethnicity (e.g., Hispanic, Non-Hispanic) Length of time in the facility Housing assignment Gender Other None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Identified a sample from each housing unit utilizing the roster provided which identified length of stay, age, ethnicity, and housing assignment.
56. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	YesNo

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.	
Targeted Inmate/Resident/Detainee Interview	s	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	32	
As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/ resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/ residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".		
60. Enter the total number of interviews conducted with inmates/residents/ detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2	
61. Enter the total number of interviews conducted with inmates/residents/ detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	8	
62. Enter the total number of interviews conducted with inmates/residents/ detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1	

63. Enter the total number of interviews conducted with inmates/residents/ detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ■ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	No inmates were identified as being hard of hearing or deaf. Medical staff checked their records to verify that this was accurate. This auditor randomly asked inmates if they were hard of hearing and inmates interviewed and staff all report no inmates who are deaf or hard of hearing are currently housed at USP Canaan.
64. Enter the total number of interviews conducted with inmates/residents/ detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	6
65. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
66. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	6

67. Enter the total number of interviews conducted with inmates/residents/ detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	2
68. Enter the total number of interviews conducted with inmates/residents/ detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	5
69. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ■ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	USP Canaan had no occurrences of housing individuals in segregated housing involuntarily for risk of sexual victimization. This auditor inquired with victims who were interviewed and those who reported as well as segregated housing staff.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.

Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	14
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	 Length of tenure in the facility Shift assignment Work assignment Rank (or equivalent) Other (e.g., gender, race, ethnicity, languages spoken) None
If "Other," describe:	This auditor ensured female and male staff were interviewed.
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	YesNo
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
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.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	26

76. Were you able to interview the Agency Head?	● Yes ○ No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	
78. Were you able to interview the PREA Coordinator?	YesNo
79. Were you able to interview the PREA Compliance Manager?	 Yes No NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

	Other
If "Other," provide additional specialized staff roles interviewed:	This auditor interviewed the Health Service Administrator, Chief of Psychology, and the Employee Development Manager
81. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	Yes● No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	YesNo
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)	Security/detention Education/programming Medical/dental Food service Maintenance/construction Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No volunteers were available for interview during the on-site portion of the audit.

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.

compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.		
84. Did you have access to all areas of the facility?		
Was the site review an active, inquiring proce	ess that included the following:	
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, crossgender viewing and searches)?		
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?		
87. Informal conversations with inmates/ residents/detainees during the site review (encouraged, not required)?	YesNo	
88. Informal conversations with staff during the site review (encouraged, not required)?	YesNo	

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).

This auditor was able to tour all areas of the facility and the camp. Cameras were reviewed as well. During the on-site tour a corrective action was identified where there were blind spots in the camp kitchen. The facility installed three bubble mirrors correcting the issue while on-site. Informal interviews with both staff and inmates indicated that the inmates and staff were aware of the audit, how to report PREA incidents, and were aware of the zerotolerance policy. Processes were all tested, observed, or staff or inmates were able to talk the auditor through the process.

Documentation Sampling

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

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



O No

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

This auditor reviewed random inmate and staff files. All investigation files that were completed were reviewed on-site. The staff were able to show the auditor how the information is shown on the computer as well.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	
Inmate- on- inmate sexual abuse	12	0	11	0
Staff- on- inmate sexual abuse	4	0	1	0
Total	16	0	12	0

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	2	1	9	0
Staff-on-inmate sexual abuse	3	0	1	0
Total	5	1	10	0

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 detained sexual harassment investigation files, as applicable to the facility type being audited.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

12

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	No NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation	files
100. Enter the total number of INMATE- ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	11
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	No NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	YesNoNA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation fil	es
103. Enter the total number of STAFF- ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	Yes No NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	 Yes No NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Select	ed for Review
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	There were no sexual harassment allegations in the 12 months prior to the audit.
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	No NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investig	pation files
108. Enter the total number of INMATE- ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files	Yes
include criminal investigations?	No
	NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	Yes No NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigat	tion files
111. Enter the total number of STAFF- ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	No NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	No NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

Two inmate-on-inmate sexual abuse files were pending, but the investigator provided one of the two to this auditor for review. The investigation files for the staff on inmate sexual abuse were incomplete. The BOP sends all staff on inmate allegations to the Office of Internal Affairs for review to determine if a criminal act occurred, one was sent back for an administrative investigation and is in the process of being completed. The investigator provided this auditor a summary of all four allegations. One administrative allegation was completed prior to the completion of this auditor's final report. A report was provided to this auditor regarding the investigation being completed and a Teams meeting was held to review the investigation report.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff Yes 115. Did you receive assistance from any **DOJ-CERTIFIED PREA AUDITORS at any** point during this audit? REMEMBER: the (No audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly. **Non-certified Support Staff** Yes 116. Did you receive assistance from any **NON-CERTIFIED SUPPORT STAFF at any** point during this audit? REMEMBER: the No No audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

AUDITING ARRANGEMENTS AND COMPENSATION		
The audited facility or its parent agency		
My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)		
A third-party auditing entity (e.g., accreditation body, consulting firm)		
Other		
Corrections Consulting Services		

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11

Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.11 (a)

The Federal Bureau of Prisons (BOP) has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment. This policy is stated in the Inmate Handbook and BOP Program Statement (P.S.) 5324.12 as well as the Institution Supplement CAA-5324.12E Sexually Abusive Behavior Prevention and Intervention Program. P.S. 5324.12 and CAA-5324.12E Sexually Abusive Behavior Prevention and Intervention Program is an all-encompassing PREA Policy which outlines the Agency's approach to prevention, detection, and responding to sexual harassment and sexual abuse. P.S. 5324.12 and CAA-5324.12E provides definitions of prohibited behaviors regarding sexual abuse and sexual harassment, sanctions for perpetrators of sexual abuse and sexual harassment, and a description of the Agency strategies and responses to reduce and prevent sexual abuse and sexual harassment. This auditor reviewed the BOP P.S. 5324.12 and CAA 5324.12E, Sexually Abusive Behavior Prevention and Intervention Program and finds that it meets the requirements of provision a. of this standard. This auditor was also provided with the

script for the PREA Video in which it explicitly states that the Bureau of Prisons has a commitment to uphold the zero-tolerance policy for sexually abusive behavior. USP Canaan is compliant with this provision of the standard.

115.11 (b)

The PREA Coordinator is agency-wide and reports to the Assistant Director of the Reentry Services Division as evidenced by the organizational chart provided to this auditor. The PREA Coordinator was interviewed and stated that she has enough time to manage all PREA responsibilities as the position is full-time. There are 122 PREA Compliance Managers, one per institution, throughout the BOP. The PREA Compliance Managers work with the PREA Coordinator through regular calls, emails, trainings, and in-person meetings. An internal auditing process exists where facilities are audited internally for compliance and where deficiencies are found the PREA Coordinator works with Regional Coordinators, PREA Compliance Managers, and Wardens to bring the facility into compliance. USP Cannan is compliant with this provision of the standard.

115.11 (c)

USP Canaan has a designated PREA Compliance Manager. The Associate Warden who reports to the Warden is that designee. The PREA Compliance Manager (PCM) was interviewed on-site and stated that she had enough time to manage all PREA-related responsibilities. As per the PCM, these responsibilities include ensuring staff are trained, ensuring inmates are trained and notified of investigation outcomes, reviews all allegations to determine the appropriate protocol to be used, communicates with the investigators, unit team, psychology, and medical, conducts retaliation monitoring, and ensures the overall coordination and compliance with all policies and procedures related to PREA. If an issue is identified regarding compliance with a PREA standard the PCM reports that she will do whatever is needed to get into compliance typically this would include a corrective action plan and implementation of said plan. This auditor finds USP Canaan to be in compliance with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.12 Contracting with other entities for the confinement of inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.12 (a)

As per P.S. 5324.12, all contracts for the confinement of inmates shall include the entity's obligation to adopt and comply with the PREA Standards. There are no current open contracts to house inmates.

115.12 (b)

P.S. 5324.12 states that the BOP must ensure that its contracts with secure privatized facilities, jails, juvenile facilities, and Residential Reentry Centers include their obligation to adopt and comply with the PREA Standards. The Privatization Management Branch and Residential Reentry Management Branch field staff include PREA compliance monitoring within their scheduled contract monitoring activity.

This standard is not applicable to USP Canaan. USP Canaan has no contracts with private agencies or other entities for the confinement of inmates. USP Canaan is compliant with all provisions of the standard.

115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.13 (a)

115.13 requires each facility to develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides adequate levels of staffing, and where applicable video monitoring to protect inmates against abuse. The Human Resource Management Manual P.S. 3000.03 outlines how the agency develops its staffing plan. The staffing plan for each facility is developed by a Workforce Utilization Committee, which assesses the allocated positions, historical turnover data, known and anticipated vacancies, anticipated workload and/or mission changes. P.S. 3000.03 states that this staffing plan should be reviewed throughout the year as changes occur which will affect the institution's staffing situation. The committee considers the facility specific needs such as efficient utilization of positions, findings from program reviews, operational reviews, and other management indicators to identify workforce needs. As per the PAQ the average daily number of inmates in which the staffing plan was predicated on is 1391 inmates. The Warden and PREA Compliance Manager (PCM) were interviewed on site, and both stated that the facility's staffing plan including video monitoring considers protecting inmates from sexual abuse. As per the Warden and PCM the staffing plan is documented and reviewed quarterly. The PCM and Warden verified that the staffing plan takes into account all eleven considerations outlined in this provision of the standard. As per the Warden the staffing plan is always complied with and compliance is ensured through the administrative Lieutenants daily reviews. USP Cannan is compliant with this provision of the standard.

115.13 (b)

As per P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program all deviations are documented in the remarks section of the Salary/Workforce Utilization Committee Meeting Minutes. A memo dated October 24, 2023, from the

Warden states that there have been no instances where the staffing plan was not followed or complied with in the audit period. The Warden stated during his interview that the facility would always be compliant with the staffing plan, if there was an exigent circumstance, modifications would be made to operations and documentation would be required. USP Canaan is compliant with this provision of the standard.

115.13 (c)

P.S. 5324.12 outlines the requirement set forth in this standard regarding considerations for the staffing plan. A memo dated October 24, 2023 from the Warden states that the staffing plan, deployment of monitoring technology, and the allocation of institutional resources to commit to the staffing plan are reviewed and discussed quarterly to ensure compliance with PREA. This auditor was provided with staffing reports and meeting minutes from the Salary/Work Force Utilization Committee quarterly meetings. This auditor notes that recommendations were made in regard to PREA for additional mirrors in one area of the facility in the minutes provided, the minutes reflected that the mirrors were implemented. Considerations for PREA are noted in all minutes provided and the Warden and the PCM is present at the quarterly meeting. As per the PREA Coordinator, an annual review of the staffing plan is provided to her for review. USP Canaan is compliant with this provision of the standard.

115.13 (d)

P.S. 5324.12 states that unannounced rounds by supervisory staff are conducted with the intent of identifying and deterring sexual abuse and sexual harassment. The unannounced rounds are conducted at a minimum weekly to include all shifts and areas of the facility. The Institutional Duty Officer is tasked with conducting the unannounced rounds. The Institution Duty Officer Procedures were reviewed and outline the scheduling, responsibility, response to incidents, and reporting for the officer. This auditor reviewed the Institution Duty Officer paperwork which includes a log for unannounced rounds, and information on why the rounds are conducted, that they should be unannounced, and staff shall not alert other staff, must be conducted in all areas and on all shifts. This auditor was provided with twenty logs from Institution Duty Officers indicating unannounced rounds were conducted throughout various shifts in all areas of the facility. Two staff responsible for conducting unannounced rounds were interviewed on-site and both report that they document the rounds on a form, in TruScope, and the log sheets. Both report conducting unannounced rounds in an unpredictable manner by randomly touring various areas of the facility of various days and shifts to avoid staff from expecting a pattern. USP Canaan is compliant with this provision of the standard.

This auditor observed sufficient staffing of housing units, program, and work areas. Three areas in the camp kitchen had blind spots in which this auditor recommended mirrors be placed. Mirrors were placed in the three identified areas before the end of the day. USP Cannan is compliant with all provisions of this standard.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.14
	USP Canaan does not house youthful offenders. All inmates are 18 years of age or older as evidenced by inmate rosters, this auditor's observations, and interviews with staff and inmates while on-site.
	USP Canaan is compliant with this standard, as it is not applicable.

115.15 Limits to cross-gender viewing and searches Auditor Overall Determination: Meets Standard **Auditor Discussion** 115.15 (a) As per P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program and P.S. 5521.06 Searches of Housing Units, Inmates, and Inmate Work Areas the facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. Visual searches are to be conducted by staff of the same gender as the inmate, except where circumstances as such that a delay would mean the loss of contraband. In such a case, this exception would be documented in the inmate's file. As per P.S. 5521.06 only qualified health personnel, upon the approval of the Warden, can conduct body cavity searches. All body cavity searches are to be documented in the inmate's file. As per the PAQ there have been no cross-gender strip or visual body cavity searches in the twelve months preceding the audit. USP Canaan is compliant with this provision of the standard. 115.15 (b) There are no female inmates housed at USP Canaan, therefore this provision of the standard does not apply. A review of the daily population report for the previous twelve months, interviews with staff and inmates on-site, and this auditor's observations during the facility tour indicated that there were no female inmates housed at this facility in the previous twelve months. USP Canaan is compliant with provision b. of this standard. 115.15 (c)

P.S. 5521.06 Searches of Housing Units, Inmates, and Inmate Work Areas states that

visual searches are to be conducted by staff of the same gender as the inmate,

except where circumstance as such that a delay would mean the loss of contraband. In such a case, this exception would be documented in the inmate's file. As per P.S. 5521.06 only qualified health personnel, upon the approval of the Warden, can conduct body cavity searches. All body cavity searches are to be documented in the inmate's file. The facility does not house female inmates, therefore there has been no cross-gender pat searches of female inmates. Interviews with staff while on-site confirm that there are no females housed in the facility. USP Canaan is compliant with provision c. of this standard.

115.15(d)

P.S. 5324.12 states that the facility shall implement policies and procedures that enable inmates to shower, perform bodily function, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. The program statement states that inmates are only to shower, perform bodily functions, and change clothing in designated areas of the housing unit. P.S. 5324.12 also outlines the requirements for announcing the presence of oppositegender staff members. The policy provides four notifications to inmates. 1) Inmates are advised of the requirement to remain clothed, and the presence of cross-gender staff at intake and orientation. 2) Notices are posted on inmate bulletin boards and signs within housing units stating that both male and female staff routinely work and visit inmate housing areas. 3) For housing unit officers, an announcement is made at the beginning of the shift or at a designated time to notify that staff of the opposite gender will be working in that unit. 4) For staff that are assigned to work within the unit a schedule is available for inmates to view that indicates when staff of the opposite gender will be on the housing unit. Opposite gender staff who are not assigned to the housing unit area and must go into the individual cells, showers, or bathroom areas must announce themselves when entering the unit. A memo dated October 24, 2023 from the Warden states that USP Canaan has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their genitalia or buttocks. The memo further notes that exceptions occur only for exigent circumstances or when viewing is incidental to a routine cell check. As per the memo, each inmate shower holds only one inmate at a time. This was further evidenced by on-site observations from this auditor. As per the memo and on-site observations showers have doors or curtains that conceal the genitalia and buttocks from viewing in person and on-camera. This auditor reviewed the Institution Supplement CAA-5324.12E which states that an announcement will be made over the institution loudspeaker system at the beginning of each regular shift. The announcement will state that female staff routinely work and visit inmate housing units. Each announcement is documented in the lieutenant's log for that shift. The supplement further states that opposite gender visual strip searches and opposite gender visual body searches will not be conducted except in exigent circumstances. As per the supplement when they do occur, they will be documented. All 14 random staff interviewed stated that staff announce their presence when entering housing units of the opposite gender and all inmates can shower, use the toilet, and change their

clothing without being viewed by staff of the opposite gender. Of the twenty-three random inmates interviewed, nineteen reported that female staff announce their presence when entering the housing units, three said that they did not, and one was unsure. All twenty-three reported that the male inmates are able to shower, use the toilet, and change clothes without being viewed by the opposite gender. During the on-site audit, this auditor observed female staff announcing their presence on the housing units upon entering, this auditor heard the announcement made over the intercom stating that female staff work in the institution. This auditor observed all areas where inmates change clothing, use the toilet, and shower while on-site. All areas allow for the appropriate level of privacy to ensure no cross-gender viewing. USP Canaan is compliant with this provision of the standard.

115.15 (e)

P.S. 5324.12 states that the facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the genital status is unknown, it may be determined through conversation with the inmate, reviewing medical records, or if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. A memo from the Warden dated October 24, 2023, states that USP Canaan adheres to the BOP policy which prohibits staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. The Institution Supplement, CAA-5324.12E states that staff are strictly prohibited by policy from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. All fourteen random staff interviewed report that the facility prohibits staff from searching or physically examining transgender or intersex inmates solely to identify the inmate's genital status. Six transgender staff were interviewed on-site and all six report that they were never searched by staff solely to determine their genital status. USP Canaan is compliant with this provision of the standard.

115.15 (f)

As per the PAQ and a memo from the Warden dated October 24, 2023, 100% of all custody staff are trained to conduct cross-gender pat searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs. The memo states that USP Canaan staff must complete and electronically acknowledge the Inmate Pat Search course. This auditor was provided with training records indicating that all staff completed the course. The course outline, course PowerPoint, and instructor notes were reviewed, and this auditor finds the training to be in compliance with the requirements of this provision. All fourteen random staff interviewed report being trained on cross-gender and transgender or intersex pat searches. Staff describe this training as occurring annually as part of the escort training. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.16

Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.16 (a)

P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states and the Agency Head noted during interview that Institution PREA Compliance Managers are responsible for reaching out to the local disability assistance offices, as a resource to ensure the facility is providing effective communication accommodations when needed. P.S. 5324.12 states that staff are to take reasonable action to ensure that available methods of communication are provided to all inmates with disabilities for complete access to its efforts of preventing, detecting, and responding to sexual abuse and sexual harassment. A memo from the Warden dated October 24, 2023 states that the agency has established procedures to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the agency's PREA efforts. USP Canaan's A&O Handbook is provided to and reviewed with all inmates within 30 days of arrival, excluding exigent circumstances. This review helps to ensure that inmates with disabilities, limited reading skills, and those who are limited English proficient, understand the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The A&O Handbook and the Institution Supplement CAA-5324.12E also states that the CSM will identify inmates who have disabilities that prevent them from reading or understanding the PREA pamphlet and will notify the Unit Manager who will take appropriate steps to ensure the inmate can benefit from all aspects of the Bureau's efforts to comply with PREA. Eleven inmates with disabilities were interviewed (two have a physical disability, eight have a cognitive disability, and 1 is considered blind or low vision). All eleven reported that they received information regarding PREA that they were able to understand. All eleven were able to identify how they would report sexual abuse or sexual harassment in the institution. USP Canaan is compliant with this provision of the standard.

115.16 (b)

P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that Institution PREA Compliance Managers are responsible for reaching out to available interpretation services to ensure the facility is providing effective communication accommodations when a need for such an accommodation is known. P.S. 5324.12 states that staff are to take reasonable action to ensure that available methods of communication are provided to all inmates who are limited English proficient (LEP) for complete access to its efforts of preventing, detecting, and responding to sexual abuse and sexual harassment. A memo dated October 24, 2023, from the Warden states that USP Canaan utilizes the LanguageLine Personal Interpretive Services on a fee for service basis to ensure the effective communication with inmates who have limited English proficiency. This auditor was provided with a

copy of the purchase agreement for LanguageLine dated July 13, 2023. A list of all languages offered by LanguageLine was also provided to this auditor and includes 62 different languages. The handbook, pamphlet, paperwork, and signage throughout the facility is all in English and Spanish. This auditor tested the LanguageLine to verify it is active. This auditor observed posters and flyers hanging on housing units and areas where inmate's frequent in both English and Spanish. Six LEP inmates were interviewed on-site and all six report that they were provided information they were able to understand at the facility. All six were aware of the PREA policy and were able to identify ways in which they could report sexual abuse and sexual harassment at the institution. USP Canaan is compliant with this provision of the standard.

115.16 (c)

P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay could compromise an inmate's safety, the performance of first responder duties, or the investigation. As per the PAQ there were no instances in the twelve months preceding the audit, in which an inmate interpreter, reader, or other type of inmate assistant was used for first responder or investigative purposes for PREA related incidents. Fourteen random staff were interviewed and all report that inmate interpreters or readers are not used for investigation purposes. The only time an inmate interpreter would be involved is when the reentrant initially makes the allegation as the inmate often will bring an interpreter with them to translate. USP Cannan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of the standard.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

115.17 (a)

P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that the agency will not hire or promote anyone who may come in contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates if they have: engaged in sexual abuse in prison, jail, lockup or any other institution; been convicted of engaging or attempting to engage in sexual activity in the community or has been civilly or administratively adjudicated to have engaged in sexual abuse by force, overt or implied threats of force or coercion. The Pre-Employment Guide and the Human Resource Management Manual (P.S. 3000.03) outlines the background check requirement as well as exceptions, responsibilities,

and how derogatory information uncovered is handled. This auditor reviewed personnel files with the Human Resource staff. This auditor reviewed that the questions were asked upon hire regarding prior work in institutions and background checks were completed initially and again in five years. The background check is very extensive for the BOP, for this reason this auditor finds USP Canaan to exceed at this provision of the standard.

115.17 (b)

The Federal Bureau of Prisons considers incidents of sexual harassment in determining whether to hire or promote or enlist the services of any contractor who may have contact with inmates. The General Employment Considerations for Staff indicates that the applicant's character or past conduct might impose a statutory bar to employment or impede employment by adversely impacting on the Bureau's efficiency by jeopardizing the ability to accomplish its mission successfully. The human resource staff interviewed indicated that the questions are part of the application, and the human resource office will send forms to the institutions where potential hires previously worked inquiring as to whether they had any prior incidents of sexual abuse or sexual harassment in an institutional setting. This auditor reviewed employee personnel files on-site where it indicated these checks were completed. USP Canaan is compliant with this provision of the standard.

115.17 (c)

The BOP Recruitment pamphlet indicates that employment is subject to satisfactory completion of a background investigation, which also includes law enforcement and criminal records checks, credit checks, inquiries with previous employers and personal references. As per the PAQ 26 people were hired in the last twelve months and all received criminal background record checks. As per the human resource staff interviewed the facility performs criminal record background checks and considers pertinent civil or administrative adjudications for all newly hired employees who may have contact with inmates and all employees who may have contact with inmates who are considered for promotions. As per the human resource staff this is also true for any contractor or volunteer who may have contact with inmates. The HR staff further noted that at the time of hire the NCIC background check is completed and then a more in-depth background check is completed by the Security and Background Investigation Section (SBIS). This auditor was shown a personnel file from a hire within the last 12 months to show how they indicate the background check was completed. USP Canaan exceeds this provision of the standard due to the thoroughness of their background investigation process.

115.17 (d)

BOP Policy 3000.03 Human Resource Management Manual indicates that the agency performs criminal background checks before enlisting the services of any contractor who may have contact with inmates via a check of the National Crime Information Center (NCIC). As per the PAQ there were two contracts for services where criminal background record checks were conducted on all staff covered in the contract in the last twelve months. As per the HR staff interviewed, all contractors go through a

background check prior to hire. USP Canaan is compliant with this provision of the standard.

115.17 (e)

The Bureau of Prisons utilizes the National Background Investigation Bureau (NBIB). All employees are fingerprinted, and all subsequent FBI criminal arrest information is forwarded through NBIB back to the agency. P.S. 3000.03 states that all positions are subject to five-year reinvestigations. As per the HR staff interviewed, every five years SBIS will contact them to notify of the five-year background check. Every five years a thorough background check is completed on all staff and contractors. USP Canaan exceeds this provision of the standard.

115.17 (f)

The HR staff interviewed stated that the questions required by this provision of applicants can be found on the USAJobs application. A review of the eligibility questions on the USAJobs Application indicated that the three questions required by this provision are required to be answered electronically for all applicants. USP Canaan is compliant with this provision of the standard.

115.17 (g)

The Questionnaire for Public Trust Positions indicates that falsifying or concealing facts is a felony which can result in fines and up to five years in prison. As per the HR staff interviewed all employees have a continuing affirmative duty to disclose any previous misconduct. USP Canaan is compliant with this provision of the standard.

115.17 (h)

As per the HR staff interviewed when a former employee applies for work at another institution, upon request from that institution, the facility provides information on substantiated allegations of sexual abuse or sexual harassment involving the former employee, unless prohibited by law. The HR staff interviewed stated that a form is typically sent to HR from another institution and if it comes with a release, they will fill it out and return it. USP Canaan is compliant with this provision of the standard.

Due to the thoroughness of the background check process for the BOP, this auditor finds that USP Canaan exceeds this standard.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.18 (a)(b)

As per the PAQ there has been no new facility, expansion, or modification of existing facility since the last PREA Audit in May 2021. USP Cannan has not upgraded or installed any video monitoring, electronic surveillance system, or other monitoring technology since the last audit in May 2021. It was clarified by facility leadership that some cameras were repaired, and a couple broken ones were replaced but placement stayed the same. There was no installation of new video monitoring systems.

This standard is not applicable to USP Canaan, as there have been no upgrades. USP Canaan is compliant with this provision of the standard.

115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.21 (a)

P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. This auditor received a copy of the Guide for First Responders when responding to an allegation of sexual abuse and sexual harassment which outlines all responsibilities of the various disciplines. All fourteen random staff interviewed report that they are aware of the agency's protocol for obtaining usable physical evidence if an inmates alleges sexual abuse. All fourteen staff stated that their responsibility would solely be to secure the scene and the alleged victim and perpetrator, ensure no one uses the bathroom, changes their clothes, or brushes their teeth. The staff all referenced the Evidence Recovery Team as being responsible for obtaining all evidence. The line staff are responsible for notifying the operations Lieutenant and the operations lieutenant makes all other contacts to keep off an investigation which is conduct by SIS or SIA if it involves staff. USP Canaan is compliant with this provision of the standard.

115.21 (b)

P.S. 5324.12 states that the P.S. 5324.12 states that the Bureau's response to sexual assault follows the standards set forth in "A National Protocol for Sexual Assault Medical Forensic Examinations, Adult/Adolescents," DOJ Office of Violence Against Women, second edition, April 2013. USP Canaan is compliant with this provision of the standard.

115.21(c)

P.S. 5324.12 states that medical forensic examinations are conducted in accordance

with standards set forth in "A National Protocol for Sexual Assault Medical Forensic Examinations, Adult/Adolescents, DOJ Office of Violence Against Women, second edition, April 2013. P.S. 5324.12 states that when there is a report of a recent incident of sexual abuse, or there is a strong suspicion that a recent serious assault may have been sexual in nature, a physical examination of the alleged victim is conducted. As per P.S. 5324.12 the victim is provided with the opportunity for a forensic examination as soon as possible. Institution Supplement CAA-5321.12E further states that a MOU is in place with a provider for services for victims of sexually abusive behavior. As per the PAQ there was one forensic medical exam conducted in the twelve months preceding the audit and it was conducted by a SANE/ SAFE. A memo dated October 24, 2023, from the Warden states that inmates are not charged any fee for injury assessments related to PREA allegations and forensic examinations. The memo further states that all forensic examinations are conducted by a local emergency facility with approval by the Warden. The forensic examination conducted in the last twelve months was conducted at Wayne Memorial Hospital by a Certified SANE. As per a second memo from the Warden dated October 24, 2023, the Wayne Memorial Hospital SANE/SAFE program is available to USP Canaan inmates who are victims of sexual assault. This auditor received and reviewed a copy of the MOU between USP Canaan and Wayne Memorial Hospital's SANE/SAFE Program. The MOU basically states that Wayne Memorial Hospital agrees to be available to conduct forensic examinations for USP Canaan inmates who are alleged victims of sexual abuse. One investigation file was reviewed where an inmate was sent to the hospital for a forensic examination. This auditor had an informal interview with the Health Service Administrator (HSA) where we reviewed the process for medical responding to an incident of sexual abuse. As per the HSA, following the allegation of sexual abuse and inmate is brought to medical where medical staff will do an initial review to determine what happened, if there are any injuries which must be treated immediately, and if the incident occurred in the timeframe where evidence may still be viable for a forensic examination. If the alleged victim is within the timeframe, the facility coordinates with the local hospital to send the inmate for a forensic examination. All evidence collected during the examination is sent to the FBI for processing. The hospital will send a discharge summary to the facility with the inmate which states what was offered at the hospital such as STI testing and any prophylaxis. USP Canaan is compliant with this provision of the standard.

115.21 (d)

P.S. 5324.12, states that the Institution PREA Compliance Manager (PCM) is to attempt to enter into an agreement with a rape crisis center to make available a victim advocate for inmates being evaluated for the collection of forensic evidence. As per the PCM, USP Canaan utilizes Victims' Intervention Program. This auditor received and reviewed a MOU between USP Canaan and Victims' Intervention Program to provide emotional support services related to sexual violence. The staff of Victims' Intervention Program are qualified and trained to work as victim advocates. USP Canaan also has five staff trained in specialized victim advocate training. This auditor received copies of their degrees and training records indicating the "Forensic Medical Exams: An Overview for Victim Advocates" training was

completed. Two inmates who reported sexual abuse that were interviewed report that they did not speak to a victim advocate but were aware of their contact information. While on-site, this auditor noted that the phone number for the Victims' Intervention Program was painted on the wall by all the inmate phones in the housing units. The contact information is also available in the inmate handbook and hanging on posters throughout the facility. USP Canaan is compliant with this provision of the standard.

115.21 (e)

BOP Program Statement 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that as requested by the victim, the victim advocate, qualified agency staff member or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews. The MOU with Victims' Intervention Program outlines their roles and responsibilities, one of which is to accompany and support the victim through the examination and investigatory process. If staff is not available from Victims' Intervention Program, there are five trained staff employed by USP Canaan. The PCM reports that the hospital would typically contact the Victims' Intervention Program to come for the forensic examination if the inmate requests it, however the one occurrence reviewed by this auditor, the inmate was offered and declined said services. USP Canaan is compliant with this provision of the standard.

115.21 (f)

The Federal Bureau of Investigation (FBI) and the Office of the Inspector General (OIG) are responsible for conducting criminal investigations for the Bureau of Prisons. Both investigating entities follow the requirements of this standard. A memo dated October 24, 2023 from the Warden states that the BOP has a MOU with the FBI and the OIG to conduct PREA criminal investigations. The memo states that prior to referral to FBI or OIG all requirements of 115.21 are provided to the alleged victim and appropriate protocol is utilized. USP Canaan is compliant with this provision of the standard.

115.21 (h)

BOP Program Statement 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that a qualified agency staff member shall be an individual who has been screened for appropriateness to serve in the role of advocate and has received education concerning sexual assault and forensic examination issues in general. A qualified agency staff member meets the education requirement of this section by virtue of his or her degree or vocational training or through specialized training offered by the Bureau. The staff of Victims' Intervention Program are qualified and trained to work as victim advocates. USP Canaan also has five staff trained in specialized victim advocate training. This auditor received copies of their degrees and training records indicating the "Forensic Medical Exams: An Overview for Victim Advocates" training was completed. This auditor also received a review of the Core Clinical Skills of all five staff trained as advocates conducted by the Chief of Risk

Reduction Programs. All five are considered competent in PREA Interventions. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.22 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.22 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. As per the Agency Head, all allegations are investigated. The Agency Head further stated that the investigative process is initiated immediately following the receipt of an allegation of sexual abuse or sexual harassment. The Agency Head described the investigation process as such; the Office of the Inspector General (OIG) of the Department of Justice investigates potential criminal cases involving staff on inmate sexual abuse. The Office of Internal Affairs (OIA) of the Bureau of Prisons investigates administrative cases of staff on inmate sexual abuse or harassment. Institution investigative staff, the Special Investigative Services (SIS) investigates all other cases. When an inmateon-inmate allegation of sexual abuse is deemed possibly criminal in nature, it is referred to the Federal Bureau of Investigation (FBI) for investigation. OIG, OIA, SIS and FBI, review the allegation and predicating information. Substantiated allegations for administrative investigations or criminal prosecutions are based on corroboration of witnesses and victim statements, predicating information, along with physical evidence. In the last twelve months there were 16 allegations of sexual abuse that were received. No allegations of sexual harassment were received in the 12 months preceding the audit. 16 of those allegations resulted in an administrative investigation and none were referred for a criminal investigation. 5 are currently pending completion and 11 were completed at the completion of this audit. This auditor reviewed eleven completed administrative investigation files on-site and one pending completion. Four investigations involving staff were not completed, however a summary of the allegations was provided to this auditor on-site. One of these four staff on inmate investigations was completed prior to the completion of the post-audit phase of this audit and a letter notifying this auditor of completion was received. A Teams meeting was conducted with the Executive Assistant to review the investigation report. USP Canaan is compliant with this provision of the standard.

115.22 (b)

P.S. 5324.12 outlines the administrative and criminal investigative process. The

Agency Head described how criminal and administrative investigations are completed for allegations of sexual abuse and sexual harassment. Administrative investigations are conducted by SIS, criminal investigations regarding staff are conducted by OIG, and criminal investigations which are inmate-on-inmate are conducted by the FBI. All referrals to OIG would be documented in the administrative investigation file and maintained with updates by the SIS. The investigation process is available on the BOP website under policies, "Sexual Abusive Behavior Prevention and Intervention Program." P.S. 5508.02, Hostage Situations or Criminal Actions Requiring FBI Presence confirms that the FBI is responsible for conducting criminal investigations related to Title 18 and/or any criminal activities at Bureau facilities. P.S. 5508.02, which describes the FBI's authority to conduct criminal investigations, is available on the BOP website. One investigator was interviewed, and he reports that if an allegation is found to be criminal it is referred to the FBI. USP Canaan is compliant with this provision of the standard.

115.22 (c)

P.S. 5324.12 outlines the administrative and criminal investigative process and P.S. 5508.02 outlines the FBI's role in criminal investigations within the BOP. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.31 Employee training

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

115.31 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that all staff will receive the Sexually Abusive Behavior Prevention and Intervention Program training during institutional familiarization and yearly thereafter as part of the annual refresher training. P.S. 5324.12 outlines that the employee training shall include all requirements of this provision of the standard. As per the USP Canaan Institution Supplement CAA-5324.12E, the Employee Development Manager is responsible for staff training designed to ensure a coordinated response to a report of sexually abusive behavior. CAA-5324.12E further states that the PREA Compliance Manager (PCM) will provide institution staff with training on relevant procedures and issues during initial employment training and annual training. This training will include the BOP's zero tolerance policy and staff responsibilities related to sexual abuse and sexual harassment, prevention, detection, reporting, and responding. This auditor reviewed the annual training instructor notes for Sexually Abusive Behavior Prevention and Intervention Program training and finds that it meets all requirements of this provision of the standard. Training records were reviewed with the Employee Development Manager (EDM) during an informal interview. The EDM reports that all

new staff get PREA training during their three-week training program which is all instructor led. This training includes the pat search for cross gender, transgender, and intersex. As per the EDM, staff receive annual PREA refresher training which is taught by the PCM during Annual Refresher Training (ART). All fourteen random staff interviewed report that they were trained in PREA initially and then annually as a refresher. The staff report that the training consists of the agency's zero tolerance policy on sexual abuse and sexual harassment, how to fulfill their responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, the inmates right to be free from sexual abuse and sexual harassment, inmates and employees right to be free from retaliation for reporting sexual abuse and sexual harassment, the dynamics of sexual abuse and sexual harassment in confinement, the common reactions of sexual abuse and sexual harassment victims, how to detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relationships with inmates, how to communicate effectively and professionally with inmates including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates and how to comply with relevant laws related to mandatory reporting sexual abuse to outside authorities. USP Canaan is compliant with this provision of the standard.

115.31 (b)

P.S. 5324.12 states that the annual refresher training takes into consideration the gender of the inmate population at each facility. A review of the instructor notes for the training indicates that both genders are taken into account, but the focus is on males as USP Canaan is a male only facility. USP Canaan is compliant with this provision of the standard.

115.31 (c)

P.S. 5324.12 states that new employees receive the Sexually Abusive Behavior Prevention and Intervention Program training and that current employees receive the training as part of their annual training. As per the PAQ, 400 staff who are employed by USP Canaan received PREA training. This auditor reviewed records with the EDM indicating that the PREA Initial or the PREA Annual refresher training was completed by all staff. USP Canaan is compliant with this provision of the standard.

115.31 (d)

P.S. 5324.12 states that all staff are required to physically sign or electronically acknowledge that they received and understood the PREA training. This auditor was provided with copies of the training acknowledgement for the annual refresher training from January 10, 2023, and also reviewed records on-site with the EDM. USP Canaan is compliant with this provision of the standard.

This auditor finds that USP Canaan exceeds the training standards for PREA. The informal interview with the EDM and the fourteen random staff interviews are evidence that USP Canaan ensures that staff are well trained in all requirements of this standard. The staff are very knowledgeable in their responses to how to respond, detect, and prevent sexual abuse and sexual harassment in the facility. The PCM and EDM explained how where there are areas of concern or questions for clarification,

additional training is made available to staff.

115.32 Volunteer and contractor training

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.32 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that all volunteers and contractors who have contact with inmates are to be trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. As per the PAQ, there were 13 volunteers and individual contractors who have contact with inmates trained in the Bureau's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. Two contractors were interviewed during the on-site portion of the audit and both report that they were trained in their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response per agency policy and procedure. USP Canaan is compliant with this provision of the standard.

115.32 (b)

P.S. 5324.12 states that volunteers and contractors who have contact with inmates must be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. This auditor reviewed the training provided to volunteers and contractors and finds that it meets the requirement of this provision. Two contractors were interviewed and both report that they received PREA training which consisted of a power point and videos. Both report that they are aware of the facility's zero tolerance policy on sexual abuse and sexual harassment as well as how to report such incidents. Both contracted staff replied that if they were to become aware of sexual abuse or sexual harassment, they must notify their supervisor and ensure the safety of the alleged victim. USP Canaan is compliant with this provision of the standard.

115.32 (c)

P.S. 5324.12 states that the BOP will maintain documentation confirming that volunteers and contractors understand the training received. P.S. 5324.12 further states that participation must be documented through volunteer and contractor signature or electronic verification and will indicate that the volunteer and contractor understood the training they have received. At the conclusion of the training, volunteers and contractors are asked to seek additional direction from Bureau staff, if necessary, to ensure understanding of the training. This auditor received training records for volunteers and contractors from USP Canaan. Records indicate that training was completed, and the individual understands the zero tolerance policy on

sexual abuse and sexual harassment and that they have been instructed and understand how to report incidents of sexual abuse and sexual harassment. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.33 Inmate education

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.33 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program outlines the requirement for inmates to receive PREA education, specifically stating that inmates receive information on the agencies zero tolerance policy and how to report incidents or suspicion of sexual abuse or sexual harassment via the Admissions and Orientation Pamphlet on Sexually Abusive Behavior Prevention and Intervention. As per the PAQ, 1,227 inmates were admitted to USP Canaan in the last twelve months and were given PREA information. This auditor reviewed the PREA information provided to inmates. "Sexually Abusive Behavior and Intervention: Information on How to Report. An Overview for Individuals in BOP Custody" was reviewed and it outlines the BOP zero tolerance policy regarding sexual abuse and sexual harassment and identifies how inmates can report incidents or suspicions of sexual abuse or sexual harassment. One intake staff member was interviewed and reports that upon intake inmates are given information about the zero-tolerance policy and how to report suspicions or incidents of sexual abuse or sexual harassment. The intake staff also noted that all of this information can also be found in the inmate handbook which is given to the inmates by the Unit Team at Admissions and Orientation. This auditor had intake staff walk her through the intake process at USP Canaan. Inmates enter the intake area and are searched, and screened by various disciplines including medical, psychology, and unit team. Intake staff provide them with all necessary information. Of the 23 random inmates interviewed 20 stated that they received information about the facilities rules against sexual abuse and sexual harassment when they first arrived at the facility. Two of these inmates do not recall what they received and one stated that they did not receive any information on the facilities rules against sexual abuse and sexual harassment when they first arrived at the facility. USP Canaan is compliant with this provision of the standard.

115.33 (b)

P.S. 5324.12 outlines the requirement for inmates to receive PREA education, specifically the comprehensive education that is provided to the inmates. P.S. 5324.12 indicates that during the Admission & Orientation Program, a designated staff member will present the Sexually Abusive Behavior Prevention and Intervention Program Inmate Education. As per the PAQ, 1,123 inmates during the last twelve

months had a stay which exceeded thirty days. As per the PAQ, all of these inmates received comprehensive PREA education. As per the intake staff and informal interviews conducted during the on-site audit, all inmates receive comprehensive PREA Education during Admissions and Orientation which is conducted by the Unit Team. As per intake staff, inmates receive information on their rights to be free from sexual abuse and sexual harassment at intake, same day of their arrival. The Unit Team documents that PREA education is completed on their progress reports. 22 of the 23 inmates interviewed report that they were made aware of their right to be free from sexual abuse or sexual harassment, how to report sexual abuse or sexual harassment, and their right not to be punished for reporting. The inmates reported that this information was provided at intake, in their handbooks, could be found throughout the facility on posters, and in pamphlets. Inmates report receiving this information at intake and again within three days to three weeks after arrival. USP Canaan in compliant with this provision of the standard.

115.33 (c)

P.S. 5324.12 states that the agency requires that all inmates who are transferred from one facility to another be educated regarding their rights under PREA to the extent that the policies and procedures of the new facility differ from those of the previous facility. The intake staff reported that all inmates receive the same education and information at both intake and admissions and orientation. USP Canaan is compliant with this provision of the standard.

115.33 (d)

P.S. 5324.12 establishes guidelines to providing disabled inmates and LEP inmates an equal opportunity to benefit from all the aspects of the facility's efforts to prevent, detect and respond to sexual abuse and sexual harassment. As per P.S. 5324.12 the PREA Compliance Manager is responsible for reaching out to local disabilities assistance offices as well as available interpretation services to ensure the facility provides effective communication accommodation when needed. The BOP has a contract with LanguageLine for translation services for LEP inmates. The USP Canaan Institution Supplement CAA-5290.14G Admission and Orientation Program states that efforts will be made to provide translated lectures and written materials for LEP inmates. USP Canaan Institution Supplement CAA-5324.12E states that the PREA pamphlet will be made available in English and Spanish, and the Correctional Systems Manager will identify inmates who have disabilities that prevent them from reading or understanding the pamphlet and will notify the appropriate Unit Manager. The Unit Manager is responsible for ensuring that the inmate can benefit from all aspects of the Bureau's efforts to comply with PREA. The inmate handbook and PREA information provided at intake and posted throughout the facility is in both English and Spanish. USP Canaan is compliant with this provision of the standard.

115.33 (e)

USP Canaan maintains records of inmate participation in PREA education sessions.

This auditor was provided with a sampling of 30 inmate records for Institution

Admissions and Orientation Program Checklist which indicates that the Sexual Abuse/

Assault Prevention and Intervention training was completed. USP Canaan is compliant with this provision of the standard.

115.33 (f)

P.S.5324.12 states that the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats. P.S. 5324.12 outlines what should be posted in each housing unit including the zero-tolerance policy poster and contact information for reporting sexual abuse allegations. This auditor observed postings in all housing units and areas frequented by inmates which stated the zero-tolerance policy and ways to report. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.34 Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.34 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program indicates that requires that investigators are required to be trained in conducting sexual abuse investigations in a confinement setting. This training is completed through two curriculums: the DOJ/OIG PREA Training or the NIC: Investigating Sexual Abuse in a Confinement Setting. The investigator interviewed reports that he received the specialized training on conducting sexual abuse investigations in confinement settings. The investigator described the training as an NIC course taken as part of Lieutenant school. USP Canaan is compliant with this provision of the standard.

115.34 (b)

P.S. 5324.12 states that investigators are required to be trained in conducting sexual abuse investigations in a confinement setting. This training is completed through two curriculums: the DOJ/OIG PREA Training or the NIC: Investigating Sexual Abuse in a Confinement Setting. A review of the training curriculums confirmed they included the following, techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or criminal prosecution. As per the investigative staff interviewed the training consisted

of topics including techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement facilities, and the criteria and evidence required to substantiate a case for administrative or prosecution referral. USP Canaan is compliant with this provision of the standard.

115.34 (c)

As per P.S. 5324.12 documentation that investigators have completed the required specialized training in conducting sexual abuse investigations must be maintained. As per the PAQ there are 19 investigators employed by USP Canaan who have completed the required specialized training for PREA investigations. Training records were provided indicating completion of PREA Investigating Sexual Abuse in a Confinement Setting (NIC) for all individuals training since October 2021 to include the 19 current investigators. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.35 Specialized training: Medical and mental health care

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.35 (a)

Program Statement 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that all full-time and part-time medical and mental health care practitioners who work regularly in BOP facilities must be trained in 1) how to detect and assess signs of sexual abuse and sexual harassment. 2) How to preserve physical evidence of sexual abuse. 3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment and 4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. P.S. 5324.12 further states that the Health Services Division must ensure that medical staff are appropriately trained under the requirements of this standard and the Reentry Services Division is required to ensure that mental health staff are appropriately trained under this standard. As per the PAQ there are 16 medical and mental health practitioners at USP Canaan who have received specialized medical and mental health care PREA training. Three medical and mental health staff were interviewed on-site. All three note that they received specialized training regarding sexual abuse and sexual harassment which included how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and whom to report allegations or suspicions of sexual abuse and sexual harassment. The three staff

described the course as a computer-based training. The Employee Development Manager (EDM) provided this auditor with an outline of the course, which touches on all the areas required by this provision of the standard. USP Canaan is compliant with this provision of the standard.

115.35 (b)

USP Canaan utilizes the local hospital for forensic medical examinations. This provision is not applicable to USP Canaan and it does not employe any SAFE or SANEs. USP Canaan is compliant with this provision of the standard.

115.35 (c)

As per P.S. 5324.12, the BOP maintains documentation that medical and mental health practitioners have received the training referenced in this standard. Documentation was provided to this auditor indicating that the PREA for Medical and Mental Health Care training was completed by 39 individuals and six contractors since 2013, this includes the 16 medical and mental health care practitioners currently employed at USP Canaan. USP Canaan is compliant with this provision of the standard.

115.35 (d)

As per P.S. 5324.12, medical and mental health care practitioners employed by the BOP also have to complete the mandatory training for PREA that all other employees receive. Contracted and volunteer medical and mental health staff must also complete the volunteer and contractor training provided to all other volunteers and contractors. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.41 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that all inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. P.S. 5324.12 further states that all inmates entering an institution are screened as directed by Health Services, Psychology Services and Unit Management policies. For inmates with a history of sexual victimization while in BOP custody a referral shall be sent to psychology services and if not previously

documented on BOP records, staff must notify the Chief of Correctional Services of the inmate's report of victimization to ensure the appropriate steps have been taken. If inmates report a history of sexual victimization while in a non-BOP setting, staff must document the information and appropriate psychological treatment and monitoring will be provided if needed. Inmates with a history of sexual predation shall be referred to psychology services when identified. If incidents of sexual predation have not previously been documented on BOP records, staff must notify the Chief of Correctional Services of the inmate's history of predation to ensure that appropriate steps have been taken. The Chief of Correctional Services will also update the SENTRY STG assignments regarding predation and victimization. As per the Institution Supplement CAA-5324.12E and a memo dated October 24, 2023 from the Warden states that upon arrival at USP Canaan, all inmates receive an initial screening in Receiving and Discharge by the Unit Team, SIS, and medical staff. As per the memo, the Unit Team's screening includes an initial assessment which identifies any PREA Concerns. USP Canaan Institution Supplement CAA-5324.12E states that Unit Managers are responsible for ensuring that a qualified unit team member completes a PREA Objective Screening Instrument, which is to be applied and documented through the existing intake screening form. As per CAA-5324.12E this shall be completed within 72 hours of the inmate's arrival. This auditor received a sampling of initial screenings and individualized needs plans which indicate that the PREA risk factors have been reassessed. Three staff responsible for risk screening were interviewed on-site. All three staff report that inmates are screened upon admission to the facility or transfer from another facility for risk of sexual abuse victimization or sexual abusiveness towards other inmates. Screening staff elaborated on the process stating that the unit team conducts the risk screening and if there is a PREA concern it is scanned to psychology services where psychology staff would review the assessment and meet with the inmate within 14 days and identify whether the individual is a high or low risk. Of the 23 random inmates interviewed, ten entered the facility in the last twelve months. Of those ten, nine stated that they were asked questions indicating that the risk screening was completed upon arriving. USP Cannan is compliant with this provision of the standard.

115.41 (b)

P.S. 5324.12 states that intake screening shall ordinarily take place within 72 hours of arrival at the facility. As per the PAQ 1,193 inmates entered USP Canaan in the last twelve months and were screened for risk of victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility. As per a memo from the Warden dated October 24, 2023, all inmates are initially screened at Receiving and Discharge by the Unit Team, SIS, and medical staff. All three intake staff interviewed report that the risk screening is completed the same day the inmate arrives at the facility as part of the intake process. Of the nine inmates that were interviewed that arrived within the last twelve months and recall being asked questions indicating a risk screening was completed, all reported that this occurred upon arriving at the facility. USP Canaan is compliant with this provision of the standard.

115.41 (c)

As per P.S. 5324.12 the assessment shall be conducted using an objective screening instrument. This auditor reviewed the Intake Screening Form and found it to be objective. Inmates are asked yes or no questions which are then utilized on the PREA Intake Objective Screening Instrument which includes sections that are determined based on the inmate's history. USP Canaan is compliant with this provision of the standard.

115.41 (d)

As per P.S. 5324.12, the intake screening shall consider, at a minimum, the following criteria, 1) whether the inmate has a mental, physical, or developmental disability, 2) age, 3) physical build, 4) previous incarceration history, 5) criminal history, 6) prior convictions for sex offenses, 7) perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming, 8) previous sexual victimization, 9) inmate's own perception of vulnerability, and 10) whether the inmate is detained solely for civil immigration purposes. This auditor reviewed the PREA Intake Objective Screening Instrument and the Intake Form which indicates that the intake screening and intake form considers all the criteria noted in P.S. 5324.12 and required by the standard. The three risk screening staff interviewed explained the screening process. A screening tool is utilized, and a review is conducted of the inmate's institutional history, criminal history, Pre-Sentence Investigation (PSI), and any other information available in the file that comes with the inmate. The screening tool considers the inmates age, disabilities, physical build, previous incarceration, criminal history, sexual orientation, perceived sexual orientation, prior victimization, and perception of vulnerability. USP Canaan is compliant with this provision of the standard.

115.41 (e)

P.S. 5324.12 states that the initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse in assessing inmates for risk of being sexually abusive. CAA-5324.12E states that the Unit Team should not rely solely on the inmate's self-report, but should also review background information and other available information. This auditor reviewed the PREA Intake Objective Screening Instrument which confirms that the intake screening considers the following, prior acts of sexual abuse, prior convictions for violent offenses and prior institutional violence or sexual abuse known to the facility. The three risk screening staff interviewed report that the risk screening tool as well as the PSI, criminal history, and any other information in the inmate file is considered during the risk assessment. USP Canaan is compliant with this provision of the standard.

115.41 (f)

P.S.5324.12 states that inmates would be reassessed for the inmate's risk of victimization or abusiveness within 30 days from their arrival at the facility by Psychology Services staff. As per the PAQ 1,123 inmates who entered USP Canaan in the last twelve months, whose length of stay exceeded 30 days, were reassessed for risk of victimization or of being sexually abusive within 30 days of their arrival at the facility. As per the memo from the Warden dated October 24, 2023, all inmates are

given program review by the Unit Team within 28 days of their arrival. The memo also states that if there are PREA concerns psychology will follow up within 14 days of the screening. This auditor received a sampling of initial screenings and individualized needs plans which indicate that the PREA risk factors have been reassessed. This auditor was also provided with a sampling of Psychology Services Risk of Sexual Victimization referral follow-ups. This is the follow up where the inmate's level of risk is assessed, and recommendations are made regarding housing and programming. As per the three risk screening staff interviewed the reassessment is conducted within 28 days after arrival. This assessment is a review of records such as programming, disciplinary reports, housing changes, and a interview with the inmate to ask about perception of safety and any changes. Ten random inmates interviewed arrived at the facility within the last twelve months. Eight recall being reassessed or meeting with the unit team to discuss status at the facility within 28 days of arriving, one inmate was only at the facility for one week at the time of interview, and one reports never seeing anyone. This auditor did follow up with staff regarding this inmate where records were provided indicating this inmate has been seen by multiple disciplines and staff since arrival. USP Canaan is compliant with this provision of the standard.

115.41 (g)

P.S. 5324.12, states that inmates will be reassessed for their risk of victimization or abusiveness when warranted due to referral, request, incident of sexual abuse or receipt of additional information that bears on their risk of sexual victimization or abusiveness. This reassessment would be completed by Psychology Services staff. This auditor discussed the reassessment process for inmates who warranted a reassessment for incidents, new information received, or referral with the PREA Compliance Manager (PCM) and the three-screening staff interviewed. Reassessments, other than the 28-day and initial screening are conducted by SIS or psychology unless it is requested to be done by the case manager. USP Canaan is compliant with this provision of the standard.

115.41 (h)

As per P.S. 5324.12, inmates are not to be disciplined for refusing to answer the following questions during the risk screening: whether or not the inmate has a mental, physical or developmental disability; whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming; whether or not the inmate previously experienced sexual victimization and the inmate's own perception of vulnerability. All three risk screening staff interviewed report that inmates are never disciplined for refusing to respond to questions on the risk screening tool. USP Canaan is compliant with this provision of the standard.

115.41 (i)

P.S. 5324.12 states that the agency has implemented appropriate controls on the dissemination of the screening information to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. That information is

disseminated on a need-to-know basis for staff. Interviews with the PREA Coordinator, PREA Compliance Manager (PCM) and intake and screening staff indicate that the information obtained during the risk screening is limited to staff who have a need to know. These staff would include the case managers, psychology, unit managers, PCM, and SIS. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.42 Use of screening information

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.42 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, states that information from the risk screening will be utilized to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. As per P.S. 5324.12 once an inmate has been identified as a victim or perpetrator, or as "at risk" for victimization or perpetration, unit management should review classification options. A memo dated October 24, 2023 from the Warden states that members of the Unit Team and Special Housing Unit staff utilize the information obtained in the risk screening to inform all areas of programming and housing needs. The memo further details how the risk of victimization inmates are identified and reviewed prior to any inmate housing assignment changes, program, work, and educational assignments. The memo also notes that changes to the information on the screening can be discussed at the Special Housing Unit meeting, Operations meeting, or Program meeting. Institution Supplement CAA-5324.12E outlines the notification procedures for inmates identified as at risk for victimization. When an inmate is identified on the risk screening as being at risk for victimization, notification is provided to the PREA Compliance Manager (PCM) and Psychology Services. CAA-5324.12E also outlines the monitoring of the inmate perpetrator. When an inmate is identified as being at risk of abusiveness, notification must be provided to the PCM, Psychology Services, and the captain. The captain is responsible for monitoring inmates identified as being at risk of perpetrating sexual abuse. The captain does this by evaluating housing, programming, and work assignments. The PCM stated that the risk screening is used to determine housing and programming assignments within the facility. The PCM noted that psychology services is instrumental in the identification of those inmates at risk for victimization and at risk for perpetrating sexual abuse. The three risk screening staff stated that the risk screening information is used to determine housing and programming assignments as well as need for psychology services. USP Canaan is compliant with this provision of the standard.

115.42 (b)

P.S. 5324.12 states that the agency shall make individualized determinations about how to ensure the safety of each inmate. As per the three intake staff interviewed all inmate's who are identified to be at risk of sexual victimization and those identified as being a risk of perpetrating sexual abuse are referred to psychology for further evaluation and review. After psychology meets with the inmate a determination is then made on a case-by-case individualized basis as to how the status will affect housing, programming, and work assignments to ensure the safety of the inmates. USP Canaan is compliant with this provision of the standard.

115.42 (c)

P.S. 5324.12 states that in deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmates health and safety, and whether the placement would present management or security problems. This auditor was provided with documentation of an inmate's referral to the Transgender Executive Council. The referral outlines the inmate's preference, psychology and medical information, and history of incarceration. The PCM was interviewed and stated that the agency considers various things regarding housing and programming assignments for transgender or intersex inmates including the inmate's health and safety. This auditor met with the Chief Psychologist to discuss the process for ensuring the safety of transgender and intersex inmates. The Chief Psychologist reported that each transgender and intersex inmate is assessed for housing and programming on a case-by-case basis. Reassessment is conducted regularly to ensure health and safety. The Chief Psychologist also noted that rounds are conducted weekly with all transgender or intersex inmates to check in. Six transgender inmates were interviewed on-site. All six report that they were not placed in a housing area only for transgender or intersex inmates and all six report that they were never searched solely to determine their genital status. Four of the six transgender inmates interviewed report being asked questions about their safety by psychology staff. One of the transgender inmates reported that he was not transgender but just was told it would help him get a better housing and the other inmate reported that no one has spoken to her about her safety. This auditor addressed this with the PCM on-site where it was confirmed that the inmate has been seen and will be seen again by psychology services to follow up. USP Canaan is compliant with this provision of the standard.

115.42 (d)

As per P.S. 5324.12, placement and programming assignments for each transgender intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate. This auditor was provided with program reviews of individualized needs plans for inmates. Two if these plans were for inmates who identify as transgender. All inmates receive a program review every six months and once a month the year of their release. The two program reviews for the inmates

who identified as transgender include a note regarding their experience regarding their status as transgender and a psychology review. As per the PCM, placement and programming assignments for each transgender or intersex inmate is reassessed every six months to review any threats to safety experienced by the inmate. As per the three risk screening staff interviewed placement and programming assignments for each transgender or intersex inmate is reassessed at least every six months to review any threats to safety experienced by the inmate however in the last year of incarceration all inmates are seen and reviewed every month. USP Canaan is compliant with this provision of the standard.

115.42 (e)

P.S. 5324.12 states that a transgender or intersex inmates own views with respect to his or her own safety will be given serious consideration. Four of the six transgender inmates interviewed report being asked about their safety, one denies being transgender but admits to identifying as transgender upon intake, and the other claims to have never been seen regarding her transgender status, but the PCM confirmed that was not accurate and the inmate would be seen by psychology for follow-up. The PCM and the risk screening staff interviewed report that transgender or intersex inmates views' of their own safety are given serious consideration in placement and programming assignments. USP Canaan is compliant with this provision of the standard.

115.42 (f)

P.S. 5324.12 states that transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. This auditor observed during the on-site a portion of the audit all shower areas in the facility. All showers are single showers with privacy plates in place to cover the chest and genital area. Showers in the special housing unit (SHU) are single showers within the cells. The SHU Lieutenant reports that if an inmate who is transgender or intersex prefers to shower outside of the cell for privacy there is a single shower on the housing unit that that inmate could use. Currently no transgender inmates have requested this accommodation. As per the six transgender inmates interviewed showering separately is not an issue due to the facility shower layout. The PCM and the three staff responsible for risk screening report that transgender and intersex inmates are given the opportunity to shower separately from other inmates and can request accommodations if necessary. USP Cannan is compliant with this provision of the standard.

115.42 (g)

P.S. 5324.12 states that lesbian, gay, bisexual, transgender, or intersex inmates shall not be placed in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates. As per the PCM and the PREA Coordinator, there are no dedicated housing units for lesbian, gay, bisexual, transgender, and intersex inmates. As per the six transgender and intersex inmates interviewed and the two inmates who

identify as gay or bisexual, they have never been housed in unit solely for LGBTI inmates. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.43 Protective Custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.43 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no other available alternative means of separation from likely abusers. P.S. 5324.12, further states that if the facility cannot conduct such an assessment immediately it may not hold the inmate in involuntary segregated housing for more than 24 hours. As per the PAQ there have been no inmates who were at risk for sexual victimization held in involuntary segregation in the last twelve months. As per the Warden, there are no inmates in the last twelve months who were housed in involuntary segregated housing for risk of victimization or because they made a sexual abuse allegation. The Warden stated that involuntary segregation is to be used as a last resort only when there are no available alternative means of separation from potential abusers. The Warden did note that most inmates at high risk of victimization or those who made allegations of sexual abuse request to be housed in segregated housing. USP Canaan is compliant with this provision of the standard.

115.43 (b)

P.S. 5324.12 states that when an inmate is placed in special housing involuntarily, access to programs, privileges, education, or work should not be interrupted, to the extent possible. P.S. 5324.12, further states that if there are limitations documentation must reflect the limitation, duration, and rationale for the limitation. Two staff who work in segregated housing were interviewed. Both report that inmates are typically not housed in segregated housing involuntarily due to risk of sexual victimization or due to an allegation of sexual abuse. The two staff report that if an inmate were to be housed in involuntary segregated housing for protection from sexual abuse or after having alleged sexual abuse, they would still have access to programs, privileges, education, and work opportunities if possible. USP Canaan is compliant with this provision of the standard.

115.43 (c)

P.S. 5324.12 states that the facility shall assign inmates to involuntary segregated

housing only until an alternative means of separation from likely abusers can be arranged and such an assignment shall not ordinarily exceed a period of 30 days. As per the PAQ there have been no inmates who were at risk for sexual victimization held in involuntary segregation in the last twelve months. As per the Warden, involuntary segregation is used only as a last resort for inmates who are at high risk for sexual victimization or who have alleged sexual abuse. The warden further stated that inmates at high risk of sexual victimization or who have alleged sexual abuse who are placed in involuntary segregation would ordinarily only be placed until alternative means a separation from abusers could be arranged. This would be within 30 days and a review would be conducted within two days and then every seven days after to ensure that no alternative means of housing are available. The two staff that were interviewed who work in segregated housing report that inmates are only placed in involuntary segregated housing until an alternative means of separation from likely abusers can be arranged both staff have never had an occurrence of this to reference. USP Canaan is compliant with this provision of the standard.

115.43 (d)

P.S. 5324.12 states that States that if an involuntary segregated housing assignment is made the facility shall clearly document the basis for the facilities concern for the inmate safety and the reason why no alternative means of separation can be arranged. P. S. 5324.12, states that when determining an appropriate method of safeguarding the inmate assigned at risk for victimization, the Warden ensures all options are considered by completing, signing, and dating form BP-A1002, Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation. As per the PAQ there have been no inmates who were at risk for sexual victimization held in involuntary segregation in the last twelve months. USP Canaan is compliant with this provision of the standard.

115.43 (e)

P.S. 5324.12 states that the inmate's status is reviewed weekly during Special Housing Unit Meetings. A memo from the Warden dated October 24, 2023 states that in cases when an involuntarily segregated housing assignment is made, the facility affords such inmates a review every seven days to determine whether there is a continuing need for separation from the general population. As per the memo these reviews are conducted weekly during the special housing unit (SHU) meeting which includes the following staff members: Warden, Associate Warden (PREA Compliance Manager), Captain, Lieutenants, Health Services, Psychology, Unit Management, and the Case Management Coordinator. As per the memo inmates are also assessed during weekly SHU rounds by all departments, monthly SHU reviews by psychology, and the 30-day after-action meeting for each PREA report excluding investigations which are unfounded. At this time the memo states there are no inmates in SHU under protective custody solely related to their assessed risk of victimization or predation. As per the two staff who work in segregated housing, the facility reviews the inmates' circumstances regularly. Checks are done daily by the Lieutenant, and weekly administration does SHU rounds. USP Canaan is compliant with this provision of the standard.

115.51 Inmate reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.51 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program reviews the various internal ways for inmates to privately report sexual abuse and harassment, retaliation by other inmates or staff for reporting sexual abuse or sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. P.S. 5324.12 states that Bureau inmates are encouraged to report allegations to staff at all levels and are also provided with avenues of internal reporting such as telephonically to specific departments or by mail to an outside entity. This auditor was provided with a copy of the inmate information handbook for USP Canaan. Section XII of the handbook addresses what to do if sexually assaulted or sexually harassed. Some reporting methods outlined in the handbook are writing directly to the Warden, Regional Director, or Director; file an Administrative Remedy, write to the Office of theInspector General, email the Office of the Inspector General on TRULINCS or they can have someone report on their behalf. The handbook provides addresses for the Office of the Inspector General, BOP MidAtlantic Regional PREA Coordinator Office, BOP Central Office, Northeast Regional PREA Coordinator, and the Northeast Regional Director. USP Canaan Institution Supplement CAA-5321.12E also states that the Health Services Administrator is responsible for ensuring that a presentation describing the Sexually Abusive Behavior Prevention and Intervention Program is provided during Admission and Orientation and this presentation includes methods of reporting. The Sexually Abusive Behavior Prevention and Intervention: Information and How to Report pamphlet provided to inmates at intake also outlines how to report. This auditor was provided with and observed during the on-site audit postings on all housing units and where inmates frequent, in both English and Spanish, stating the facility's zero-tolerance policy as well as reporting methods. The reporting methods listed on the posters are telling a staff member, file an administrative remedy, using TRULINCS to send an email to the DOJ Sexual Abuse Reporting mailbox, and writing to the Office of the Inspector General (includes the address). All fourteen random staff and twenty-three random inmates were able to identify multiple ways in which inmates can report sexual abuse or sexual harassment. USP Canaan is compliant with this provision of the standard.

115.51 (b)

P.S. 5324.12 states that at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency and that is able to receive and immediately forward inmate reports of sexual abuse and sexual

harassment to agency officials and allows the inmate to remain anonymous upon request shall be provided. P.S. 5324.12 indicates that inmates are provided contact information and access to the Office of the Inspector General to make reports. The signage throughout the facility provides the address for the Office of the Inspector General as does the Inmate Orientation and Admission Handbook. The PREA Compliance Manager (PCM) noted that inmates are able to report sexual abuse or sexual harassment to the Office of the Inspector General (OIG). The PCM showed this auditor where the address was on the walls of the housing unit, the address is also available in the inmate handbook, and there is ability to email OIG through TRULINCS. As per the PCM the postings and handbook identify limits to confidentiality. Twenty-two of the twenty-three random inmates interviewed identified how they would report sexual abuse and sexual harassment and that they were aware they could do so anonymously. Most inmates responded that they would report by using the hotline or telling a staff member. USP Canaan is compliant with this provision of the standard.

115.51 (c)

P.S. 5324.12 states that staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. Institution Supplement CAA-5324.12E states that upon report of sexually abusive behavior occurring at USP/SCP Canaan, or if sexual victimization is detected, the inmate will be immediately separated from all other inmates, and the Operations Lieutenant will be directly and immediately notified, and the investigation process will begin. A memo from the Warden, dated October 24, 2023, states that USP Canaan adheres to national agency policy mandating that staff accept reports of sexual assault and sexual harassment made verbally, in writing, anonymously, and from third parties. As per the memo upon receiving reports of sexual assault and sexual harassment, staff members are required to document verbal reports immediately. The memo from the Warden further indicates that all allegations of sexual abuse in the past 12 months at USP Canaan were responded to immediately. The memo notes that there is a PREA allegation tracking form which is kept in a binder in the psychology department to ensure allegations are investigated. All 14 random staff and 21 of the 23 random inmates interviewed report that reports of sexual abuse or sexual harassment can be made either in person, in writing, anonymously, or through a third party. The two inmates were not sure. USP Canaan is compliant with this provision of the standard.

115.51 (d)

P.S. 5324.12 states that staff may contact any supervisory staff at the local institution, regional staff, or Central Office staff, including the Regional PREA Coordinators and the National PREA Coordinator. P.S. 5324.12 further states that allegations involving staff members may also be reported to the Office of Internal Affairs or the office of the Inspector General. Staff reported that they can privately report using the hotline, to executive staff, directly to SIS or SIA, write Office of the Inspector General, or to their supervisor. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.52 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program references P.S. 1330.18, Administrative Remedy Program for this standard. 1330.18 outlines the Administrative Remedy Program, indicating that USP Canaan is not exempt from this standard.

115.52 (b)

P.S. 1330.18 describes the grievance process for allegations of sexual abuse and sexual harassment. P.S. 1330.18 states that the agency does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse and that the agency does not require an inmate to use the informal grievance process or attempt to resolve with staff an alleged incident of sexual abuse. The inmate Sexual Abusive Behavior Prevention and Intervention: Information on How to Report pamphlet gives inmates guidance on how to file an administrative remedy as a way of reporting sexual abuse or sexual harassment. USP Canaan is compliant with this provision of the standard.

115.52 (c)

A memo dated October 25, 2023 from the Warden states that institutional policy at USP Canaan allows for inmates to submit a grievance alleging sexual abuse without submitting it to the staff member who's the subject of the complaint. P.S. 1330.18, Administrative Remedy Program states that an inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject to the complaint and such grievance is not referred to a staff member who is the subject of the complaint. USP Canaan is compliant with this provision of the standard.

115.52 (d)

P.S. 1330.18 outlines the grievance process for allegations of sexual abuse and sexual harassment. P.S. 1330.18 states that that the agency would issue a final decision on grievances related to sexual abuse within 90 days of the initial filing. The 90 days does not include the time used by the inmate to prepare any administrative appeal. The agency may claim an extension up to 70 days if the normal time period for

response is insufficient to make an appropriate decision. The inmate must be notified in writing of the extension and provided with a date by which the decision will be made. P.S. 1330.18 also indicates that if the inmate does not receive a response within the allotted timeframe, the inmate will consider the absence of a response to be a denial. As per the PAQ, nine grievances were filed in the last twelve months alleging sexual abuse. Eight reached the final decision by 90 days and one had not yet been resolved nor has it reached 90 days. A memo from the Warden dated October 25, 2023, states that no grievances alleging sexual abuse involved an extension because the final decision was not reached within 90 days. Of the two inmates interviewed that reported sexual abuse, one has received notification of the outcome and it was received a month after the allegation was made, the other inmate was a recent reported incident and has not yet received notification of an outcome. USP Canaan is compliant with this provision of the standard.

115.52 (e)

P.S. 1330.18, outlines the grievance process for third party allegations of sexual abuse and sexual harassment. P.S. 1330.18 states that third parties are permitted to assist inmates in filing requests for administrative remedies for sexual abuse and are permitted to file such requests on behalf of the inmate. In addition, it states that if a third-party files a report on behalf of an inmate that the agency may require the alleged victim to agree with the request prior to filing and if the inmate declines the agency will require the inmate to complete a sworn affidavit stating he does not want the grievance to proceed.

As per the PAQ, there were no grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third party assistance.

115.52 (f)

P.S. 1330.18 states that the agency provides inmates the opportunity to file an emergency grievance alleging substantial risk of imminent sexual abuse and the grievance will be addressed immediately. P.S. 1330.18 indicates that that an initial response will be provided within 48 hours and that a final decision will be made within five calendar days. The final decision will document the agency's determination whether the inmate is at substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. As per the PAQ, there were no emergency grievances filed in the last 12 months. USP Canaan is compliant with this provision of the standard.

115.52 (g)

P.S. 1330.18 states that inmates may be disciplined for filing a grievance in bad faith. As per the PAQ, there were no inmate grievances alleging sexual abuse that resulted in disciplinary action against the inmate for having filed the grievance in bad faith. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.53 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that inmates shall be provided with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers. P.S. 5324.12 further states that the facility shall enable reasonable communication between the inmates and these organizations and agencies, and as confidential manner as possible. As per P.S. 5324.12, the PREA Compliance Manager, with the assistance of psychology services staff, seeks to establish an agreement with community service providers who can provide confidential emotional support services as it relates to sexual abuse. If an agreement is not feasible the attempts to form such a relationship must be documented. A memo dated October 25, 2023 from the Warden states that USP Canaan provides inmates with access to outside victim advocates for emotional support services by providing inmates with the following: mailing addresses and telephone numbers for local state or national victim advocacy or rape crisis organizations; and mailing addresses and telephone numbers for immigrant service agencies for persons detained solely for civil immigration purposes. The memo further states that reasonable communications are provided between inmates and these organizations in a confidential manner. As per the memo these services are all coordinated through the psychology services. The inmate handbook has the information for sexual abuse emotional support services. The Institution Supplement CAA-5324.12E states that an MOU is in place with a provider of services for victims of sexually abusive behavior. USP Canaan has a MOU for services with Victims' Intervention Program. This auditor was provided with a copy of this MOU. During the on-site audit this auditor noted that the phone number for Victims' Intervention Program was painted on the wall by all the inmate telephones in all the housing units. One of the two inmates interviewed who reported sexual abuse stated that they were aware of such programs and provided information on them. Sixteen of the twenty-three random inmates interviewed were aware of support services, referred to them as being supportive, counseling, or even psychology services, were aware of the address and phone number being available, and were confident that communications with the services were confidential and accessible to them as needed. USP Canaan is compliant with this provision of the standard.

115.53 (b)

P.S. 5324.12 states that inmates shall be informed prior to giving them access, the extent of which such communications will be monitored and the extent in which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. Sixteen of the twenty-three random inmate interviewed were under the belief that communications with the emotional support services would be

confidential. One of the inmates who was interviewed who reported sexual abuse states that he did not use the services so he was not aware, the other inmate stated that he was not aware either. This auditor finds USP Canaan to be in compliance with this provision of the standard. The random sample of inmates interviewed were aware of the level of confidentiality by reading the signs, pamphlets, and handbook.

115.53 (c)

P.S. 5324.12 states that the agency shall maintain our attempt to enter into MOUs or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. This auditor received a copy of the MOU with Victims' Intervention Program. A call was placed to the organization, which confirmed that they work with USP Canaan. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.54 Third-party reporting Auditor Overall Determination: Meets Standard

115.54 (a)

Auditor Discussion

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of the inmate. The Bureau posts this publicly on their website under a "Contact Us" tab. Third parties can submit concerns in writing on behalf of an inmate. A memo from the Warden dated October 25, 2023 states that the BOP maintains information on Sexual Abuse Prevention and Intervention on the BOP internal website entitled "Sallyport." As per the memo third-party reporting is also provided on the public website. USP Canaan is compliant with this standard.

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.61 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that all staff are required to report immediately and according to policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, retaliation against inmates or staff who reported such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. P.S. 5324.12 further outlines this process. As per P.S. 5324.12 all staff must report the information concerning incidents or possible incidents of sexual abuse or sexual harassment to the Operations Lieutenant. Staff will then provide a written follow-up memorandum to the Operations Lieutenant to document the report. The Operations Lieutenant will notify the PREA compliance manager. The PREA Compliance Manager (PCM) will determine whether a full response protocol is needed. All fourteen random staff interviewed reported that all staff are required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility; retaliation against inmates or staff who reported such an incident and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. All fourteen staff stated that the procedure for reporting any information related to an inmate sexual abuse would be to contact the operations Lieutenant or their immediate supervisor. USP Canaan is compliant with this provision of the standard.

115.61 (b)

P.S. 5324.12 states that the information concerning the identity of the alleged inmate victim and the specific facts of the case are limited to the staff who need to know because of their involvement with the victim's welfare and the investigation of the incident. Informal interviews conducted with random staff, executive staff, and the PCM indicate that only staff who need to know are privy to the specific facts of a PREA allegation. All fourteen random staff interviewed stated that they would report to the operations Lieutenant or their immediate supervisor. USP Canaan is compliant with this provision of the standard.

115.61 (c)

P.S. 5324.12 states that medical and mental health practitioners are required to report sexual abuse and are further required to inform inmates of their duty to report and the limitations of confidentiality at the initiation of services. Three medical and mental health staff were interviewed and all three report that limitations of confidentiality are understood by the inmate at the initiation of services. Both medical staff interviewed referenced HIPAA as well. All three medical and mental health staff report that they are required to report any knowledge suspicion or information regarding an incident of sexual abuse or sexual harassment to a designated supervisor or official immediately upon learning of it. Two of the three individuals interviewed had experience in becoming aware of such incidents and both individuals reported that they immediately reported it to the operations Lieutenant. USP Canaan is compliant with this provision of the standard.

115.61 (d)

P.S. 5324.12 states that if the alleged victim is under the age of 18 or considered a vulnerable adult under state or local vulnerable persons statute, the allegation shall be reported to the designated state or local Services Agency under applicable mandatory reporting laws. As per the PREA Coordinator, if an allegation of sexual abuse or sexual harassment is made by someone under the age of 18 or someone considered a vulnerable adult under state or local law, the institution staff would report the allegation to the designated state or local services agencies under the applicable mandatory reporting laws. As per the Warden all cases are investigated the same including allegations involving someone under the age of 18, however in these cases accommodation and notifications must be made as per state law. USP Canaan is compliant with this provision of the standard.

115.61 (e)

P.S. 5324.12 states that all allegations of sexual abuse and sexual harassment, including third party and anonymous reports, shall be reported to the facilities designated investigators. P.S. 5324.12 further states that staff must report and respond to allegations of sexually abusive behavior regardless of the source of the report. As per the Warden, all allegations of sexual abuse and sexual harassment are reported directly to SIS or SIA, unless it needs to go to Office of Internal Affairs. This includes third-party and anonymous reports. The Warden was very adamant that all allegations are investigated. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.62 Agency protection duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.62 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that when an inmate is subject to substantial risk of imminent sexual abuse, staff shall take immediate action to protect the inmate. P.S. 5324.12 further outlines the response as such, when inmate-on-inmate sexual abuse the Operations Lieutenant is notified immediately and safeguards the inmate, referrals are made to Psychology Services for assessment and the PREA Compliance Manager is notified. If it is a staff-on-inmate sexual abuse allegation, the inmate shall be safeguarded which could include a reassignment of staff. If it is an inmate-on-staff sexual abuse allegation with the staff member being the alleged victim, all options for safeguarding the staff member will be considered. As per the PAQ, there have been no instances where it was determined that an inmate was at substantial risk of imminent sexual abuse in

the last twelve months. As per a memo dated October 25, 2023 from the Warden, if a risk screening results in a finding that an inmate is at substantial risk of imminent sexual abuse or to be at substantial risk of imminent victimization, immediate coordinated action occurs to include notifications to Unit Team, the Captain, the Special Housing Unit, SIS, SIA, and psychologists, noted in the system as a PREA At Risk for Sexual Victimization, and a consultation regarding housing and programming placement to ensure safety is maintained. The agency head stated that the facility is to immediately safeguard the alleged victim by separating him/her from the potential danger. Actions vary depending on the severity of the threat. If the possible threat is by another inmate, a change may be made to the inmate's housing assignment, work assignment, or possible placement in the Special Housing Unit. If the possible threat is from a staff member, other options exist in addition to these, to include a change in the staff member's work assignment or removal from the facility while the investigation is conducted. The Warden discussed further in his interview that actions taken will include screening, psychology services will discuss concerns, the inmate can request protective custody, ensure the inmate is housed with safety in mind, and continuous monitoring. All fourteen random staff interviewed report that if they were to learn an inmate was at imminent risk of sexual abuse they would immediately ensure the inmate's safety by separating them from the alleged perpetrator and notify the operations Lieutenant. USP Canaan is compliant with all provisions of this standard.

115.63 Reporting to other confinement facilities

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.63 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that upon receiving an allegation that an inmate was sexually abused while confined at another facility the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. P.S. 5324.12 further states that in cases where there is an allegation that sexually abusive behavior occurred at another Bureau facility, the Warden of the victim's current facility reports the allegation to the Warden of the identified institution. In cases alleging sexual abuse by staff at another institution, the Warden of the inmate's current facility refers the matter directly to the Office of Internal Affairs (OIA). For non-Bureau secure privatized facilities, jails, juvenile facilities, and Residential Reentry Centers, the Warden will contact the appropriate office of the facility and notify the privatization management or the residential reentry management branches as appropriate. For non-Bureau facilities the Warden contacts the appropriate office of that correctional agency. A memo dated October 25, 2023,

from the Warden states that at USP Canaan, when an inmate alleges sexual abuse or sexual harassment while confined at another facility, the first responder PREA protocols are initiated. The memo further states that the Warden sends correspondence notifying the Warden or CEO of that facility within 72 hours of receiving the allegation. The memo further clarifies that if it is a Federal Bureau of Prisons facility, the USP Canaan SIS department notifies the SIS department at the other facility. As per the PAQ, USP Canaan received three allegations in the last twelve months that an inmate was sexually abused in another facility and notification was provided to that facility within 72 hours. This auditor was provided with the three notifications from the Warden to the facility in which the inmate was allegedly abused in. USP Canaan is compliant with this provision of the standard.

115.63 (b)

P.S. 5324.12 states that notifications outlined in provision a. of this standard are to be made as soon as possible, no later than 72 hours after receiving the allegation. This auditor was provided with the three notifications which were all provided within 72 hours after receiving the notification. USP Canaan is compliant with this provision of the standard.

115.63 (c)

P.S. 5324.12 states that notifications provided to other institutions must be documented. Documentation of the three notifications was provided to this auditor including the report of the allegation as well as psychology notes and a medical report. USP Canaan is compliant with this provision of the standard.

115.63 (d)

P.S. 5324.12 states that the facility head or agency office that receives notifications that an alleged sexual abuse occurred in the facility must ensure that the allegation is investigated appropriately. As per the PAQ, one notification was received that an inmate at another facility alleged they were sexually abused while at USP Canaan. This auditor reviewed eleven inmate-on-inmate sexual abuse investigation files while on-site including this file. The auditor reviewed the file and finds that the investigation was completed appropriately. The Agency Head stated that once the Warden receives the report of the allegation an investigation is started. The Warden was interviewed on-site and he reports that when USP Canaan receives an allegation from another facility it is forwarded to SIS for investigation. One staff on inmate sexual abuse investigation file was reviewed during the post audit phase. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of the standard.

115.64 Staff first responder duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.64 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: separate the alleged victim and abuser, preserve and protect any crime scene, request that the alleged victim not take any actions that can destroy physical evidence and ensure that the alleged abuser does not take any actions that can destroy physical evidence. As per the PAQ, there were nine allegations of sexual abuse in the last twelve months preceding the completion of the PAQ. Of those nine allegations, on five occasions the staff member responded and separated the alleged victim and alleged abuser, and only four occasions allowed for the collection of physical evidence. As per the PAQ, on four occasions the first responder preserved and protected the crime scene until appropriate steps were taken to collect evidence, on eight occasions the first responder requested that the alleged victim not take any action that could destroy physical evidence and on five occasions the first responder insured that the alleged abuser did not take any actions that could destroy physical evidence. Three staff considered to be first responders were interviewed. All three report that after receiving a report of sexual abuse the immediate action would be to ensure the safety of the alleged victim. As per all three staff interviewed the alleged victim and the alleged perpetrator would be separated, and the scene would be secured. Once the alleged victim is secured, the Operations Lieutenant is contacted. At this time the Operations Lieutenant takes over and makes all required notifications to the various disciplines involved in the investigation and follow-up. This includes notifications to medical and psychology. Two inmates who reported sexual abuse were interviewed. One reported that they reported initially to psychology three days after the alleged incident. The inmate reports that the investigation began immediately. The second inmate interviewed reported that he sent a slip to medical four times before it was handled. Once the slip was read staff acted immediately. This auditor inquired as to why the inmate's slip was not addressed immediately. Mail sent to medical is to be reviewed and responded to in three days. The inmate should have used another avenue to report for a more expeditious response. As soon as the mail was read and it was identified as a PREA incident, action was taken. The second inmate interviewed reported that he was removed from the cell and taken to medical where the investigation then began. USP Canaan is compliant with this provision of the standard.

115.64 (b)

As per P.S. 5324.12, staff are responsible for preserving the crime scene only, SIS staff are responsible for collecting information and evidence. As per the PAQ, there were no instances where the first responder was not custody staff. Fourteen random staff were interviewed as part of the on-site audit. All fourteen staff report that if they are the first person alerted that an inmate is allegedly being sexually abused

their role is to initially separate the alleged abuser from the alleged victim, ensure the safety of the alleged victim, and notify the Operations Lieutenant. All fourteen staff report that they must monitor the alleged victim and alleged perpetrator to not allow them to shower, change their clothing, brush their teeth, or take any other actions that could destroy physical evidence. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.65 Coordinated response

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.65 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse to include medical, mental health, leadership, security and investigatory staff. P.S. 5324.12 outlines the plan as such, staff report incidents of sexual abuse to the Operations Lieutenant, who refers the victim to Health Services for a physical assessment, and Psychology Services for assessment of vulnerability and treatment needs as well as notifies all applicable parties including the investigative staff, the Warden, and the PREA Compliance Manager. If the PREA Compliance Manager reviews the relevant factors and decides what level of response is required. This auditor was provided with a flow chart titled "Guide for First Responders/Operations Lieutenant When Approached With an Inmate Allegation of Sexual Abuse or Harassment." This flow chart outlines the steps from the reported allegation to the notifications. This auditor observed this chart in the Lieutenants office and while interviewing staff observed them reference a laminated reference card with the response protocol for incidents of sexual abuse. A memo dated October 25, 2023, from the Warden states that a coordinated plan has been established and is outlined to respond to an incident of sexual abuse/assault. The memo further states that the plan coordinates the actions and cooperation of first responders, health services, psychology services, special investigators, USP Canaan executive staff, an outside hospital and victim advocate. The memo states that the plan is constituted by P.S. 5324.12 and made local by USP Canaan Institutional Supplement 5324.12E. The Warden reiterated that a coordinated plan is in place and is followed at USP Canaan. USP Canaan is compliant with all provisions of this standard.

Preservation of ability to protect inmates from contact with abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.66 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into our renew any collective bargaining agreement or other agreement that limits 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. As per a memo dated October 25, 2023, from the Warden, USP Canaan has not had a collective bargaining agreement since June 2016, which is prior to the last PREA Audit. This auditor was provided with a copy of that agreement and confirms that there are no limitations to the agency's ability to remove alleged staff pending the outcome of an investigation. The agency head further confirmed that Article 30 of the Master Agreement permits the agency to remove any employee from an institution when an allegation adversely affects the Agency's confidence in the employee or security of the institution. The employee may be removed pending investigation. USP Canaan is compliant with all provisions of this standard.

115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.67(a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall establish a policy to protect all inmates and staff report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff and shall designate a staff member or department charged with monitoring retaliation. The individual charged with retaliation monitoring at USP Canaan is the PREA Compliance Manager (PCM). USP Canaan is compliant with this provision of the standard.

115.67 (b)

P.S. 5324.12 states that the agency shall employ multiple protection measures 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. As per the Agency Head, inmates and staff are protected from retaliation through monitoring. The Warden stated that some of the different measures taken to protect inmates and staff are retaliation monitoring by the PCM,

housing changes, and facility changes. The PCM who is responsible for retaliation monitoring was interviewed and reports that in order to prevent retaliation against inmates and staff who report sexual abuse or sexual harassment or who cooperate with sexual abuse or sexual harassment investigations a tracker is used to ensure that 30-60-90-day checks are completed to ensure that retaliation is not occurring. These checks include discussions with staff within the housing unit, checks for changes in housing, programming, work assignments, disciplinary reports and a oneon-one brief verbal check in with the individual whom is receiving retaliation monitoring. The PCM noted that some of the different measures taken to protect those inmates and staff from retaliation is reviewing their housing, programming, work assignments, meeting with them one-on-one and possibly changing their housing, work assignments, and programming if it is causing a concern. The PCM reported that contact is initiated with those being monitored for retaliation at 30-60-90 days and weekly Unit Team is evaluating. Two inmates who reported sexual abuse were interviewed, one reported that they felt protected enough against possible revenge from staff or other inmates because of their report, the other was unsure but couldn't indicate why. USP Canaan is compliant with this provision of the standard.

115.67 (c)

P.S. 5324.12 states that for at least 90 days following a reported incident of sexual abuse the agency shall monitor for any signs of retaliation. P.S. 5324.12 further indicates that the institution PREA Compliance Manager monitors staff and inmates who have reported sexual abuse allegations to protect them from retaliation for 90 days. If the initial monitoring indicates a continued need, periodic status checks will occur. As per the PAQ, retaliation monitoring occurs for at least 90 days. The PAQ indicates that there have been no occurrences of retaliation in the last twelve months. The Warden stated that some of the measures that could be taken if retaliation was suspected are changes to housing or a change of facility. The Warden also emphasized that if retaliation was suspected it would be investigated. The PCM, who is tasked with monitoring retaliation reports that to detect possible retaliation she looks for behavior problems, housing or work changes, and reviews incident reports. The PCM stated that all retaliation monitoring is at least 90 days in duration, however, if necessary, retaliation monitoring will continue, there is no maximum time period. USP Canaan is compliant with this provision of the standard.

115.67 (d)

As per P.S. 5324.12 monitoring of inmates shall also include periodic status checks. The PCM reports that she monitors incident reports, disciplinary reports, housing, work assignment changes, and programming to identify possible retaliation. The PCM discusses the inmates with the Unit Team, who check on them weekly. Every 30-60-90 days the PCM meets with the inmate one-on-one to check on. USP Canaan is compliant with this provision of the standard.

115.67 (e)

P.S. 5324.12 states that if any other individual who cooperates with an investigation

expresses a fear of retaliation, appropriate measures to protect that individual against retaliation will be taken. As per the agency head, if an inmate or staff member who cooperated with an investigation expresses fear of retaliation, that individual will be monitored in the same manner as the individual who reported the allegation and will be protected against such retaliation. As per the agency head some measures which would be taken to ensure safety would be housing changes, program changes, and work supervisor changes. The Warden further emphasized in his interview that if retaliation monitor is indicated an investigation would be completed, to protect the inmate possible measures taken would be a facility change, or housing change. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of the standard.

115.68 Post-allegation protective custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.68 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program, states that any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements standard 115.43. As per the PAQ no inmates were housed in involuntary segregation for any length of time due to risk of sexual abuse. As per the Warden, the agency policy prohibits placing inmates at high risk of sexual victimization or who have alleged sexual abuse involuntary segregated housing in lieu of other housing areas, unless an assessment has determined that there are no available alternative means of separation from potential abusers. The Warden further stated that involuntary segregated housing is to be used as a last resort only, however most individuals at high risk of sexual abuse or who have reported sexual abuse voluntarily request protective custody. As per the Warden if an individual is placed in involuntary segregation for high risk for sexual victimization or due to an allegation of sexual abuse an evaluation will be completed within two days of being placed there and then there will be a review seven days from the initial date of placement and every seven days after. The goal is to not house individuals at risk of sexual abuse or individuals who have reported sexual abuse in involuntary segregation for any period of time. As per the Warden there have been no occurrences of this in the last twelve months. Two staff who work in segregated housing were interviewed on site. Both staff report that inmates are typically not held in segregated housing due to allegations of sexual abuse or risk of being a victim of sexual abuse however if an individual were to be placed in involuntary segregation due to risk of sexual abuse or an allegation of sexual abuse programs, privileges, education, and work opportunities would be provided if possible. Both staff interviewed also stated that the facility reviews the status of all inmates in segregated housing once every week during administrative rounds. USP Cannan is

complaint with this standard.

115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.71 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that when the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third party and anonymous reports. P.S. 5324.12 further states that at the conclusion of an investigation the allegations must be indicated as either substantiated, unsubstantiated, or unfounded. P.S. 5324.12 outlines the full response protocol which includes what notifications must be made. This auditor reviewed eleven inmate on inmate sexual abuse investigation files on site, ten were completed, one was pending. All eleven investigations were started and completed in a timely manner. This auditor met with the SIS who conducts all PREA inmate on inmate related investigations. The SIS stated that investigations are started immediately, once notified of an incident the SIS begins interviewing the alleged victim, perpetrator, and any witnesses. The SIS stated that during the investigation process he will conduct interviews, gather evidence if applicable, review video surveillance, and the criminal history of the alleged perpetrator and alleged victim. As per the SIS all investigations he is charged with conducting are conducted in the same manner regardless of how they were reported. There were four staff on inmate sexual abuse allegations in which the facility sent the files to the Office of Internal Affairs for initial review and one of the files was returned two months later, but the investigation had not yet been completed. The original allegation was from nine months prior to the onsite audit. The other three pending investigations, the allegations were made five, two, and one month prior. This auditor was provided with writeups on the allegations on site and requested the Warden provide a memo indicating that the staff involved in two of the incidents in which the inmate was still housed at USP Canaan, were not to work the housing area the alleged victim was housed on. Two memos from the Warden were provided from the Warden dated January 25, 2024 stating that the staff members involved in the specific open cases were not to work in the housing area where the alleged inmate victim was housed. This auditor requested that the SIA complete the investigation within two weeks regarding the allegation from April 2023. This was completed and this auditor received notification of completion on February 16, 2024. This auditor reviewed the investigation file over a Teams meeting with the Executive Assistant to ensure that it was completed appropriately as per facility protocol, thoroughly, and objectively. Corrective action was done by way of facility directive. A memo from the Warden dated March 6, 2024 states that the following

measures are in place, when a sexual abuse allegation is made involving staff the Warden will be notified immediately and initiate the required notifications and referrals. As per the memo tracking has been implemented to ensure timely completion of requisite steps to ensure adherence to standards. The memo from the Warden further emphasizes that the staff member will be separated from the alleged victim and the alleged victim will be safeguarded. The memo states that retaliation monitoring will begin upon receipt of the allegation. The Warden also notes that a 30-day after-action will be completed at the conclusion of the investigation unless the investigation is found to be unfounded. This memo indicates that once the local SIA is given approval from OIA to conduct a local investigation, the Warden will be notified and ensure it is done in a timely manner. These steps outlined in the March 6, 2024 memo from the Warden bring USP Canaan into compliance with this standard. The BOP as an agency must address the timeliness of the external OIA review process. USP Canaan is compliant with this provision of the standard being they have put processes in place to ensure the inmate is protected and the investigation is conducted in a timely manner once it is returned to the institution for administrative investigation.

115.71 (b)

P.S. 5324.12 states that the agency shall use investigators who have received specialized training in sexual abuse investigations. The investigator interviewed stated that he completed NIC training on investigating sexual abuse in a confinement setting. This auditor was provided with the training records indicating all investigative staff have completed the training. USP Canaan is compliant with this provision of the standard.

115.71 (c)

P.S. 5324.12 states that investigators shall gather and preserve direct and circumstantial evidence, shall interview alleged victims, suspected perpetrators, and witnesses, and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. P.S. 5324.12 clarifies that evidence collection is not a staff first responder responsibility. That is conducted by the investigators. P.S. 5324.12 further clarifies that previous unsubstantiated or unfounded complaints and reports cannot be used as evidence. The SIS interviewer stated that the first steps he would take when notified that an investigation was needed is to conduct an initial interview with the alleged victim. Afterwards the SIS stated that he would conduct additional interviews with individuals who were witnesses and the alleged perpetrator. The SIS would collect evidence such as clothing, if applicable, review camera footage, and review the criminal history and bio on the alleged perpetrator and alleged victim. Some evidence that would be included in the investigation would be interviews, photographs, video, clothing, or anything else found in the cell that is applicable to the investigation. USP Canaan is compliant with this provision of the standard.

115.71 (d)

P.S. 5324.12 states that when the evidence appears to support criminal prosecution, the agency shall conduct compelled interviews after consulting with prosecutors. The

SIS reported that if evidence appears to support a crime was committed, he would consult with SIA and the FBI. All criminal cases are handled by the FBI. USP Canaan is compliant with this provision of the standard.

115.71 (e)

P.S. 5324.12 states that the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and should not be determined by the person's status as an inmate or staff. P.S. 5324.12 further states that a polygraph examination shall not be required. The SIS interviewed stated he judges the credibility of an alleged victim, suspect, or witness on a case-by-case basis, he follows the evidence. The SIS stated that under no circumstances would he require an inmate who alleges sexual abuse to submit to a polygraph examination or truth telling device as a condition for proceeding with an investigation. Both inmates interviewed who made an allegation of sexual abuse in the last twelve months report that they were not required to take a polygraph test as a condition for proceeding with the investigation. USP Canaan is compliant with this provision of the standard.

115.71 (f)

P.S. 5324.12 states that administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse and shall be documented in written reports that included description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. P.S. 5324.12 states that administrative investigations should also consider whether other factors such as physical layouts, staffing patterns, institution operations, contributed to the abuse. The SIS interviewed reports that he reviews the investigations with the Captain and Warden if he has concerns about any staff actions or failures to act that may have led to the sexual abuse. The SIS documents all investigations. This auditor reviewed all twelve files with the SIS. Information in the files includes a summary of the allegation, interviews, medical and mental health assessments, investigation outcome, which is signed by the inmate, retaliation monitoring information, and after-action reports. USP Canaan is compliant with this provision of the standard.

115.71 (g)

P.S. 5324.12 states that criminal investigation shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence. The criminal investigations are conducted by the FBI. As per the SIS an administrative file would be created, and the findings of the criminal investigation would be noted in the administrative file. There have been no criminal investigations in the last twelve months. USP Canaan is compliant with this provision of the standard.

115.71 (h)

P.S. 5324.12 states that substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. As per the PAQ there were no allegations of

conduct referred for prosecution since the last PREA audit. As per the SIS, if it appears that a crime was committed the allegation is referred to the FBI. USP Canaan is compliant with this provision of the standard.

115.71 (i)

P.S. 5324.12 states that all written reports shall be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. Investigations are maintained by the SIS for inmate-on-inmate PREA allegations and the SIA for staff on inmate PREA allegations. USP Canaan is compliant with this provision of the standard.

115.71 (j)

P.S. 5324.12 states that the departure of the alleged abuser or victim from employment or control of the facility or agency shall not provide a basis for terminating the investigation. As per the SIS, if an inmate were to leave the facility before the investigation was completed the investigation would continue until completed and notification would be made through the U.S. Mail. This auditor noted in one of the investigation files was a returned notification letter which was sent through the U.S. Mail. The SIA would conduct the staff on inmate investigations which would continue regardless of if the staff member was still employed at the facility. USP Canaan is compliant with this provision of the standard.

115.71 (I)

P.S. 5324.12 states that the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. As per the SIS, PREA Coordinator, Warden, and the PREA Compliance Manager, when the FBI or OIG is conducting a criminal investigation, the facility investigators are to act as the liaison. They would provide and gather information as requested and stay in contact for regular updates on the progress of the investigation. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard. This auditor recommends that the agency address the timeliness of staff involved investigations when sent for review with OIA.

115.72	Evidentiary standard for administrative investigations			
	Auditor Overall Determination: Meets Standard			
	Auditor Discussion			
	115.72 (a)			

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that the agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The investigative staff interviewed reported that a preponderance of the evidence is the standard required to substantiate allegations of sexual abuse and sexual harassment. USP Canaan is compliant with this standard.

115.73 Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.73 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that following an investigation into an inmate's allegation of sexual abuse, the Special Investigative Services Lieutenant provides the inmate with notification of the outcome of the investigation. As per the PAQ, 8 investigations of alleged inmate sexual abuse were completed in the last twelve months, at the time of the on-site audit the number had increased to 11 with one investigation pending completion. As per the PAQ all of the inmates were notified of the outcomes of the investigations. This auditor reviewed 11 inmate sexual-abuse investigation files on-site and the 10 completed investigations include a notification to the inmate. There were also four investigations pending which were sexual abuse allegations against staff. These investigations are completed by SIA and must go through a different process due to the involvement of staff. This auditor was provided with a PREA Compliance Manager Information Tracking Log which tracks the PREA incidents and indicates all the actions that must be taken such as retaliation monitoring, notification to the inmate, and after-action review. The SIS and Warden confirmed that notifications are made in writing at the end of each investigation. One of the two inmates interviewed who reported sexual abuse reported that notification was made at the completion of the investigation. The other inmate said the investigation has not yet been completed. USP Canaan is compliant with this provision of the standard.

115.73 (b)

P.S. 5324.12 states that if the agency did not conduct the investigation, it shall request the information from the investigative agency in order to inform the inmate. As per the PAQ, no investigations were completed by an outside agency in the last twelve months. USP Canaan is compliant with this provision of the standard.

115.73 (c)

P.S. 5324.12 states that following an inmate's allegation that a staff member has

committed sexual abuse against the inmate, the inmate shall be informed when the staff member is no longer posted within the inmate's unit, the staff member is no longer employed at the facility, the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility, or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. Neither of the two inmates who alleged sexual abuse that were interviewed had allegations against staff. While on-site, the Warden issued two memos dated January 25, 2024, stating that two staff members who were alleged perpetrators in inmate allegations of sexual abuse were not to work in those inmate's housing areas. USP Canaan was not in compliance with this initially, but upon learning of non-compliance the Warden immediately issued the memos. USP Canaan is compliant with this provision of the standard.

115.73 (d)

P.S. 5324.12 states that following an inmate allegation of sexual abuse by another inmate, the agency shall inform the alleged victim whenever the agency learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. The two inmates who reported sexual abuse that were interviewed reported that this was not applicable to them as there were no criminal charges. USP Canaan is compliant with this provision of the standard.

115.73 (e)

P.S. 5324.12 states that all notifications shall be documented and maintained in the investigation file. As per the PAQ all notifications were provided and documented. This auditor reviewed all completed investigation files on site and found that the notifications were provided and documented. A memo dated October 25, 2023 from the Warden states that at USP Canaan, upon completion of an investigation the inmate who made the allegation is informed in writing via certified mail or in person of the outcome of the investigation. This auditor did observe certified mail receipts and a returned letter in the investigation files to indicate they were mailed, or attempts were made to mail the notification letters. This auditor was also provided with a template for the notification letter and found it to be sufficient. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.76 (a)
	P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states

that Bureau employees are subject to the Program Statement Standards of Employee Conduct, the Master Agreement, and employment-based laws rules and regulations. P.S. 5324.12 further states that staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. There were no such incidents of disciplinary sanctions on staff in the last twelve months. USP Canaan is compliant with this provision of the standard.

115.76 (b)

P.S. 5324.12 states that termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. P.S. 5324.12 further states that if evidence supports that a staff member engaged in sexual abuse the matter will first be referred for criminal prosecution. Administrative discipline will be conducted using the Program Statement Standards of Employee Conduct, the Program Statement Human Resource Management Manual, and the collective bargaining agreement. As per the PAQ, no staff have violated the agency's sexual abuse and sexual harassment policies in the last twelve months. A memo from the Warden dated October 25, 2023 further stated that there have been no instances where staff have violated agency sexual abuse or sexual harassment policies at USP Canaan in the last twelve months. The Warden also notes that if a violation were to have occurred it would be reported to law enforcement and/or any relevant licensing body. USP Canaan is compliant with this provision of the standard.

115.76 (c)

P.S. 5324.12 states that disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment shall be commensurate with the nature and circumstances of the acts committed, the staff members disciplinary history, and the sanctions imposed for comparable offenses by other staff and similar histories. As per the PAQ, in the past 12 months no staff have been disciplined for violation of the agency sexual abuse or sexual harassment policies. USP Canaan is compliant with this provision of the standard.

115.76 (d)

P.S. 5324.12 states that 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, should be reported to law enforcement agencies, unless the activity was not criminal, and to any relevant licensing bodies. As per the PAQ, no staff from the facility have been reported to law enforcement or licensing boards following their termination for violating agency sexual abuse or sexual harassment policies in the last 12 months. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.77 Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.77 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies or other relevant licensing bodies, unless the activity was not criminal. As per the PAQ, no volunteers or contractors have been reported to law enforcement for engaging in sexual abuse of inmates. A memo dated October 25, 2023 from the Warden states that there are no contractors or volunteers from the institution that have violated the agency sexual abuse or sexual harassment policies, resulting in reports to law enforcement agencies or relevant licensing bodies. USP Canaan is compliant with this provision of the standard.

115.77 (b)

P.S. 5324.12 states that appropriate remedial measures shall be taken and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. A memo from the Warden dated October 25, 2023 states that if a volunteer or contractor did violate the agency's sexual abuse or sexual harassment policies there is protocol in place to safeguard and remediate further contact with inmates at the institution. The memo further outlines the process to be the warden placing the contractor or volunteer on a Special Investigative list, identified as an individual who is not allowed any visiting privileges at the institution. The memo also states that any inmate victim of a contractor or volunteer would be placed on an enhanced monitoring list with the Warden's approval which would safeguard information should the inmate be transferred. The Warden reiterated this during an interview on-site. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.78 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding or criminal finding of guilt that the inmate engaged in inmate-on-inmate sexual abuse. As per the PAQ, there have

been no administrative findings and no criminal findings of guilt for inmate-on-inmate sexual abuse that has occurred in the facility in the last twelve months. USP Canaan is compliant with this provision of the standard.

115.78 (b)

P.S. 5324.12 states that sanctions shall be 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. As per the Warden, the hearing officer considers the circumstances of abuse committed and the inmate's disciplinary history when sanctioning. The sanctions given are comparable to similar offenses with inmates who have similar histories. USP Canaan is compliant with this provision of the standard.

115.78 (c)

P.S. 5324.12 states that disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what sanctions should be imposed. As per the Warden the hearing officer can request a mental health evaluation as part of his sanctioning. As per the Warden mental health is always considered for all disciplinary sanctions. USP Canaan is compliant with this provision of the standard.

115.78 (d)

P.S. 5324.12 states that the facility shall consider whether to require the offending inmate to participate in therapy, counseling, or other interventions as a condition of access to programming or other benefits. As per the two mental health staff interviewed, services are offered to inmates who have perpetuated sexual abuse, however these services are not typically required as a condition of access to programming and other benefits. USP Canaan is compliant with this provision of the standard.

115.78 (e)

P.S. 5324.12 states that an inmate can be disciplined for sexual contact with staff but only upon a finding that the staff member did not consent to such contact. P.S. 5324.12 further clarifies that sexual abuse and sexual harassment of staff members should be addressed through other existing statutes, policies, and procedures such as using the inmate discipline system and referral to criminal prosecution. A memo from the Warden dated October 25, 2023, states that at USP Canaan there were no substantiated investigations of sexual abuse or sexual harassment where an inmate had engaged in sexual conduct with a staff member. USP Canaan is compliant with this provision of the standard.

115.78 (f)

P.S. 5324.12 states that a report of sexual abuse made in good faith-based upon a reasonable belief that the alleged conduct occurred shall not constitute as a false report even if the investigation does not establish evidence sufficient to substantiate

the allegation. P.S. 5324.12 clearly states that inmates will be held responsible for manipulative behavior and intentionally making false allegations. USP Canaan is compliant with this provision of the standard.

115.78 (g)

P.S. 5324.12 states that all sexual activity between inmates is prohibited and is subject to discipline. USP Canaan is compliant of this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.81 Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.81 (a)

P.S. 5324.12, Sexually Abusive Behavior and Intervention Program states that if the inmates risk screening indicates they have experienced prior sexual victimization, whether it occurred in an institution or in the community, the inmate is offered a follow up meeting with Psychology Services within 14 days of the intake screening. As per the PAQ, 100% of all inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. A memo dated October 25, 2023, states that Psychology Services at USP Canaan maintains documentation of follow-up with victims and perpetrators in the Bureau Electronic Medical Records. The memo further states that as a safeguard to ensure follow-up of with all victims and perpetrators, psychology services also maintains a secondary tracking form. As per the three screening staff interviewed onsite, if an inmate discloses prior victimization of sexual abuse a referral is made to psychology services for follow-up. The screening staff explained that the screening is sent to psychology services and the inmate is seen within fourteen days for follow-up. Four of the five inmates interviewed who reported a history of sexual abuse at intake report that they were seen by psychology soon after coming to the facility. The one inmate stated that he refuses to see psychology because he does not believe in their profession. USP Canaan is compliant with this provision of the standard.

115.81 (b)

P.S. 5324.12 states that if the risk screening indicates that the inmate previously perpetrated sexual abuse, whether in an institution or the community, staff shall ensure that the inmate is offered a follow up meeting with the mental health practitioner within 14 days of the intake screening. As per the PAQ, 100% of all inmates who previously perpetrated sexual abuse as indicated during screening were

offered a follow-up meeting with a medical or mental health practitioner. A memo dated October 25, 2023, states that Psychology Services at USP Canaan maintains documentation of follow-up with victims and perpetrators in the Bureau Electronic Medical Records. The memo further states that as a safeguard to ensure follow-up of with all victims and perpetrators, psychology services also maintains a secondary tracking form. The three screening staff interviewed stated that if a screening indicated that an inmate previously perpetrated sexual abuse a psychology referral is sent, and the individual is seen within fourteen days. This auditor met with the psychology chief on-site and was walked through the process. When an inmate is identified as having previously been a victim of sexual abuse that screening form is scanned to psychology services and a task is created to follow up with that inmate. This auditor reviewed documentation of such screenings on site and was provided screenings as part of the sample documentation. USP Canaan is compliant with this provision of the standard.

115.81 (c)

P.S. 5324.12 states that if a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow up meeting with medical or mental health practitioners within 14 days of screening. A memo dated October 25, 2023 states that Psychology Services at USP Canaan maintains documentation of follow-up with victims and perpetrators in the Bureau Electronic Medical Records. The memo further states that as a safeguard to ensure follow-up of with all victims and perpetrators, psychology services also maintains a secondary tracking form. This auditor met with the psychology chief on-site and was walked through the process. When an inmate is identified as having previously been a perpetrator of sexual abuse that screening form is scanned to psychology services and a task is created to follow up with that inmate. This auditor reviewed documentation of such screenings on site and was provided screenings as part of the sample documentation. USP Canaan is compliant with this provision of the standard.

115.81 (d)

P.S. 5324.12 states that information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions. A memo from the Warden dated October 25, 2023 states that all specific documentation regarding incidents of sexual abuse, history of sexual abusiveness is maintained within the Bureau Electronic Medical Record/Psychology Data System. These electronic record keeping systems are restricted to health services and psychology services only, no custody staff or any non-clinical staff have access to these systems. As per the memo, information is shared with other is necessary but is strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments. USP Canaan is compliant with this provision of the standard.

115.81 (e)

P.S. 5324.12 states that medical and mental health practitioners shall 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. The three medical and mental health staff interviewed stated that informed consent is given before reporting about prior sexual victimization that did not occur in an institution. A memo from the Warden dated October 25, 2023 states that medical and mental health practitioners obtain informed consent from inmates prior to reporting information about prior sexual victimization that did not occur in an institutional setting. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of the standard.

115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.82 (a)

P.S. 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. P.S 5324.12 further details the procedures for inmate victims. Medical staff are responsible for examination, documentation, and treatment of inmate injuries arising from sexually abusive behaviors. When an inmate selfreports, or is referred to health services, medical staff will notify Psychology Services and Correctional Services prior to conducting an injury assessment. Health services staff are to perform the injury assessment without compromising forensic evidence. The forensic examination is performed by a qualified sexual assault examiner at the local hospital. The forensic examination should occur as soon as practicable, but within 72 hours of staff becoming aware that an inmate reported involvement in a sexually abusive assault. P.S. 5324.12 also outlines the procedures for alleged inmate perpetrators. Health services clinicians will perform a physical injury assessment on any alleged inmate perpetrator without compromising forensic evidence. A memo dated October 25, 2023 from the Warden states that in the past twelve months there have been no instances that have required emergency medical treatment and/or crisis intervention regarding sexual abuse or sexual harassment. The memo further states that in the event in which emergency medical treatment and /or crisis intervention is needed a log would be utilized as a secondary tracking method to ensure the integrity and timeliness of the process. Prior to this auditor being on-site, an incident occurred in which an individual was sent to the hospital for a forensic examination. This auditor reviewed this file with the PREA Compliance Manager

(PCM) and the SIS investigator. The services were provided timely and documented in the file. All three medical and mental health staff interviewed report that inmate victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services as soon as possible. The two inmates interviewed who reported sexual abuse report that they were seen by psychology and medical not long after their allegation was received. USP Cannan is compliant with this provision of the standard.

115.82 (b)

P.S. 5324.12 states that if no qualified medical or mental health practitioners are on duty at the time of the report of a recent abuse is made, security staff first responders will take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. Three staff first responders were interviewed and report that upon becoming aware of sexual abuse or sexual harassment their first step is to ensure the safety of the alleged victim, then they must secure the scene, ensure the alleged victim and perpetrator do not do anything that could destroy any evidence such as use the bathroom, shower, brush teeth, change clothes, and then notify the operations Lieutenant who will then make all notifications and begin the investigation process. USP Canaan is compliant with this provision of the standard.

115.82 (c)

P.S. 5324.12 states that Inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis. A memo dated October 25, 2023 from the Warden notes that timely information and services regarding sexually transmitted infection prophylaxis is provided as needed. The file reviewed by this auditor in which an inmate was sent to the hospital for a forensic examination notates that sexually transmitted infections prophylaxis was offered. As per the three medical and mental health staff interviewed, victims of sexual abuse meet with the Infectious Disease Coordinator and are provided with information regarding sexually transmitted infection prophylaxis. USP Canaan is compliant with this provision of the standard.

115.82 (d)

P.S. 5324.12 states that treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. As per all medical and mental health staff interviewed and the two inmates who reported sexual abuse, no co-pays or fees were charged to the inmate's account regarding services received in response to the alleged sexual abuse. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of this standard.

115.83

Ongoing medical and mental health care for sexual abuse victims and abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.83 (a)

P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program states that 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 shall be offered. This auditor reviewed eleven inmate on inmate sexual abuse investigation files on-site and in all eleven files is documentation from medical and mental health indicating that an evaluation was done. All but one of the five inmates who reported that they had a history of sexual abuse during their risk screening reported being seen by psychology services for follow-up, the one who did not receive services refuses to be seen by psychology staff. USP Canaan is compliant with this provision of the standard.

115.83 (b)

P.S. 5324,12 states that the evaluation and treatment of such victims shall 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. The one mental health staff interviewed reports that when evaluating an alleged victim of sexual abuse she first conducts an interview to understand what, when and where the incident happened. The psychology department takes a trauma informed treatment approach and offers victim advocacy. As per the mental health staff interviewed follow-up services are always offered. The two medical staff interviewed report that the medical evaluation of an alleged victim of sexual abuse would be an interview to understand what happened with detail, a focused examination to determine what else is needed medically, treatment of any serious injuries, stabilization, and determine if a forensic examination is appropriate. One of the two inmates interviewed who reported sexual abuse notes that he was seen by medical and sent for a medical test and he was also seen by psychology. The other inmates notes that it was not applicable to his incident. USP Canaan is compliant with this provision of the standard.

115.83 (c)

P.S. 5324.12 states that victims will be provided with medical and mental health services consistent with the community level of care. All three medical and mental health staff interviewed stated that medical and mental health services offered at USP Canaan are consistent with community level of care. USP Canaan is compliant with this provision of the standard.

115.83 (d)(e)

USP Canaan is an all-male facility. Provisions d and e are not applicable.

115.83 (f)

P.S. 5324.12 states that inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Both inmates interviewed who reported sexual abuse stated that their testing for sexually transmitted infections was not needed due to the nature of their incidents. USP Canaan is compliant with this provision of the standard.

115.83 (g)

As per P.S. 5324.12, all treatment services are to be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. As per all medical and mental health staff interviewed and the two inmates who reported sexual abuse, no co-pays or fees were charged to the inmate's account regarding services received in response to the alleged sexual abuse. USP Canan is compliant with this provision of the standard.

115.83 (h)

As per P.S. 5324.12, a mental health evaluation of all known inmate-on-inmate abusers will be conducted within sixty days of learning of such abuse history and treatment will be offered when deemed appropriate by mental health practitioners. The mental health staff interviewed reports that all known inmate-on-inmate abusers are evaluated by psychology services to determine whether they are a danger to others, and to evaluate the need for additional services. USP Canaan is compliant with this provision of the standard.

USP Canaan is compliant with all provisions of the standard.

115.86 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

115.86 (a)

An on-site review of investigations indicates that there were 16 sexual abuse allegations, twelve were completed administrative investigations at the time of the completion of this audit report. This auditor reviewed a sampling of twelve afteraction reports provided pre-audit and noted the nine investigations with unsubstantiated findings had after-actions in the completed investigation files. The PREA Compliance Manager Information Tracking Log was provided to this auditor which notes that an after-action needs to be completed within 30 days of the completion of the investigation. This tracker is used to ensure that all tasks required

by policy are completed regarding the facility's response to a PREA related allegation.
USP Canaan is compliant with this provision of the standard.

115.86 (b)

As per the P.S. 5324.12, Sexually Abusive Behavior Prevention and Intervention Program this review is to occur within 30 days of the conclusion of the investigation. All after-action's reviewed were completed within 30 days of the completion of the investigation. USP Canaan is compliant with this provision of the standard.

115.86 (c)

As per P.S. 5324.12, the review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners, as well as input from the local Union President or his/her designee. A review of the after-actions reviewed by this auditor and as indicated from the interview with the Warden the USP Canaan review team consists of the Warden, PREA Compliance Manager (PCM), Chief Psychologist, SIS Lieutenant, Unit Manager, Captain, and Health Service Administrator. USP Canaan is compliant with this provision of the standard.

115.86 (d)

As per P.S. 5324.12, the review team shall consider and do the following: 1) Whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse. 2) Whether the incident or allegation was motivated by race; ethnicity; gender identity; or perceived status; or gang affiliation; was motivated or otherwise caused by other group dynamics of the facility. 3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse. 4) Assess the adequacy of staffing levels in that area during different shifts. 5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. 6) Prepare a report of its findings, including but not necessarily limited to determinations made and any recommendations for improvement and submit such a report to the facility head and PREA Compliance Manager. A review of the afteractions provided to this auditor pre-audit and while on-site indicates that all considerations required by this provision are included in the after-action review. The Warden stated during his interview that all considerations required by this provision are discussed at the review. The PCM is included as part of the after-action review team, but also ensures that the reviews are conducted utilizing the tracker tool. The PCM reviews the after-action review memos and sends them to the regional PREA Coordinator. If actions need to be taken the PCM will work to develop a corrective action plan and implement that plan. The Warden notes that after- actions can result in recommendations for additional training, staff placement, camera placement, or policy or procedure review. All three staff who are part of the incident review team who were interviewed stated that all considerations required by this provision of the standard are reviewed during the after-action review. This includes examining the area where the incident occurred, examining adequacy of staffing and monitoring technology. USP Canaan is compliant with this provision of the standard.

115.86 (e)

As per P.S. 5324.12, the facility shall implement the recommendations for improvement or shall document its reasons for not doing so. A memo dated November 15, 2023 from the PCM states that there were two corrective action done as a result of after-action reviews. These were corrections to how an investigation was handled. Both corrective actions were completed and no further incidents regarding investigation processes were indicated as per the memo. USP Canan is compliant with this provision of the standard.

USP Canaan is compliant with this provision of the standard.

115.87	Data collection
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.88	Data review for corrective action
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.89	Data storage, publication, and destruction			
	Auditor Overall Determination: Audited at Agency Level			
	Auditor Discussion			

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.401 (a)
	USP Canaan is part of the Federal Bureau of Prisons (BOP). All BOP facilities were

audited in the previous three-year audit cycle.

115.401 (b)

USP Canaan is part of the Federal Bureau of Prisons (BOP). The BOP has a schedule for all their facilities to be audited within a three-year audit cycle, with one third being audited each year. USP Canaan is being audited in the second year of the current three-year cycle.

115.401 (h)

This auditor had access to and the ability to observe all areas of the facility while on-site.

115.401 (i)

This auditor was permitted to request and receive copies of any relevant documents including electronically stored information.

115.401 (m)

This auditor was able to conduct private interviews with inmates while on-site.

115.401 (n)

Inmates were permitted to send confidential information and/or correspondence to the auditor in the same manner as if they were communicating with legal counsel. This auditor observed the facility postings while on site indicating how to send correspondence to the auditor. Inmates and staff acknowledged seeing the signage throughout the facility during interviews while on-site.

This auditor finds USP Canaan to be in compliance with all provisions of this standard.

115.403	Audit contents and findings
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

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 (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 o	f 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.)	na	
115.12 (b)	Contracting with other entities for the confinement o	f inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na	
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	yes	

	practices?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
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.)	na
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 facility does not have female inmates.)	na	
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	yes	

	genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	
	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	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	(f) Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.16 (a)	Inmates with disabilities and inmates who are limited proficient	l English
	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

1?	l English
cy ensure that written materials are provided in ugh methods that ensure effective communication ith disabilities including inmates who: are blind or	yes
cy ensure that written materials are provided in ugh methods that ensure effective communication ith disabilities including inmates who: Have limited	yes
cy ensure that written materials are provided in ugh methods that ensure effective communication ith disabilities including inmates who: Have abilities?	yes
nclude, when necessary, providing access to to can interpret effectively, accurately, and th receptively and expressively, using any cialized vocabulary?	yes
nclude, when necessary, ensuring effective with inmates who are deaf or hard of hearing?	yes
cy take appropriate steps to ensure that inmates is have an equal opportunity to participate in or aspects of the agency's efforts to prevent, detect, sexual abuse and sexual harassment, including: "," please explain in overall determination notes.)	yes
cy take appropriate steps to ensure that inmates in have an equal opportunity to participate in or aspects of the agency's efforts to prevent, detect, sexual abuse and sexual harassment, including: ave speech disabilities?	yes
cy take appropriate steps to ensure that inmates is have an equal opportunity to participate in or aspects of the agency's efforts to prevent, detect, sexual abuse and sexual harassment, including: ave psychiatric disabilities?	yes
s have an equal opportunity to participate in or aspects of the agency's efforts to prevent, detect, sexual abuse and sexual harassment, including:	yes
	cy take appropriate steps to ensure that inmates is have an equal opportunity to participate in or aspects of the agency's efforts to prevent, detect, sexual abuse and sexual harassment, including: ave intellectual disabilities? Cy take appropriate steps to ensure that inmates is have an equal opportunity to participate in or

	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 proficient	l English
	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 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to	yes

	consent or refuse?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
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	yes
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	contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
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, whichever is later.)	na
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	yes

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

	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)	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.)	
115.22 (a)	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.)	
115.22 (a)	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.) Policies to ensure referrals of allegations for investig Does the agency ensure an administrative or criminal	ations
115.22 (a) 115.22 (b)	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.) Policies to ensure referrals of allegations for investig Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	ations yes 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 investig	ations
	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 inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes

	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
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 to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	

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	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
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	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 prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

	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.)	na
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	yes

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	health care practitioners who work regularly in its facilities.)	
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	yes
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115.41 (f)	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: history of prior institutional violence or 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: prior acts of sexual abuse?	yes
115.41 (e)	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: (10) Whether the inmate is detained solely for civil immigration purposes?	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: (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: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender nonconforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	

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	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	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to	yes
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	shower separately from other inmates?	
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	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	yes

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	are at high risk of sexual victimization have access to: Programs to the extent possible?	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
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	yes

	can be arranged?	
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 and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
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.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	no
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.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (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.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision,	yes

does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	
At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
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.)	yes
Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
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.)	yes
After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
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After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) 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.) 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.) 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.) 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.) 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

	(N/A if agency is exempt from this standard.)	
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
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.)	yes
115.53 (a)	Inmate access to outside confidential support service	es
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support service	! S
	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 service	es
	Does the agency maintain or attempt to enter into memoranda of	yes
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	understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
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 sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (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	yes

	confidentiality, at the initiation of services?	
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	yes

	required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
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	
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
115.65 (a) 115.66 (a)	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	
	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? Preservation of ability to protect inmates from contact	
	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? Preservation of ability to protect inmates from contact abusers Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that 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?	ct with
115.66 (a)	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? Preservation of ability to protect inmates from contact abusers Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that 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?	ct with

with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	
Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
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
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 of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	retaliation by other inmates or staff? Has the agency designated which staff members or departments are charged with monitoring retaliation? 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? 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? Except in instances where the agency determines that 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? 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 is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? Except in instances where the agency determines that a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? Except in instances where the agency determines that a report of sexual abuse, does the agency: Monitor any inmate housing changes? Except in instances where the agency determines that a report of sexual abuse, does the agency: Monitor inmate housing changes?

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor 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, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
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	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
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 (I)	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 investigation	S
	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 order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
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	yes

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	committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
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	yes

	have engaged in sexual abuse?	
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 70 (6)		
115.78 (f)	Disciplinary sanctions for inmates	
115./8 (T)	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 (f)	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
	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
	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? Disciplinary sanctions for inmates If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.78 (g)	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? Disciplinary sanctions for inmates If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes

	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 sex	ual 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 sex	ual 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 sex	ual 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 serv	ices
	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 serv	ices
	If no qualified medical or mental health practitioners are on duty	yes
	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?	
	staff first responders take preliminary steps to protect the victim	yes
	staff first responders take preliminary steps to protect the victim	

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 serv	ices
	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 a victims and abusers	buse
	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 a victims and abusers	buse
	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 a victims and abusers	buse
	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 al victims and abusers	buse
	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 a victims and abusers	buse
	If pregnancy results from the conduct described in paragraph §	na

	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.)	
115.83 (f)	Ongoing medical and mental health care for sexual al victims and abusers	buse
	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 al victims and abusers	buse
	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 al victims and abusers	buse
	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 has been determined to be unfounded?	yes
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	

	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (m)	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 (i)	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 (h)	Frequency and scope of audits	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.86 (e)	Sexual abuse incident reviews	
	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
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	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: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	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

PREA Agency Audit Report: Final

Name of Agency: Federal Bureau of Prisons

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/04/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	
Auditor Full Name as Signed: Marc Coudriet	Date of Signature: 10/04/ 2023

AUDITOR INFORMATION	
Auditor name:	Coudriet, Marc
Email:	usmc58312215@outlook.com
Start Date of On- Site Audit:	
End Date of On-Site Audit:	

AGENCY INFORMATION	
Name of agency:	Federal Bureau of Prisons
Governing authority or parent agency (if applicable):	U.S. Department of Justice
Physical Address:	320 1st Street Northwest, Washington , Dist. Columbia - 20534
Mailing Address:	

Telephone number: 2023073250

Agency Chief Executive Officer Information:		
Name:	Colette S. Peters, Director	
Email Address:	bop-rsd-preacoordinator@bop.gov	
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Agency-Wide PREA Coordinator Information			
Name:	Cynthia Campagna	Email Address:	ccampagna@bop.gov

Agency 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:	
0	
Number of sta	andards met:
1	0
Number of standards not met:	
0	

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.11(a)
	DIRECTIVE AND DOCUMENT REVIEW:
	Pre-Audit Questionnaire.
	BOP PREA Plan
	Agency zero-tolerance statement.
	Organizational charts, interviews.
	INTERVIEWS.
	Agency PREA Coordinator.
	FINDINGS:

Agency Directives and BOP PREA Plan address the requirements of this provision. The agency mandates a zero-tolerance directive towards all forms of sexual abuse and sexual harassment and outlines the agency's strategies on preventing, detecting, and responding to such conduct. Agency policies addressed "Preventing" sexual abuse and sexual harassment through the designation of a PREA Coordinator and PREA Compliance Manager, Criminal Background Checks (Staff, Contractors, and Volunteers, as applicable), Training (Staff, Volunteers, and Contractors), Staffing, Intake Screening, Classification, Inmate Education, Posting of Signage (PREA Posters, etc.) and Contract Monitoring. The Directives addressed "Detecting" sexual abuse and sexual harassment through Training (Staff, Volunteers, and Contractors), and Intake Screening.

The policies addressed "Responding" to allegations of sexual abuse and sexual harassment through Reporting, Investigations, Victim Services, Medical and Mental Health Services, Disciplinary Sanctions for Staff (including notification to licensing agencies), Incident Review Teams, and Data Collections and Analysis.

The Inmate Handbook, PREA Posters, and PREA Brochures do address sexual abuse by another inmate, and the Inmate Handbook does address sanctions for inmates when involved in such conduct. Based on interviews and a review of agency policies, BOP staff closely monitor for inmate-on-inmate sexual misconduct in accordance with the agency's PREA policies; allegations are reported and investigated, and inmates are held accountable. By policy, the Inmate handbooks are reviewed and updated at least annually at each BOP institution.

115.11(b)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Agency's organizational chart.

INTERVIEWS:

PREA Coordinator.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) the position of the agency PREA Coordinator, which outlines the roles and responsibilities of the position and calls for the position being allowed enough time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in each facility.

The agency's organizational chart reflects that the agency PREA Coordinator position is an upper-level position with agency-wide oversight. The agency PREA Coordinator position reports to the Assistant Director, Reentry Services Division.

The PREA Coordinator was interviewed and reported to have enough time to focus on the PREA standards and the freedom to divert responsibilities to other staff as needed to focus on the audit. A review of the agency directive, agency's organization chart, and based on the interview with the designated agency's PREA Coordinator, the Auditor determined the agency demonstrates it meets the requirements of this provision of this standard.

115.12 Contracting with other entities for the confinement of inmates Auditor Overall Determination: Meets Standard **Auditor Discussion** 115.12(a) (b) **DIRECTIVE AND DOCUMENT REVIEW:** Agency Directives and BOP PREA Plan. FINDINGS: Agency Directive(s) and BOP PREA Plan address(es) this provision. The agency reported there were a total of zero contracts for the confinement of inmates and 161 Residential Reentry Centers (RRCs) that the agency had entered or renewed with private entities or other government agencies. A review of the agency directive reflected all contracts will meet the required entity's obligation to adopt and comply with the PREA standards. Agency Directive(s) and BOP PREA Plan address(es) this provision. The agency reported the agency-wide contracts would require the agency to monitor the contractor's compliance with the PREA standards. If the agency contracted the confinement of its inmates, the agency's Contract Administrator would be required to maintain regular contact with every inmate placed in a contract facility. If there are concerns, agency protocol requires the inmate be removed from the facility and the facility allows time to make corrective action and address the concerns. Corrective actions are addressed before the facility is reconsidered. Notification would also be made to law enforcement. The Contract Administrator would annually collect credentialing documentation for each facility: facility license; staff licenses or certifications; daily schedule; and monitoring reports or the licensing agency's website regarding the facility's status; and tours the facility. The BOP is no longer

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard

actively soliciting new contracts with private facilities.

Auditor Discussion

115.17(a) (e)(h)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Supporting Documentation.

FINDINGS:

PS 3000.03 Human Resource Management Manual, PS 3420.11, Standards of Employee Conduct, the Pre-Employment Guide, SF85P (Questionnaire for Public Trust Positions) and a BOP recruitment document address the requirements of the standard. All employees who have contact with inmates have had a full field background investigation in addition to fingerprinting and inquiry into the FBI's National Crime Information Center (NCIC). Employee backgrounds are re-checked every five years. Contractors and volunteers who have regular contact with inmates also have criminal background checks completed prior to having contact with inmates. Volunteer and contractor background checks are repeated yearly. The facility does not hire or promote anyone who may have contact with inmates and does not enlist the services of any contractor who may have contact with inmates who has engaged in any type of sexual abuse/harassment (no exceptions). Employees have a duty to disclose such misconduct and material omissions regarding such misconduct would be grounds for termination. Submission of false information by any applicant is grounds for not hiring the applicant.

The Agency Head designee was interviewed and confirmed that the agency HR attempts to contact prior employers for information on substantiated allegations of sexual abuse or resignations which occurred during a pending investigation of sexual abuse. The Agency Head designee also confirmed that the agency provides 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. The agency notifies appropriate licensing/certifying agencies when professional staff members are terminated for substantiated allegations of sexual abuse or sexual harassment. A review of policy, personnel forms, and relevant supporting documentation, including staff interviews, confirm compliance with this standard.

115.17(b)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency Head designee.

FINDINGS:

Agency Directives and BOP PREA Plan address this provision. Agency Head designee reported the agency has incorporated and implemented the "Affirmative Duty to Disclose," which all staff were required to affirm and sign. The form includes a "material omissions" clause.

115.17(c)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency Head.

FINDINGS:

Agency Directives and BOP PREA Plan address this provision. The agency directive requires job applicants to have background checks completed looking at any issue of prior sexual misconduct. The background checks are completed prior to any inmate contact. All contractors are screened by using the same process.

115.17(d)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency Head designee.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) the elements of this provision. Agency directive defines staff to include volunteer or contracted program services staff. All staff are also subjected to a criminal background check.

115.17(f)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan. HR Files.

INTERVIEWS:

Agency Head designee.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) this provision.

The application process includes the "Affirmative Duty to Disclose" form for new hires, volunteers and contractors, and a review of the HR files indicated this process was being implemented. The HR files reviewed indicated the forms had been signed in accordance with directive.

A review of agency directives and HR files, and Agency Head designee interview, indicate the practice is in place and meets the requirements of this provision.

115.17(g)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

FINDINGS:

FINDINGS:

Agency Directives and BOP PREA Plan address this provision. Agency directive defines staff to include volunteer or contracted program services staff.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.18(a)
	INTERVIEWS:
	Interviews with the Agency Head designee confirm that the standard is being met.
	FINDINGS:
	The agency considers how all new facility designs and technology upgrades may enhance the Bureau's ability to protect against sexual abuse. In existing institutions, we review all "Substantiated" and "Unsubstantiated" cases of inmate sexual abuse to determine if modifications to design or the addition or upgrade of technology would help prevent a similar occurrence in the future.
	115.18(b)
	DIRECTIVE AND DOCUMENT REVIEW:
	Video Surveillance Schematic.
	INTERVIEWS:
	Interviews with the Agency Head designee confirm that the standard is being met.

Institution reviews are ongoing to determine if upgrades or additions to our existing technology would enhance the protection of inmates from incidents of sexual abuse. The technology serves as a deterrent but also allows us to identify unreported victims and perpetrators of sexually abusive behavior. It also aids in successful criminal prosecutions. It is recommended that BOP receive the funding to procure additional cameras and an inmate RFID system to enhance the safety and security of the staff and inmates for each of its institutions.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.42(a)
	DIRECTIVE AND DOCUMENT REVIEW:
	Agency Directive and the PREA Screen Tool.
	INTERVIEWS:
	Agency PREA Coordinator.
	FINDINGS:
	PS 5324.12 addresses the requirement of the standard. The information obtained in the inmate screening process is used to make individualized determinations to ensure the inmates safety. This information is used to make decisions to place each inmate in appropriate housing, work, and program assignments. A classification committee makes the placement decisions. Agency PREA Coordinator reported information secured through the screening process is used to determine the need for additional medical or mental health follow-up, and to make classification decisions based on risk factors.
	115.42(b)
	DIRECTIVE AND DOCUMENT REVIEW:
	Agency Directives and BOP PREA Plan.
	INTERVIEWS:

Agency Directive(s) and BOP PREA Plan address(es) this provision. By policy, special housing is used as a last resort and staff look for other options, such as housing unit

Agency PREA Coordinator.

FINDINGS:

changes. Agency PREA Coordinator reported the welfare of the inmate is always a high consideration. Medical and mental health are to conduct daily visits for any inmates placed in special housing for PREA risk factors.

115.42(c)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency PREA Coordinator.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) this provision. Agency PREA Coordinator reported the facility does not have specific housing units designated for lesbian, gay, bisexual, transgender, or intersex inmates. All housing, program and work assignments are made on a case-by-case basis.

L15.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.66(a)
	DIRECTIVE AND DOCUMENT REVIEW:
	Agency Directives and BOP PREA Plan.
	INTERVIEWS:
	Agency Head.
	FINDINGS:
	The Collective Bargaining Agreement (CBA) examined by the auditor, between the Federal Bureau of Prisons and Council of Prison Locals, American Federation of Government Employees, dated July 21, 2014-July 20, 2017, complies with this standard. The agreement does not 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. The auditor was advised that the CBA is currently being renegotiated and

will contain the required language in its final form.

115.87 **Data collection** Auditor Overall Determination: Meets Standard **Auditor Discussion** 115.87(a and c) DIRECTIVE AND DOCUMENT REVIEW: Agency Directives and BOP PREA Plan. FINDINGS: PS 5324.12 addresses the requirement of the standard. As confirmed by a review of documents, BOP collects accurate, uniform data for every allegation of sexual abuse/ harassment by using a standardized instrument. The agency tracks information concerning sexual abuse using data from the SIS department, the agency's Office of Internal Affairs and SENTRY, the BOP's computerized data management program. The data collected includes the information necessary to answer all questions from the most recent version of the Survey of Sexual Violence, conducted by the Department of Justice. The agency aggregates and reviews all data annually. Upon request, the agency would provide all such data from the previous calendar year to the Department of Justice no later than June 30. 115.87(b) **DIRECTIVE AND DOCUMENT REVIEW:** Agency Directives and BOP PREA Plan. FINDINGS: Agency Directive(s) and BOP PREA Plan address(es) this provision. A review of the facility tracking information reflected a comprehensive system designed to maintain various elements for the required data for sexual abuse and sexual harassment allegations. 115.87(d) Agency Directives and BOP PREA Plan. FINDINGS: Agency Directive(s) and BOP PREA Plan address(es) this provision. A review of the agency website reflects the comprehensive report is published and available to the public for all serious incidents to include sexual abuse and sexual harassment

allegations. The annual PREA reports can be found at https://www.bop.gov/inmates/

custody and care/sexual abuse prevention.j

sp.

115.87(e)
DIRECTIVE AND DOCUMENT REVIEW:
Agency Directives and BOP PREA Plan.
FINDINGS:
Agency Directive(s) and BOP PREA Plan address(es) this provision.
115.87(f)
DIRECTIVE AND DOCUMENT REVIEW:
Agency Directives and BOP PREA Plan.
FINDINGS:
Agency Directive(s) and BOP PREA Plan address(es) this provision.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.88(a)
	DIRECTIVE AND DOCUMENT REVIEW:
	Agency Directives and BOP PREA Plan. Annual report.
	INTERVIEWS:
	Agency PREA Coordinator.
	FINDINGS:
	Agency Directive(s) and BOP PREA Plan address(es) this provision. A review of the annual report reflects all the elements required by this provision.
	Staff interviewed reported in detail the process followed when reviewing the data, identifying problem areas and corrective action, and preparing the annual report.
	115.88(b)
	DIRECTIVE AND DOCUMENT REVIEW:
	Agency Directives and BOP PREA Plan.
	FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) this provision.

115.88(c)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Annual report.

INTERVIEWS:

Agency PREA Coordinator.

FINDINGS:

PS 5324.12 addresses the requirement of the standard. The Bureau of Prisons and the institution reviews and assesses all sexual abuse/sexual harassment data at least annually to improve the effectiveness of its sexual abuse prevention, detection, and response policies, to identify any trends, issues, or problematic areas and to take corrective action if needed. The Institution PREA Compliance Manager (IPCM) forwards data to the respective BOP Regional PREA Coordinator and then to the National BOP PREA Coordinator. An Annual Report has been prepared and placed on the BOP website. The auditor reviewed the Annual Report. The report can be found at the following website address: www.bop.gov.

115.88(d)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency PREA Coordinator.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) this provision. Agency PREA Coordinator reported the BOP complies with FOIA and all other applicable laws, rules, and regulations. No information that identifies victims or perpetrators is included in the report, nor is any information that could potentially threaten the security of an institution. The reports would reflect only basic demographic information.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

115.89(a)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

INTERVIEWS:

Agency PREA Coordinator.

FINDINGS:

PS 5324.12 addresses the requirement of the standard. The National PREA Coordinator reviews data compiled by each BOP facility, from SENTRY, from each Regional PREA Coordinator, from the Information Technology and Data Division of the BOP and from the Office of Internal Affairs and issues a report to the Director on an annual basis. Facility data is maintained in locked files or on computer databases that are user ID and password protected. Agency PREA data is securely retained and is published on the BOP website after removing all personal identifying information.

115.89(b)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Aggregated data on website.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) this provision. The data posted on the agency website includes agency data from the previous year.

115.89(c)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Aggregated data on agency website.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) this provision. The data posted on the agency website has all personal identifiers removed.

115.89(d)

DIRECTIVE AND DOCUMENT REVIEW:

Agency Directives and BOP PREA Plan.

Aggregated data on agency website.

FINDINGS:

Agency Directive(s) and BOP PREA Plan address(es) this provision. The data and records collected are to be retained in accordance with agency retention requirements.

115.401	Frequency and scope of audits
	Auditor Overall Determination:
	Auditor Discussion
	115.401(a)
	DIRECTIVE AND DOCUMENT REVIEW:
	Aggregated data on website.
	FINDINGS:
	The agency ensured that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once.
	115.401(b)
	DIRECTIVE AND DOCUMENT REVIEW:
	Aggregated data on website.
	FINDINGS:
	This is the Agency's first year of cycle 4. The agency is following their audit cycle and planned future audits. The data was posted on the agency website.

115.403	Audit contents and findings		
	Auditor Overall Determination: Meets Standard		
	Auditor Discussion		
	115.403(f)		
	DIRECTIVE AND DOCUMENT REVIEW:		
	There is no agency directive for this provision.		
	FINDINGS:		
	BOP has published on its agency website all Final Audit Reports within 90 days of		

issuance by the Auditor. This information is made available to the public and is in accordance with 28 C.F.R. § 115.405.

Appendix: Provision Findings		
115.11 (b)	Zero tolerance of sexual abuse and sexual harassmer coordinator	nt; PREA
	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
115.12 (a)	Contracting with other entities for the confinement o	f 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.)	na
115.12 (b)	Contracting with other entities for the confinement o	f inmates
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
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	yes

115.17 (e)	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 (d)	Hiring and promotion decisions	
	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
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
115.17 (c)	Hiring and promotion decisions	
	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
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
115.17 (b)	Hiring and promotion decisions	
	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
	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 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
	described in the two bullets immediately above?	

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	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	
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
115.17 (h) 115.18 (a)	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	yes
	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)	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.) 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	
115.18 (a)	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.) 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.)	

	electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes
115.66 (a)	Preservation of ability to protect inmates from contact abusers	ct with
115.66 (a)		yes
115.66 (a) 115.87 (a)	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? 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 (a)	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? 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 (d)	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? Data collection Does the agency maintain, review, and collect data as needed	yes
	from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	-
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.)	na
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.)	yes
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 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	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
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final	yes

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