

**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 [PREA Auditors of America \(PAOA\)](#), the FBOP is **not** 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:** FCI Seagoville

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 06/03/2024

**Date Final Report Submitted:** 07/26/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Cassandra McGilbra	<b>Date of Signature:</b> 07/26/2024

AUDITOR INFORMATION	
<b>Auditor name:</b>	McGilbra, Cassandra
<b>Email:</b>	cnan36@gmail.com
<b>Start Date of On-Site Audit:</b>	04/16/2024
<b>End Date of On-Site Audit:</b>	04/18/2024

FACILITY INFORMATION	
<b>Facility name:</b>	FCI Seagoville
<b>Facility physical address:</b>	2113 North Highway 175, Seagoville, Texas - 75159
<b>Facility mailing address:</b>	

Primary Contact
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<b>Name:</b>	Aaron Greenfield, Associate Warden of Programs, PREA Compliance Manager
<b>Email Address:</b>	SEA-PREAComplianceMgr-S@bop.gov
<b>Telephone Number:</b>	972-287-2911

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Dr. Scarlet Grant
<b>Email Address:</b>	SEA-PREAComplianceMgr-S@bop.gov
<b>Telephone Number:</b>	972-287-2911

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Tammy Winbush
<b>Email Address:</b>	SEA-PREAComplianceMgr-S@bop.gov
<b>Telephone Number:</b>	972-287-2911

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	1680
<b>Current population of facility:</b>	1680
<b>Average daily population for the past 12 months:</b>	1670
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Males

<b>Age range of population:</b>	19-83
<b>Facility security levels/inmate custody levels:</b>	FCI- Low/In FPC-Minimum/Out FDC-Administrative
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	262
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	41
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	20

#### AGENCY INFORMATION

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

#### Agency Chief Executive Officer Information:

<b>Name:</b>	Colette S. Peters, Director
<b>Email Address:</b>	bop-rsd-preacoordinator@bop.gov
<b>Telephone Number:</b>	(202) 307-3250

#### Agency-Wide PREA Coordinator Information

<b>Name:</b>	Adriana Restrepo	<b>Email Address:</b>	arestrepo@bop.gov
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## Facility AUDIT FINDINGS

### Summary of Audit Findings

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

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

#### Number of standards exceeded:

2

- 115.42 - Use of screening information
- 115.65 - Coordinated response

#### 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.

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## 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:	2024-04-16
2. End date of the onsite portion of the audit:	2024-04-18

#### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	<p>The auditor made attempts to contact Parkland Rape Crisis Center both before and during the audit but was unsuccessful. The facility's Chief Psychologist informed me that the Memorandum of Understanding (MOU) with Parkland Rape Crisis Center was still under review by the BOP contract services. A telephonic interview was conducted with Parkland Memorial Hospital Charge Nurse to confirm the availability of Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) for conducting exams when needed. Additionally, a Victim Intervention Program (VIP) representative is available for all sexual assault victims brought into Parkland Memorial Hospital.</p>

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1680
15. Average daily population for the past 12 months:	1670
16. Number of inmate/resident/detainee housing units:	9

<p><b>17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)</p>
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**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**

<p><b>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b></p>	<p>998</p>
<p><b>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:</b></p>	<p>10</p>
<p><b>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>7</p>
<p><b>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>1</p>
<p><b>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>1</p>

<b>42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	73
<b>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>	8
<b>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:</b>	38
<b>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:</b>	38
<b>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:</b>	23
<b>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:</b>	0
<b>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):</b>	No text provided.

<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b>	262
<b>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:</b>	20
<b>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:</b>	14
<b>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:</b>	No text provided.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
<b>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	20

<p><b>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b></p>	<p><input type="checkbox"/> Age</p> <p><input type="checkbox"/> Race</p> <p><input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input type="checkbox"/> Length of time in the facility</p> <p><input type="checkbox"/> Housing assignment</p> <p><input type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>
<p><b>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b></p>	<p>The Auditor requested to interview targeted inmates along with inmates from each housing unit that were of various ages, gender, race, ethnicity, classification level and security level</p>
<p><b>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>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):</b></p>	<p>No text provided.</p>
<p><b>Targeted Inmate/Resident/Detainee Interviews</b></p>	
<p><b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>20</p>

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

<p><b>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:</b></p>	<p>1</p>
<p><b>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:</b></p>	<p>1</p>
<p><b>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:</b></p>	<p>1</p>
<p><b>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:</b></p>	<p>1</p>
<p><b>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:</b></p>	<p>1</p>

<b>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:</b>	2
<b>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:</b>	3
<b>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:</b>	4
<b>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:</b>	4
<b>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:</b>	2
<b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b>	No text provided.

<b>Staff, Volunteer, and Contractor Interviews</b>	
<b>Random Staff Interviews</b>	
<b>71. Enter the total number of RANDOM STAFF who were interviewed:</b>	10
<b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b>	<input checked="" type="checkbox"/> Length of tenure in the facility <input type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
<b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>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):</b>	The auditor requested interviews with staff who had been assigned to the facility for at least 6 months and staff of both genders.
<b>Specialized Staff, Volunteers, and Contractor Interviews</b>	
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.	
<b>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	18
<b>76. Were you able to interview the Agency Head?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No

<p><b>a. Explain why it was not possible to interview the Agency Head:</b></p>	<p>The Agency Head interview was provided to the auditor in written responses from the auditor who completed the Agency audit.</p>
<p><b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>78. Were you able to interview the PREA Coordinator?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p><b>a. Explain why it was not possible to interview the PREA Coordinator:</b></p>	<p>The PREA Coordinator's interview responses were provided to the auditor in written form by the auditor who conducted the Agency audit.</p>
<p><b>79. Were you able to interview the PREA Compliance Manager?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

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

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

	<input type="checkbox"/> Other
<b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	1
<b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
<b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	The auditor received the FCI Seagoville Welcome Book, which included a list of administrative staff. On the initial day of the onsite inspection, the auditor presented a roster of Specialized Staff scheduled for interviews. Each member of the Specialized Staff was present and interviewed during 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.

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

Yes

No

**Was the site review an active, inquiring process 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, cross-gender viewing and searches)?**

Yes

No

**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)?**

Yes

No

**a. Explain which critical functions you were unable to test per the site review component of the audit instrument and why:**

During the onsite inspection, there were no inmates processed at intake. Nevertheless, the auditor inspected the intake area and received a briefing on the risk screening process. The emotional support service provided by the Parkland Rape Crisis Center was still under evaluation during the onsite inspection. Across the facility, signs were prominently displayed offering information about interpreter services.

<p><b>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>88. Informal conversations with staff during the site review (encouraged, not required)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>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).</b></p>	<p>During the onsite inspection, the auditor conducted informal interviews with inmates and staff in various sections, including the main building, the jail, and the camp. Inmates interviewed expressed overall satisfaction with the facility, with many comparing it favorably to other BOP facilities. They demonstrated knowledge of procedures for reporting incidents of sexual abuse and harassment, whether through written reports, verbal communication, or using devices such as telephones or tablets. Most inmates indicated that female staff members appropriately ensured privacy by making necessary announcements while they were in living quarters. They also expressed satisfaction with the pat-down and visual searches conducted by staff, and did not report any concerns about inappropriate cross-gender searches.</p> <p>Staff members interviewed were cooperative and willing to discuss their roles in reporting responsibilities, acting as first responders, and accessing employee assistance programs when needed. Female staff members were aware of and adhered to protocols for announcing their presence when entering inmate housing areas.</p>
<p><b>Documentation Sampling</b></p>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	

<p><b>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?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b></p>	<p>Documents from offender files were reviewed for targeted and random inmates to confirm receipt of the following:</p> <ul style="list-style-type: none"> <li>• Initial BOP Orientation - Inmate Admissions &amp; Orientation Booklet outlining Inmates' Rights, Responsibilities, Prohibited Acts, and Disciplinary Severity Scale.</li> <li>• BOP Sexually Abusive Behavior Prevention &amp; Intervention Inmate Handbook.</li> <li>• Initial Risk Assessment and Reassessment, ensuring completion of initial risk screening assessments and reassessments within mandated timeframes.</li> </ul>

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

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

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

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

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

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual harassment</b>	4	0	4	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	4	0	4	0

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	0	0	7	0
<b>Staff-on-inmate sexual abuse</b>	1	0	0	0
<b>Total</b>	1	0	7	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 detainee sexual harassment investigation files, as applicable to the facility type being audited.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	4	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	4	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:**

7

<p><b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p><b>Inmate-on-inmate sexual abuse investigation files</b></p>	
<p><b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>7</p>
<p><b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>Staff-on-inmate sexual abuse investigation files</b></p>	
<p><b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p><b>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p><b>Sexual Harassment Investigation Files Selected for Review</b></p>	
<p><b>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>4</p>
<p><b>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p><b>Inmate-on-inmate sexual harassment investigation files</b></p>	
<p><b>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>4</p>
<p><b>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p><b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<b>Staff-on-inmate sexual harassment investigation files</b>	
<b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	<p>The facility PAQ was reviewed to determine the total number of investigations conducted over the past year. Initially, the PAQ listed 11 completed investigations into sexual abuse and sexual harassment incidents, all of which were administratively investigated. However, during the onsite inspection, this number was corrected to nine investigations: eight involving inmate-on-inmate incidents and one involving staff-on-inmate incidents.</p> <p>Upon reviewing the eight investigation files, the auditor found that seven of the inmate-on-inmate sexual abuse investigations also included dual indications (3) of sexual harassment. Additionally, there was one separate instance of inmate-on-inmate sexual harassment, making the total number of inmate-on-inmate investigations eight.</p> <p>Of the nine total investigations, the staff-on-inmate case required further review and was still pending at the time of the audit. Consequently, the auditor did not review the staff-on-inmate investigation.</p>

## SUPPORT STAFF INFORMATION

### DOJ-certified PREA Auditors Support Staff

**115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.**

- Yes  
 No

### Non-certified Support Staff

**116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.**

- Yes  
 No

## AUDITING ARRANGEMENTS AND COMPENSATION

**121. Who paid you to conduct this audit?**

- 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

**Identify the name of the third-party auditing entity**

Corrections Consulting Services

<b>Standards</b>	
<b>Auditor Overall Determination Definitions</b>	
<ul style="list-style-type: none"> <li>• Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>• Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>• Does Not Meet Standard (requires corrective actions)</li> </ul>	
<b>Auditor Discussion Instructions</b>	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b><i>115.11 provisions of this standard were completed during the Central Agency Audit.</i></b></p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Pre-Audit Questionnaire.</p> <p>BOP PREA Plan</p> <p>Agency zero-tolerance statement.</p> <p>Organizational charts, interviews.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p>

115.11(a) 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) 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.

Facility Audit Review

Documentation Review:

The Seagoville FCI PAQ

PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program

BOP Reentry Services Branch Organizational Chart

	<p>Seagoville FCI Welcome Book  Seagoville FCI PREA Compliance Manager – Associate Warden of Programs  Seagoville FCI Warden  The Bureau’s Admission and Orientation (A&amp;O) Pamphlet on Sexually Abusive Behavior  Prevention and Intervention</p> <p>Interviews:  Warden</p> <p>PREA Compliance Manager</p> <p>Facility staff</p> <p>Findings:</p> <p>115.11 (c) The BOP has designed the PREA compliance manager responsible for coordinating PREA compliance of each facility. Associate Warden’s role in coordinating the facility's efforts to comply with PREA standards is essential. The agency’s policy establishes clear lines of responsibility and accountability, enabling the facility to more effectively address any issues related to PREA compliance and enhance inmate safety. This framework ensures that PREA policies and procedures are comprehended, adhered to, and continually refined to uphold the highest standards of safety and security within the facility. During the audit, it was confirmed that the PREA Compliance Manager (PCM) has sufficient time to fulfill their duties and ensure compliance with PREA standards. This determination was supported by various factors, including the presence of facility postings, educational materials, digital documentation, and feedback gathered from unit supervisors, staff members, and inmates. The auditor determines the facility meets compliance requirements of this standard.</p>
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<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>According to the Central Agency report:</p> <p>115.12(a) (b)  DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>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 160</p>

	<p>Residential Reentry Centers (RRCs) that the agency had entered or renewed with private entities or other government agencies.</p> <p>A review of the agency directive reflected all contracts will meet the required entity's obligation to adopt and comply with the PREA standards.</p> <p>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.</p> <p>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.</p> <p>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 actively soliciting new contracts with private facilities.</p>
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<b>115.13</b>	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documentation Review:</p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program.</p> <p>Annual Workforce Committee Quarterly Meeting Reports, Q1, Q2, Q3 and Q4</p> <p>SEA-HR Staff Rosters and Strength Report</p> <p>Institutional Duty Officer (IDO) Unannounced Institutional Rounds Attachment G Form</p> <p>Interviews:</p> <p>Warden, PREA Compliance Manager,</p> <p>Human Resource Administration</p> <p>Facility Unit Manager/Supervisor</p>

Random Staff

Findings:

115.13 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that the PREA factors and safety must be considered when allocation staffing resources. The facility provided the auditor the Salary Workforce Utilization Committee Meeting Minutes which serves as the facility's staff plan. The meeting minutes discussed the (11) standard provisions, staffing including deviations, and upgrades to video surveillance. The meetings involved the warden, associate wardens, human resource manager, business administrator/contract specialist, captain, and budget analyst, and they are scheduled quarterly. Interviews with the warden and her administrative team confirmed that staffing has been challenging, but all shifts are adequately covered with overtime, and no deviations from coverage have occurred. During the onsite inspection of the facility, the auditor observed sufficient staff in each inmate housing area, work area, programming areas, and recreational areas. There were no unstaffed areas observed where inmates were left unsupervised. The auditor finds this facility compliant with this provision of the standard.

115.13 (b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states deviations are documented in the remarks section of the Salary/ Workforce Utilization Committee Meeting Minutes. According to the facility's PAQ, there were no deviations noted from the staffing plan. The warden and her administration explained that overtime is used to address any staffing shortages as needed. The auditor received copies of the facility's Staffing and Strength Report along with shift rosters, confirming that adequate coverage was maintained throughout the facility. The auditor finds this facility compliant with this provision of the standard.

115.13 (c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states at a minimum, the most recent Salary/Workforce Utilization Committee Meeting Minutes (which include a review of the staffing plan) are annually compiled by the Regional PREA Coordinator by May 1, and submitted to the National PREA Coordinator by June 1. The auditor received the BOP PREA Coordinator's written response, confirming annual consultation on staffing plans for institutions, and the allocation of overall staffing resources by the Human Resource Management and Administration Divisions. Additionally, the auditor was provided with the Salary Workforce Utilization Committee Meeting Minutes, which covered (11) standard provisions, staffing considerations including deviations, upgrades to video surveillance, and the use of overtime to address staffing shortages. These documents were signed by all involved parties, including the warden, associate warden (PCM), human resource manager, business administrator/contract specialist, captain, and budget analyst. The auditor finds this facility compliant with this provision of the standard.

115.13 (c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that the Institutional Duty Officer will conduct unannounced rounds with the intent of identifying and deterring sexual abuse and sexual harassment are

	<p>conducted every week, including all shifts and all areas. The IDO will document the rounds at the end of the tour week the is forwarded to the Institution PREA Compliance Manager for retention. The auditor received copies of the Institutional Duty Officer (IDO) Unannounced Institutional Rounds Attachment G forms, completed weekly by the IDO, documenting the departments and shifts visited. During onsite inspections, targeted supervisors confirmed that unannounced rounds are regularly conducted in every department and during at least one shift. Randomly interviewed staff members stated they are explicitly prohibited from informing others about unannounced rounds by supervisors. The auditor finds this facility compliant with this provision of the standard.</p>
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<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	This standard is not applicable as Seagoville FCI does not house Youthful Inmates.

<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Documentation:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>PS 5521.06 Searches of Housing Units, Inmates, and Inmate Work Areas</p> <p>Inmate Orientation Handbook</p> <p>Staff Training Curriculum and Training</p> <p>Logs Escort Procedures-Annual Training 2024</p> <p><b>Interviews:</b></p> <p>Warden</p> <p>PREA Compliance Manager</p> <p>Medical/Psychology Staff</p> <p>Random and Targeted Staff</p>

## Random and Targeted Inmates

### **Findings:**

115.15 (a) PS 5521.06 Searches of Housing Units, Inmates, and Inmate Work Areas provides guidance for BOP staff to perform inmate searches. The policy states searches are to be conducted by same gender staff except during exigent circumstances are such that delay would mean the likely loss of contraband. When staff of the opposite gender conducts a visual search, the search is documented with the reasons for the search in the inmate's central file. The facility reported no instances of opposite gender strip searches or visual body cavity searches in the previous year. Staff interviewed during the onsite inspection affirmed that opposite gender staff are not authorized to conduct strip or visual cavity searches of inmates without proper authorization. Throughout the inspection, the auditor observed same gender staff performing pat searches of inmates across the facility. Although no strip or visual searches were witnessed, staff in the intake/receiving area provided details on how strip searches are conducted to ensure inmate privacy while undressing.

During interviews with both targeted and random inmates, it was confirmed that strip searches are conducted privately by same gender staff, away from the presence of other inmates or opposite-gender staff. The auditor finds the facility compliant with this standard provision.

115.15 (b) The Seagoville FCI does not house female inmates. The facility is exempt from this standard provision.

115.15 (c) PS 5521.06 Searches of Housing Units, Inmates, and Inmate Work Areas provides guidance for BOP staff to perform inmate searches. The policy states searches are to be conducted by same gender staff except during exigent circumstances are such that delay would mean the likely loss of contraband. When staff of the opposite gender conducts a visual search, the search is documented with the reasons for the search in the inmate's central file. The facility reported no instances of opposite gender strip searches or visual body cavity searches in the previous year. Staff interviewed during the onsite inspection affirmed that opposite gender staff are not authorized to conduct strip or visual cavity searches of inmates without proper authorization. Throughout the inspection, the auditor observed same gender staff performing pat searches of inmates across the facility. Although no strip or visual searches were witnessed, staff in the intake/receiving area provided details on how strip searches are conducted to ensure inmate privacy while undressing.

During interviews with both targeted and random inmates, it was confirmed that strip searches are conducted privately by same gender staff, away from the presence of other inmates or opposite-gender staff. The auditor finds the facility compliant with this standard provision.

115.15 (d) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program outlines various ways for notifying inmates of the presence of opposite-gender staff members entering an inmate housing area. Opposite gender staff must announce themselves when entering the inmate housing area; notices are posted on bulletin boards that opposite gender staff frequently work and visit inmate housing

	<p>areas; opposite gender unit staff supervisors with offices in the inmate housing areas schedules are posted in the unit for inmate notification. During the onsite inspection of the facility, the auditor observed separate inmate shower and toilet stalls with doors allowing privacy that prevent staff and other inmates viewing an inmate while undressed. The auditor observed opposite gender staff announcing themselves when entering inmate housing areas. There were signs on bulletin boards notifying inmates that opposite gender staff routinely work and visit the housing areas, allowing inmates to cover up in the presence of the opposite gender. Formal interviews with staff and inmates revealed there had been no issues with opposite gender staff viewing while fully undressed, as inmates are not allowed to be fully undressed in the housing areas outside of the shower or restroom areas. The auditor finds the facility compliant with this standard provision.</p> <p>115.15 (e) Informal and formal interviews with intake staff, medical, and security staff indicated that transgender and intersex inmates are not subjected to searches to determine genital status. Instead, medical records and medical history are referenced as necessary. In formal interviews, transgender inmates expressed that they have not been subjected to searches aimed at determining their genital status. The auditor finds the facility compliant with this standard provision.</p> <p>115.15 (f) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program and Escort Procedures states transgender inmates may request an exception for gender specific searches. The Warden, Health Services, Psychology Services, Unit Management and Correctional Services will review and approve the request. The exception will identify the staff gender required for the search. The information is provided to the inmate via personal carrying card and entered on the inmate's personal file. The inmate is required to present the card when a search is required. Two transgender inmates demonstrated the facility's protocol for searching them and showed the auditor their cards outlining the procedures. The auditor obtained copies of the Annual Staff Escort Procedures training curriculum, which includes Inmate Search Procedures. The training outlines the procedure for staff to conduct pat searches using the bladed technique, specifically between and under the breasts to detect contraband. It emphasizes the importance of conducting searches professionally, respectfully, and with minimal intrusion. Informal and targeted interviews with staff confirmed that searches of transgender inmates are consistently carried out in a professional manner, adhering to agency protocols. The auditor finds the facility compliant with this standard provision.</p>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<b>Documents Reviewed:</b>

PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program

FCI Seagoville Admission & Orientation Inmate Information Handbook

Blanket Purchase Agreement Language Line Services (LLS) Telephonic Interpretation Services Field Notice #0003

Sexually Abusive Behavior Prevention and Intervention -An Overview for Offenders

**Interviews:**

Agency Head Designee

PREA Compliance Manager

Facility Administrative Investigators

Medical/Mental Health Staff

Targeted Inmates

Random Inmates

**Onsite Facility Observations:**

Housing Area Postings

Inmate Education Materials

**Findings:**

115.16 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the PREA Standard language and requires the PCM reach out to local disabilities assistance offices, as a resource, to ensure the facility is providing effective communication accommodations when a need for such an accommodation is known. Additionally requirements that staff 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. During the onsite inspection, the auditor observed PREA postings, educational materials, and informational displays in both English and Spanish prominently displayed throughout the facility. Additionally, postings were noted in inmate housing areas providing contact information for National Consulates if needed. The auditor was provided with a Language Line Agreement designed to assist non-English or Spanish speaking inmates. Inmate education documents, such as the Inmate Orientation Handbook, were reviewed by the auditor. These materials inform inmates about accessing local disability assistance and interpretation services during PREA education sessions. The handbook also outlines accommodations available for visually or hearing-impaired inmates, as well as those with Limited English Proficiency (LEP) during Admissions & Orientation. Based on these findings, the auditor determined that the facility complies with this standard provision. During interviews with non-English speaking inmates conducted onsite, staff were available

to provide interpretation services. A targeted interview with a wheelchair-bound inmate revealed that he had not experienced any issues related to sexual abuse or harassment. He expressed confidence in reporting concerns to security staff or facility counselors, indicating comfort with the facility's provisions. The auditor finds the facility compliant with this standard provision.

115.16 (b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the PREA Standard language and requires the PCM reach out to local disabilities assistance offices, as a resource, to ensure the facility is providing effective communication accommodations when a need for such an accommodation is known. Additionally requirements that staff 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. During interviews with the facility warden and PREA Compliance Manager (PCM), it was confirmed that the facility has established processes to facilitate Limited English Proficiency (LEP) inmates' participation in PREA education. This education informs inmates about different reporting avenues and available emotional and support services. The facility warden, PCM, and administrative investigator informed the auditor that inmate interpreters are not utilized during investigative procedures. Instead, staff interpreters or the language line are used to assist inmates during interviews. Medical and mental health staff stated that staff interpreters or the language line are utilized during medical assessments and examinations. During interviews, the auditor spoke with inmates representing various conditions: one inmate in a wheelchair, one identified as hard of hearing, one Spanish-speaking inmate, and one with a cognitive disability. Each inmate conveyed to the auditor that PREA education had been presented in a manner they could understand. They were all knowledgeable about the different ways to report potential PREA incidents, as well as the availability of medical, mental health services, and emotional support services. The auditor finds the facility compliant with this standard provision.

115.16 (c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the PREA Standard language. The facility PAQ reported the no inmate interpreters, readers, or other inmate assistants used during investigations. The facility warden, PCM and SIS investigators interviewed conveyed that inmate interpreters are not used for other inmates during sexual abuse or sexual harassment investigations. The auditor finds the facility compliant with this standard provision.

<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	During the Central Agency Audit the auditor determine this standard's provisions compliant:

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 Designee

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.

	<p>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.</p> <p>115.17(g)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directives and BOP PREA Plan address this provision. Agency directive defines staff to include volunteer or contracted program services staff.</p>
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<b>115.18 Upgrades to facilities and technologies</b>	
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>The Central Agency Audit auditor determined this standard's provisions compliant.</p> <p>115.18(a)</p> <p>INTERVIEWS:</p> <p>Interviews with the Agency Head Designee confirm that the standard is being met.</p> <p>FINDINGS:</p> <p>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.</p> <p>115.18(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Video Surveillance Schematic.</p> <p>INTERVIEWS:</p> <p>Interviews with the Agency Head Designee confirm that the standard is being met.</p> <p>FINDINGS:</p> <p>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.</p>

	<p>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.</p>
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<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p><b>Documentation Reviewed:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>Memorandum of Understanding Between the Federal Bureau of Investigation and Federal Bureau of Prisons on Violations of Federal Criminal Statues</p> <p>PREA Victim Advocacy Brochure</p> <p>Memorandum of Understanding- Gratuitous Service Agreement (GSA) Parkland Rape Crisis Center</p> <p><b>Interviews:</b></p> <p>PREA Compliance Manager</p> <p>Random Staff</p> <p>Health Services Staff</p> <p>Inmates Who Reported Sexual Abuse</p> <p>Special Investigative Supervisor (SIS)</p> <p><b>115.21 (a)</b> Memorandum of Understanding Between the Federal Bureau of Investigation and Federal Bureau of Prisons on Violations of Federal Criminal Statues states that upon occurrence of any incident involving a criminal act the BOP will immediately notify the appropriate designated FBI of the incident. When the FBI does not initiate a criminal investigation, the BOP will assume primary responsibility to conduct an administrative investigation. An additional FCI Seagoville and FBI Memo requires that personnel follow a uniform evidence protocol for administrative and criminal investigations. The auditor finds the facility compliant with this standard provision.</p> <p><b>115.21 (b)</b> Memorandum of Understanding Between the Federal Bureau of Investigation and Federal Bureau of Prisons on Violations of Federal Criminal Statues requires evidence collection in accordance with the standards set forth in “A National</p>

Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents.” The auditor finds the institution in compliance with this provision.

**115.21 (c)** PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that when a report of suspicion of inmate sexual abuse has occurred, the victim will be provided and opportunity for a forensic medical examination (FME) as soon as possible. Physical evidence may be collected from the suspected perpetrator(s). Interviews with PCM, SIS and health services staff revealed inmates are provided a FME at a local hospital with a SAFE or SANE. A telephonic interview was conducted with charge nurse to confirm that a SAFE or SANE is available to conduct exams when needed. A Victim Intervention Program (VIP) representative is also available for all sexual assault victim brought into Parkland Memorial Hospital.

Interviews with the PCM, SIS, and Chief Psychologist reported that inmates who are determined to need a FME are transported to the local hospital Parkland Memorial Hospital Dallas, Texas for the exam. The PAQ reported there were no FME required during the audit time frame. The auditor finds the facility compliant with this standard provision.

**115.21 (d)** FCI Seagoville facility provided the auditor with a copy of a Memorandum of Understanding- Gratuitous Service Agreement (GSA) Parkland Rape Crisis Center. The GSA provides inmates with confidential and emotional support services related to sexual violence and victim advocate while at a local hospital. In a memo provided to the auditor, FCI Seagoville outlines the procedures for inmates who request a victim advocate, the facility will provide a qualified staff member. The facility psychologist staff are listed as qualified agency staff to represent an inmate during FME and initial emotional support services. During the onsite facility audit, the MOU with Parkland Rape Crisis Center was in the process or renewal. The MOU was still under review by the BOP agency contract services. The auditor was provided with the updated information and update flyers posted throughout the facility for inmate access. Interviews with four inmates that reported sexual abuse indicated they were aware of the availability of victim advocates for emotional support during an Forensic Medical Exam (FME) and investigatory interviews, but stated they request the services. All inmates conveyed they were comfortable with meeting with the facility psychologists. The auditor finds the facility compliant with this standard provision.

**115.21 (e)** PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states facility psychologist staff will provide inmate advocacy services as the qualified agency staff to represent an inmate during FME and initial emotional support services. The auditor finds the facility compliant with this standard provision.

**115.21 (f)** Memorandum of Understanding Between the Federal Bureau of Investigation and Federal Bureau of Prisons on Violations of Federal Criminal Statues requires evidence collection in accordance with the standards set forth in “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents.” The auditor finds the institution in compliance with this provision.

<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <hr/> <p><b>Documentation Review:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>Memorandum of Understanding Between the Federal Bureau of Investigation and Federal Bureau of Prisons on Violations of Federal Criminal Statues</p> <p>PS 1350.01 Criminal Matter Referrals</p> <p>Federal Bureau of Prisons Agency Website</p> <p><b>Interviews:</b></p> <p>PREA Compliance Manager</p> <p>Facility Warden</p> <p>Associate Warden</p> <p>Facility Captain</p> <p>Special Investigative Supervisor (SIS)</p> <p><b>Findings:</b></p> <p>115.22 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the Warden notifies the Regional Director of the Office of the Internal Affairs (OIA) and when appropriate FBI when an inmate is alleged to have perpetrated sexually abusive behavior against another inmate or when staff member is alleged to have perpetrated sexually abusive behavior against an inmate. The facility PAQ was reviewed to determine the total number of investigations conducted over the past year. Initially, the PAQ listed 11 completed investigations into sexual abuse and sexual harassment incidents, all of which were administratively investigated. However, during the onsite inspection, this number was corrected to nine investigations: eight involving inmate-on-inmate incidents and one involving staff-on-inmate incidents.</p> <p>Upon reviewing the investigation files, the auditor found that seven of the inmate-on-inmate sexual abuse investigations also included dual indications (3) of sexual harassment. Additionally, there was one separate instance of inmate-on-inmate sexual harassment, making the total number of inmate-on-inmate investigations eight.</p> <p>Of the nine total investigations, the staff-on-inmate case required further review and</p>

was still pending at the time of the audit. Consequently, the auditor did not review the staff-on-inmate investigation. The auditor finds the facility compliant with this standard provision.

115.22 (b)Memorandum of Understanding Between the Federal Bureau of Investigation and Federal Bureau of Prisons on Violations of Federal Criminal Statues states that upon occurrence of any incident involving a criminal act the BOP will immediately notify the appropriate designated FBI of the incident. When the FBI does not initiate a criminal investigation, the BOP will assume primary responsibility to conduct an administrative investigation. An additional FCI Seagoville and FBI Memo requires that personnel follow a uniform evidence protocol for administrative and criminal investigations. During the onsite facility inspection, the auditor reviewed postings in inmate housing with the Bureau of Prisons website listing the Sexual Abuse Prevention. The BOP agency website lists the BOP’s Zero Tolerance information allowing the public an opportunity to submit a notification of concern regarding an inmate. The auditor finds the facility compliant with this standard provision.

115.22 (c) The BOP agency policy website outlines the agency requirements to referral to the Federal Bureau of Investigation for all criminal matters. The information is posted on the BOP agency website for public access. The auditor finds the facility compliant with this standard provision.

115.22 (d) The FCI Seagoville is not a State entity and exempt from this section.

115.22 (e) The BOP policy website outlines the agency requirements to referral to the Federal Bureau of Investigation for all criminal matters. The auditor finds the facility compliant with this standard provision.

115.31	Employee training
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<b>Documentation Review:</b>  PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program  Sexually Abusive Behavior Prevention and Intervention Program Staff Training Curriculum  Staff Training Records  <b>Interviews:</b>  FCI SEA Training Supervisor

Targeted Staff

Random Staff

**Findings:**

115.31 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program outlines the facilities training requirements for staff. The Annual Training modules discuss the 10 training requirement for staff who may have contact with inmates: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' right to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. The modules meticulously detail each requirement with accompanying visuals. Random and Specialized staff interviewed during the onsite inspection demonstrated their understanding of the ten training elements they received. Additionally, staff were equipped with pocket cards containing pertinent information readily available for review as needed. A total of ten Random Staff members were interviewed during the onsite inspection. The auditor finds the facility compliant with this standard provision.

115.31 (b) The FCI Seagoville staff received training for male or female inmates. PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the annual refresher training takes the gender of the inmate population at each facility into account. Transferring staff members receive gender-appropriate training, as needed. The auditor finds the facility compliant with this standard provision.

115.31 (c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states newly assigned employees will receive training during the Introduction of Correctional Techniques Phase I and Phase II training. All staff, including current employees, and volunteers and contractors, will receive annual information as part of their Annual Training. The training curriculum and attendance records for annual staff training were reviewed by the auditor for compliance for PREA Training requirements. Random and Specialized staff interviewed during the onsite inspection confirmed their attendance at both initial and yearly training sessions. The auditor finds the facility compliant with this standard provision.

115.31 (d) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the staff will receive PREA training annually. The auditor examined the annual training curriculum, which included signatures or staff members' verification of their understanding of the training they received. The auditor finds the

	facility compliant with this standard provision.
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<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Documentation Review:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>Volunteer and Contractor Orientation and Refresher Training Curriculum</p> <p>Training Logs</p> <p><b>Interviews:</b></p> <p>PREA Compliance Manager</p> <p>Warden</p> <p>Contract Staff</p> <p><b>Findings:</b></p> <p>115.32 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that volunteer and contractor must verify understanding of training and seek additional direction from Bureau staff, if necessary. The Volunteer and Contractor Orientation and Refresher Training were evaluated and found to meet the standard requirements. The training modules and the verification of the 10 training requirements listed in 115.31(a) (1-10) were thoroughly examined. Although a volunteer wasn't available for interview during the onsite facility inspection, the auditor interviewed one contract staff member. This individual affirmed having received the training and demonstrated a clear understanding of the procedure for reporting incidents of inmate sexual abuse and harassment to agency administration. The auditor determined that the facility is compliant with this provision of the standard.</p> <p>115.32 (b) The auditor received the Sexually Abusive Behavior Prevention and Intervention Program Staff Training Curriculum and the Volunteer and Contractor Orientation and Refresher Training Curriculum from the facility. Both the facility PCM and the warden confirmed that volunteers and contract staff receive identical training as security staff and are mandated to undergo annual training sessions. However, during interviews, it was revealed that one contract staff member, employed for less</p>

	<p>than six months, had not yet attended the annual training due to the brief tenure but was aware of the requirement. The auditor determined that the facility is compliant with this provision of the standard.</p> <p>115.32 (c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states volunteer and contract 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.</p> <p>During the initial audit phase, documentation confirming volunteers' and contractors' comprehension of their training was not provided to the auditor. However, during the corrective action phase, the requested documents were submitted. These documents included signatures from volunteers and contractors, acknowledging their understanding of the agency's zero tolerance policy regarding sexual abuse and sexual harassment against inmates. The auditor determined that the facility is compliant with this provision of the standard.</p>
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<b>115.33</b>	<b>Inmate education</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p><b>Documentation Review:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>FCI Seagoville Admission &amp; Orientation Inmate Information Handbook</p> <p>Blanket Purchase Agreement Language Line Services (LLS) Telephonic Interpretation Services Field Notice #0003</p> <p>Sexually Abusive Behavior Prevention and Intervention -An Overview for Offenders Pamphlets</p> <p>Inmate Education Documentation</p> <p><b>Interviews:</b></p> <p>Agency Head Designee</p> <p>PREA Compliance Manager</p> <p>Facility Administrative Investigator</p>

Medical/Mental Health Staff

Targeted Inmates

Random Inmates

Onsite Facility Observations:

Housing Area/Job/Visitation/Health Services/Recreation/Education/Vocation/Treatment/Chapel Postings

Administrative Office Postings

Staff Work/Break Postings

Inmate Education Materials

**Findings:**

115.33 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states inmates are provided the Bureau's Admission and Orientation (A&O) Pamphlet on Sexually Abusive Behavior Prevention and Intervention is provided to each inmate at intake screening. The pamphlet describes the key elements of the program and informs inmates of the Bureau's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents of sexual abuse. 40 inmates interviewed during the onsite inspection verified the education materials provided during the A&O. The auditor finds the facility compliant with this provision of the standard.

115.33 (b) The PAQ lists 998 inmates were provide PREA educational information during intake and comprehensive education 30 days or more. The facility provided the auditor with inmate education records, and the auditor reviewed the education records of the 40 inmates interviewed during the onsite inspection. In interviews with these 40 randomly selected and targeted inmates, all confirmed they had received and comprehended the agency's Zero Tolerance training. They also indicated they understood how to report incidents of sexual abuse and sexual harassment. The auditor finds the facility compliant with this provision of the standard.

115.33 (c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards and shall 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. See 115.33 (a) requirement that all inmates received are provided with The Bureau's Admission and Orientation (A&O) Pamphlet on Sexually Abusive Behavior Prevention and Intervention at intake. The auditor finds the facility compliant with this provision of the standard.

115.33 (d) FCI Seagoville Admission & Orientation Inmate Information Handbook states the inmates will be provided educational information in formats accessible to

all inmates. Accommodations are available to ensure inmates who are visually impaired, and limited English proficient have access to methods of communication in order to understand information about Sexually Abusive Prevention and Intervention is provided during A&O and the pamphlets in English and Spanish are provided during intake screening. The FCI Seagoville Memorandum further details the methods of communication; Non-English or Non-Spanish speaking inmates are given access to the Advanced Language Systems International for interpretation services, inmates who cannot read or have limited reading skills are presented the information verbally, inmates who are hearing impaired are given written materials and if necessary ASL services, inmates who are visually impaired are presented the information verbally. The auditor interviewed one inmate with a physical disability (wheelchair), one inmate identified as hard of hearing, one Spanish speaking inmate, one inmate with cognitive disability. All inmates communicated to the auditor that PREA education was presented to them in a way they understood. All inmates were aware of various ways of reporting possible PREA incidents, medical and mental health services and emotional support services that are available. The auditor finds the facility compliant with this provision of the standard.

115.33 (e) During the onsite inspection of the FCI Seagoville facility, the audit reviewed inmate Admission & Orientation records verifying inmates received PREA education and materials. The PCM provided the auditor with copies of electronic inmate A&O records for the verification. The auditor finds the facility compliant with this provision of the standard.

115.33 (f) During the onsite inspection of the FCI Seagoville facility, the auditor observed PREA related posting throughout the facility. Posting for reporting, emotional support services, civil immigration (Consulate) information was identified in inmate housing areas, intake, treatment, education/vocational, health services, work areas, visitation, chapel, and maintenance areas. Postings could be easily read by inmates and presented in English and Spanish. The emotional support services posting needed updating to reflect the correct contact number. The facility provided the audit with the corrected flyers postings. All inmate education materials were available to inmates via personal tablets. The auditor observed and inmate pull of external reporting entry via the tablet. The target inmates interviewed who were had physical disabilities, blind, deaf, or hard of hearing, LEP and cognitive disability are indicated they had no issues with understanding or access to PREA related information. The auditor finds the facility compliant with this provision of the standard.

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

PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program

Training Curriculum Course Code NIC-5187-BXX

Sexually Abusive Behavior Prevention and Intervention Program Staff Training Curriculum

Investigator Training Records

**Interviews:**

Special Investigative Supervisor

PREA Compliance Manager

**Findings:**

115.34(a & d) The PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the Chief of Correctional Services ensures his/her Special Investigative Supervisor/Special Investigative Agents are appropriately trained under this section. The Chief of the Office of Internal Affairs ensures his/her staff are appropriately trained as well. The auditor interviewed an investigator with the Special Investigative Services (SIS) during the onsite inspection of the audit. The investigator confirmed that he had completed the training provided to all employees as well as specialized investigations training provided through the National Institute of Corrections (NIC). The auditor finds the facility is compliant with this provision of the standard.

115.34(b) The National Institute of Corrections Training Course Completion for Prison Rape Elimination Act (PREA) Investigating Sexual Abuse in a Confinement Setting NIC-5187-BXX curriculum was not provided to the auditor. The NIC website indicates the purpose of this course is to assist agencies in meeting the requirements of Prison Rape Elimination Act (PREA) Section 115.34 Specialized Training for Investigators. At the end of this course, you will be able to explain the knowledge, components, and considerations that an investigator must use to perform a successful sexual abuse or sexual harassment investigation consistent with PREA standards. The auditor finds the facility is compliant with this provision of the standard.

115.34 (c) The Special Investigative Services (SIS) during the onsite inspection of the audit. The investigator confirmed he completed the specialized investigations training provided through the BOP. The auditor verified the investigators received the training. The auditor reviewed the National Institute of Corrections Training Course Completion for Prison Rape Elimination Act (PREA) Investigating Sexual Abuse in a Confinement Setting NIC-5187-BXX roster of Seagoville investigators training. The auditor finds the facility is compliant with this provision of the standard.

115.34 (d) The PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the Chief of Correctional Services ensures his/her Special Investigative Supervisor/Special Investigative Agents are appropriately trained under this section. The Chief of the Office of Internal Affairs ensures his/her staff are appropriately trained as well. The auditor was unable to interview Internal Affairs or the Office of the Inspector General staff during the onsite inspection. The auditor finds the facility

	is compliant with this provision of the standard.
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<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Documentation Review:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>Sexually Abusive Behavior Prevention and Intervention Program Staff Training Curriculum</p> <p>National Institute of Corrections Website</p> <p><b>Interviews:</b></p> <p>Chief Psychologist</p> <p>Health Services Department Head</p> <p><b>Findings:</b></p> <p>115.35 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states Health Services Division ensures medical staff are appropriately trained under this section. The Reentry Services Division ensures mental health staff are appropriately trained under this section. The National Institute of Corrections Training Course Completion for Prison Rape Elimination Act (PREA) for Medical and Mental Health Care-BOP (CPG-0233-BXX) curriculum was not provided to the auditor. The NIC website states that this course aims to help agencies fulfill the mandates of Section 115.35 of the Prison Rape Elimination Act (PREA), specifically focusing on specialized training in medical and mental health care. The auditor finds the facility is compliant with this provision of the standard.</p> <p>115.35 (b) This provision of the standard is not applicable. Forensic medical exams are not conducted at the FCI Seagoville facility. Inmates are transported to Parkland Memorial Hospital in Dallas, Texas for forensic medical examinations. The auditor finds the facility is compliant with this provision of the standard.</p> <p>115.35 (c) During the onsite inspection the auditor interviewed medical and psychology staff who received specialized training consistent with the requirements of this standard. Both staff indicated they knew and understood the four standard requirements for this standard. The auditor reviewed training records of the two medical and mental health staff interviewed. The National Institute of Corrections Training Course Completion for Prison Rape Elimination Act (PREA) for Medical and Mental Health Care-BOP (CPG-0233-BXX) Training rosters for all FCI Seagoville medical</p>

	<p>and mental staff were provided to the auditor. The auditor finds the facility is compliant with this provision of the standard.</p> <p>115.35 (d) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program requires Medical and mental health staff received the same training as correctional employees at the FCI Seagoville in accordance with standard 115.31. Medical staff were received the training mandated for employees during annual training. The auditor finds the facility is compliant with this provision of the standard.</p>
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115.41	Screening for risk of victimization and abusiveness
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p><b>Documentation Review:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>PS 5321.09 Unit Management Manual</p> <p>Attachment A: PREA Intake Objective Screening Instrument Form</p> <p>Federal Bureau of Prisons: Inmate Intake Screening Form</p> <p>Bureau of Prisons Psychology Services Risk of Sexual Abusiveness Form</p> <p><b>Interviews:</b></p> <p>PREA Compliance Manager (PCM)</p> <p>Psychology t Services Staff</p> <p>Health Services Staff</p> <p>Intake Staff</p> <p>Unit Managers</p> <p>Targeted and Random Inmates</p> <p><b>Findings:</b></p> <p>115.41 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states inmates are screened by Health Services, Psychology Services, and Unit Management staff for risk of sexual victimization and sexual abusiveness. During the onsite inspection, the auditor toured the Receiving and Discharge Building and held informal interviews with two R&amp;D staff. Since there were no incoming inmate intakes during the inspection, the R&amp;D staff detailed the intake process. Both staff members confirmed that the process is consistently completed for all inmates</p>

received at the facility. Additionally, a facility psychologist and counselor reported during the inspection that inmates are assessed within the required 72-hour timeframe. They explained that each department is responsible for completing a portion of the screening for sexual victimization and conducting any necessary reassessments based on additional information. Throughout the interview process, the auditor reviewed initial assessment and reassessment files of 40 targeted and random inmates. All inmates affirmed being questioned about their previous experiences of sexual victimization and abuse, as well as their gender and vulnerability status. The auditor determined that the facility is compliant with this standard provision.

115.41. (b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the inmate screening will take place within 72 hours of arrival at the facility. The Pre-Audit Questionnaire (PAQ) documented that 998 inmates were received at the facility in the 12 months preceding the audit, all of whom were assessed within 72 hours of arrival. Random and targeted inmates interviewed confirmed that assessments were typically finalized within one to three days of their admission. The auditor meticulously examined the assessment dates of each inmate to verify compliance with the 72-hour requirement. The auditor determined that the facility is compliant with this standard provision.

115.41 (c)(h) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states staff are required to follow the Program Statement Intake Screening protocols to take during the intake screening process. The PREA Intake Objective Screening Instrument (Attachment A) encompasses all criteria necessary to evaluate an inmate's risk of sexual victimization or abusiveness. The Unit Management is responsible for documenting and making referrals based on the information available and the inmate's responses on the Intake Screening Form. Referrals must include relevant comments regarding the inmate's likelihood of experiencing sexual victimization or being abusive. If no criteria are applicable, staff will indicate that no PREA criteria are met. When further assessment is necessary, staff will mark the inmate's file as "At Risk" until Psychology Services and Correctional Services make a determination. The assessment process requires screening staff to encourage inmates to disclose as much information as possible to ensure appropriate classification and protection. Inmates are not obligated to respond to assessment questions, and they will not face disciplinary action for choosing not to do so. The auditor finds the facility compliant with this standard provision.

115.41 (d) The auditor was provided with three documents utilized for inmate assessment screening: the PREA Intake Objective Screening Instrument Form, the Federal Bureau of Prisons Inmate Intake Screening Form, and the Bureau of Prisons Psychology Services Risk of Sexual Abusiveness Form. These forms were reviewed by the auditor during interviews with 40 targeted and random inmates. The objective screening tool includes each of the PREA criteria for evaluating inmates' risk of sexual victimization. It also contains sections for counselors and psychologists to provide additional comments based on their observations of the inmates. Inmates are afforded the opportunity to identify as LGBTI and share their own perception of vulnerability. The auditor determined that the facility is compliant with this standard

provision.

115.41 (e) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that during the intake screening process, when staff identify inmates with a history of sexual victimization within BOP custody by self-report or from review of available documents, such as judgment and commitment orders, criminal records, pre-sentence investigation reports, Inmate Central File data, etc., inmate must be referred to Psychology Services. If not previously documented on BOP records, staff must notify the Chief of Correctional Services of the inmate's report of victimization to ensure that appropriate steps (investigation, documentation, CIMS concerns, etc.) have been taken. The auditor reviewed files where inmates were referred to for the psychology department for additional assessment and/or counseling. A clinical assessment is made to determine whether the inmate has a Low Risk or Elevated Risk of abusiveness. Random and targeted inmate risk assessment files were reviewed to determine identified risk to assess risk levels and ensure appropriate measures were taken. Due to the FCI Seagoville's mission of providing sex offender treatment programs, most inmates had prior convictions for sex offenses against adults and children. Despite these serious convictions, most risk assessments were identified as low risk. The auditor finds the facility compliant with this standard provision.

115.41 (f) PS 5321.009 Unit Management Manual states that an inmate's risk of sexual victimization or abusiveness at the initial classification and program review. Using the PREA risk factors identified in the PREA Intake Objective Screening Instrument, available on the Correctional Programs intranet page or in the Program Statement Sexually Abusive Behavior Prevention and Intervention Program employees will reassess the inmate's risk of sexual victimization or abusiveness using the PREA risk factors. The reassessment will be documented on the Program Review Report, and if additional risk factors are identified, unit employees will notify Psychology Services. During the onsite inspection, the auditor conducted interviews with both targeted and randomly selected inmates, asking them if they had been questioned about concerns regarding victimization or abuse since arriving at the facility. Out of the 40 inmates interviewed, 15 reported that they had not been asked about these concerns. However, upon reviewing their assessment documents, the auditor found evidence indicating that these interviews had actually been completed 21 days later. The auditor finds the facility compliant with this standard provision.

115.41 (g) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states Psychology Services staff reassess the inmate's risk level whenever warranted based upon receipt of additional relevant information (e.g., incident of sexual abuse, protective custody request, recent diagnosis of gender dysphoria, etc.). During the onsite inspection, the facility psychologist and counselor confirmed that inmates undergo assessment for all instances of sexual abuse and sexual harassment. They explained that each of them is tasked with completing a portion of the screening for sexual victimization, as well as conducting any necessary reassessments. These reassessments are prompted by additional information, referrals, requests, or incidents of sexual abuse, or if there's information suggesting an inmate is at risk of sexual victimization or abusiveness. The auditor reviewed assessments related to inmate-reported incidents of sexual abuse as part of the

	<p>inspection process. The auditor finds the facility compliant with this standard provision.</p> <p>115.41 (h) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that if an inmate refuses to respond or elects not to disclose information that only to questions about disabilities; Gay, Lesbian, Bisexual, Transgender, Intersex (GLBTI) status; gender nonconformance; previous sexual victimization; and the inmate’s self-perception of vulnerability, he/she may not be disciplined. The assessment process mandates screening staff to encourage inmates to disclose as much information as possible to guarantee suitable classification and protection. However, inmates are not mandated to respond to assessment questions, and they will not face disciplinary action if they choose not to do so. During interviews with targeted and random inmates, it was reported that none were informed of potential disciplinary sanctions for not responding to assessment questions. Similarly, interviews with assessment staff (psychologists and counselors) revealed that inmates are not obliged to respond to assessment questions, and disciplinary sanctions are not enforced for non-cooperation. The auditor finds the facility compliant with this standard provision.</p> <p>115.41 (i) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states any information related to sexual victimization or abusiveness, including the information entered the comment section of the Intake Screening Form, is limited to a need-to-know basis for staff, only for the purpose of treatment and security and management decisions, such as housing and cell assignments, as well as work, education, and programming assignments. The facility warden, PCM, chief psychologist, and counselor informed the auditor that inmate screening records are electronically stored, with access restricted to staff with a need-to-know basis. Specifically, access is granted to those responsible for counseling, treatment, security management, education, programming, work, and housing assignments. It was emphasized that not all staff members have access to inmate assessment information. The auditor finds the facility compliant with this standard provision.</p>
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<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<p><b>Auditor Discussion</b></p> <p><i>115.42 (a-c) The provisions of this standard were completed during the Central Agency Audit. (see findings)</i></p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Agency Directive and the PREA Screen Tool.</p> <p><b>INTERVIEWS:</b></p>

Agency PREA Coordinator.

**FINDINGS:**

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

**115.42 (d-g) The provisions of this standard were completed during the audit.**

**Documentation Review:**

PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program

Transgender Resource Guide/ An Aid for People in the Custody of the Federal Bureau of Prisons

PS 5200.08 Transgender Offender Manual

Attachment A: PREA Intake Objective Screening Instrument

Federal Bureau of Prisons: Inmate Intake Screening Form

Bureau of Prisons Psychology Services Risk of Sexual Abusiveness Form

**Interviews:**

PREA Compliance Manager (PCM)

Psychology Services Staff

Health Services Staff

Unit Managers

Targeted and Random Inmates

**Findings:**

115.42(d) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that assignments for transgender or intersex inmates shall be reassessed at least twice each year to review any threats to the inmates' safety. The auditor interviewed the PCM and Chief Psychologist during the onsite inspection of the facility. They both confirmed that transgender inmates are reviewed by the Unit Team and the PCM every quarter. Transgender and intersex inmates are allowed to report their concerns as it relates to their safety and treatment at the facility. Any concerns noted would be addressed and appropriate changes are made. A recommendation was made to add intersex verbiage as indicated by PREA standard language because the facility policy and procedure list transgender inmates and does not include "intersex" inmate language. The auditor finds the facility compliant with this standard provision.

115.42(e) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the standard language that transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration. The Transgender Resource Guide/ An Aid for People in the Custody of the Federal Bureau of Prisons states that an individual in custody have the right to make decisions about their care in collaboration with mental health and medical providers. Three transgender inmates interviewed indicated they asked if they had concerns about their sexual safety during the initial intake and during the six-month reviews. The auditor reviewed each inmate's Intake Screening Form. The form gives inmates an opportunity to express any concerns or feelings about their own vulnerabilities. This could include fears related to physical safety, mental health, or other forms of abuse and harassment. The auditor finds the facility compliant with this standard provision.

115.42(f) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program During reiterates the standard language that transgender or intersex be given an opportunity to shower separately from other inmates. During the onsite inspection of the facility, the auditor observed separate shower stalls with doors allowing sufficient privacy that prevent viewing from other inmates or opposite gender staff. Three transgender inmates interviewed state they have privacy during showers and when using the restroom and had no issues. During the inspection of several housing areas, unit managers interviewed stated transgender and intersex inmates are given the opportunity to shower separately from other inmates. The auditor finds the facility compliant with this standard provision.

115.42(g) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that lesbian, gay, bisexual, transgender, or intersex inmates will not be placed into dedicated facilities, units, or wings, solely on the basis of their identification or status. The auditor was provided written responses to the interview questions from the Agency PREA coordinator. She noted that the Bureau of Prisons does not have any facilities, units, or wings dedicated to lesbian, gay, bisexual, transgender, or intersex inmates. The three transgender inmates interviewed during the onsite inspection of

	<p>the facility stated that they had not been housed in housing specifically based on their transgender status and that they were not aware of the facility having any specific wings or looks like they're units dedicated for LGBTI inmates. During the inspection of the facility the auditor visited every housing unit, and none were identified as designated housing for LGBTI inmates. The auditor finds the facility compliant with this standard provision.</p>
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<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p><b>Documentation Review:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>BP-A1002 Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation Form</p> <p><b>Interviews:</b></p> <p>Warden</p> <p>Staff Who Supervise Inmates in Segregated Housing</p> <p>Inmates Who Reported Sexual Abuse or Sexual Harassment</p> <p><b>Findings:</b></p> <p>115.43 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states inmates are placed in administrative detention in accordance with the Program Statement Special Housing Units. The auditor interviewed staff who supervise inmates in segregated housing regarding the provisions of this standard. He conveyed inmate victims that report sexual abuse or harassment are not assigned to the Special Housing Unit (SHU) unless requested to be placed in protective custody. The facility reported there were no inmate victims placed in the SHU during the previous twelve months. The auditor interviewed one inmate who was assigned to the SHU after reporting an incident of sexual abuse. The inmate reported that he voluntarily preferred being assigned to the SHU because he was having issues with being in the general population. The inmate had been assigned to the SHU two days prior to the audit. The auditor was provided with a copy of the BP-A1002 Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation Form that would be utilized when an inmate sexual abuse victim is assigned to segregated housing. The auditor finds the facility compliant with this provision of the standard.</p> <p>115.43 (b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states when an inmate is placed in special housing involuntarily, access to programs, privileges, education, or work should not be interrupted, to the extent</p>

possible. If they are limited, the Chief of Correctional Services ensures that documentation exists reflecting the limitation, duration, and rationale for limitation. The facility warden stated during the onsite inspection that inmates that report sexual abuse are removed from the imminent threat, but not placed in segregated housing unless the inmate requests protective custody (voluntary). Should the risk assessment deem the inmate need to be assigned to segregated housing the Chief of Correctional Services will follow the protocols of PS 5324 Sexually Abusive Behavior Prevention and Intervention Program. Investigations are reviewed weekly, and a threat assessment is completed within 30 days. The auditor finds the facility compliant with this provision of the standard.

115.43 (c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program state 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. The Warden should evaluate the least restrictive methods for separation of the alleged victim and alleged perpetrator. The completed BP-A1002 is stamped "FOI EXEMPT" and placed in the Privacy Section of the Inmate Central File to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. If information gathered leads to an investigation, the BP-A1002 becomes part of the investigative file. The completed form is emailed to BOP-RSD-PREA Coordinator and filed with the investigative case. The PAQ lists zero instances of inmates that reported sexual abuse being placed in involuntary segregation. During the audit one inmate that reported sexual abuse but requested to be housing the segregated housing. The auditor was provided a copy of the BP-A1002 Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation Form as an example. The auditor finds the facility compliant with this provision of the standard.

115.43 (d) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the facility warden will ensure all options are considered and evaluated to provide the least restrictive methods for separation of the alleged victim and perpetrator the information is documented on the BP—A1002 form and placed in the inmate's central file. When an investigation is initiated the BP-A1002 becomes a part of the investigative file and provided to the BOP-RSD-PREA Coordinator and filed with the investigative case. Psychologists will provide ongoing crisis intervention, assessment, and treatment needs and documenting the results, referrals, and additional treatment options related to inmate's risks. The auditor was provided a sample of the BP-A1002 form for review. The auditor finds the facility compliant with this provision of the standard.

115.43 (e) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the inmate's status is reviewed during weekly Special Housing Unit meetings. The facility warden reported should the risk assessment deem the inmate need to be assigned to segregated housing the Chief of Correctional Services will follow the protocols of PS 5324.12. Investigations are reviewed weekly, and a threat assessment is completed within 30 days. The auditor finds the facility compliant with this provision of the standard.

<b>115.51</b>	<b>Inmate reporting</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <hr/> <p><b>Documentation Review:</b></p> <p>Documentation Review:</p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>FCI Seagoville Admissions &amp; Orientation Information Handbook</p> <p>Federal Bureau of Prisons Sexually Abusive Behavior Prevention and Intervention Pamphlet</p> <p>PS 3420.11 Standards of Employee Conduct</p> <p><b>Interviews:</b></p> <p>Random and Targeted Inmates</p> <p>Random Staff</p> <p><b>Observations:</b></p> <p>Housing Unit Postings</p> <p>Officers Break and Dining Hall</p> <p><b>Findings</b></p> <p>115.51 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the Bureau inmates are encouraged to report allegations to staff at all levels, including local, regional and Central Office. They are also currently provided with avenues of internal reporting, such as telephonically to a specific department (such as the Special Investigative Services), or by mail to an outside entity. Inmates are provided information on reporting mechanisms as noted in section 115.33.</p> <p>During the onsite inspection of the audit 20 random inmates interviewed reported that they various ways of reporting PREA related incidents. Most reported that they would report to a unit supervisor, Special Investigative Services (SIS) Lieutenant and OIG was an option for reporting anonymously. The auditor toured every inmate housing unit, the jail units, and camp areas of the facility and flyers were posted with multiple ways an inmate could abuse and neglect. The auditor finds the facility compliant with this provision of the standard.</p> <p>115.51 (b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states Inmates are provided contact information and access to the Office of the Inspector General to make such reports. During the audit inspection the auditor observed postings with the Office of the Inspector General (OIG) mailing address and hotline information where inmates may report. Random inmates interviewed all had</p>

knowledge of reporting to OIG anonymously by the hotline or in writing. The reporting information is available in inmate educational materials FCI Seagoville Admissions & Orientation Information Handbook and Federal Bureau of Prisons Sexually Abusive Behavior Prevention and Intervention Pamphlet provided to inmates during intake. The auditor finds the facility compliant with this provision of the standard.

115.51 (c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states for the purpose of this section, information received anonymously refers to “drop-notes” or other written communication. Non-investigatory staff do not offer anonymity to inmates. The auditor interviewed ten random staff who reported they are required to accept inmate reports of sexual abuse or sexual harassment and report to a supervisor or a facility SIS investigator. The staff were not able to accept inmate’s verbal request to be anonymous as all reports are to be reported to a supervisor or SIS investigator. Inmates can report incidents to an SIS investigator, PCM, or OIG and remain anonymous. The auditor finds the facility compliant with this provision of the standard.

115.51 (d) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states Staff reporting requirements are addressed in the PS 3420.11 Standards of Employee Conduct. For the purposes of this section, 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. Allegations involving staff members may also be reported to the Office of Internal Affairs or the Office of the Inspector General, as appropriate. The ten random staff interviewed conveyed they were able to report incidents of sexual abuse and sexual harassment privately to a supervisor and remain anonymous to OIA or OIG. The auditor observed posting regarding staff reporting in the officer’s break and dinner areas. The auditor finds the facility compliant with this provision of the standard.

<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Document Review:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>PS 1330.18 Administrative Remedy Program</p> <p>Bureau of Prisons Admission &amp; Orientation Handbook</p> <p><b>Interviews:</b></p> <p>Specialized staff</p>

Targeted inmates

**Findings:**

115.52(a) The Federal Bureau of Prisons is not exempt from this standard. The agency has an inmate administrative grievance procedure. PS 1330.18 Administrative Remedy Program provides inmates the opportunity to seek a formal review of issues relating to any aspect of his or her confinement. The auditor finds the facility compliant with this standard provision.

115.52(b). PS 1330.18 Administrative Remedy Program states administrative remedies regarding allegations of sexual abuse may be filed at any time. Accordingly, administrative remedies regarding an allegation of sexual abuse shall not be rejected as untimely. When an inmate includes on a single form multiple unrelated issues, the portion of the administrative remedy regarding allegations of sexual abuse should be accepted and processed. The inmate shall be advised to use a separate form for each unrelated issue. Inmates are not required to attempt an informal resolution for sexual abuse incidents. During the onsite inspection the auditor conducted formal interviews with staff and inmates regarding inmate reporting through the administrative remedy procedure. Inmates were aware of the process and had issues with using the program. Staff interviewed reported that they were aware the inmates could report sexual abuse incidents through the administrative remedy procedure. The administrative remedies were accessible to all inmates in all inmate housing areas. The auditor finds the facility compliant with this standard provision.

115.52(c) PS 1330.18 Administrative Remedy Program states matters in which specific staff involvement is alleged may not be investigated by either staff alleged to be involved or by staff under their supervision. Allegations of physical abuse by staff shall be referred to the Office of Internal Affairs (OIA). The auditor finds the facility compliant with this standard provision.

115.52(d). PS 1330.18 Administrative Remedy Program states an administrative remedy response shall be made by the warden or Community Corrections Manager within 20 calendar days. The FCI Seagoville reported there have been no administrative remedies filed in reference to sexual abuse over the previous 12 months prior to the audit. The auditor finds the facility compliant with this standard provision.

115.52(e) PS 1330.18 Administrative Remedy Program indicates the inmate must approve the remedy filed by a third party on his or her behalf. The approval is documented and included with the inmate's signature. When the inmate declines to have the remedy processed on his or her behalf will also be documented with the inmate's signature. The documentation will be retained in the agency Administrative Remedy File at the appropriate level and on Sentry. An inmate is required to personally file any subsequent appeal. However, the inmate may receive assistance in preparing the appeal. The FCI Seagoville reported zero sexual abuse related administrative remedy incidents for the 12 months prior to the audit. The auditor finds the facility compliant with this standard provision.

	<p>115.52(f) PS 1330.18 Administrative Remedy Program states when a remedy meets both criteria, the remedy will receive expedited processing. The inmate must clearly mark “emergency” on the remedy and explain the reason for filing as an emergency remedy. An expedited response shall be provided within 48 hours and the remedy response within five calendar days. The FCI Seagoville reported zero sexual abuse related administrative remedy incidents for the 12 months prior to the audit. The auditor finds the facility compliant with this standard provision.</p> <p>115.52(g) PS 1330.18 Administrative Remedy Program states that the maintenance of an effective sexual abuse prevention policy, and general secure and orderly running of an institution, requires that inmates be held responsible for manipulative behavior and false allegations. Allegations of false reports will be considered by staff in accordance with the procedures and standards of the Inmate Discipline Program policy. The FCI Seagoville reported zero sexual abuse related administrative remedy incidents for the 12 months prior to the audit. The auditor finds the facility compliant with this standard provision.</p>
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<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Documentation Reviewed:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>PREA Victim Advocacy Brochure</p> <p>Memorandum of Understanding- Gratuitous Service Agreement (GSA) Parkland Rape Crisis Center</p> <p>FCI SEAGOVILLE Admissions &amp; Orientation Information Handbook</p> <p><b>Interviews:</b></p> <p>PREA Compliance Manager</p> <p>Psychology Staff</p> <p>Inmates Who Reported Sexual Abuse</p> <p><b>Observations:</b></p> <p>Inmate Housing Units</p> <p><b>Findings:</b></p>

	<p>115.53(a-b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states “The Institution PREA Compliance Manager, with the assistance of Psychology Services staff, seeks to establish an agreement with community service providers who are able to provide confidential emotional support services as it relates to sexual abuse. When an agreement is approved, the attempts are documented. Staff will ensure the information if readily available and provided to inmates, to have access to the Bureau’s efforts in preventing, detecting, and responding to sexual abuse and sexual harassment. Staff will also provide contact information and confidential communication services, as reasonably as possible. Interviews with four inmates who reported sexual abuse revealed that they were not completely informed about available emotional support services for incidents of sexual abuse. Despite notices posted throughout the facility and clear presentation in the Inmate Admissions and Orientation Information Handbook, the auditor recommended conducting refresher training. The auditor finds the facility compliant with this standard provision.</p> <p>115.53(b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states confidential communication is distinguished from privileged communications such as attorney-client relationship. The communications are monitored in a manner consistent with agency security practices and should be addressed in any memorandum of understanding with the outside victim advocacy organization. Posting observed by the auditor clearly stated that the calls are recorded and monitored by SIS staff only. The calls are monitored if there is a concern that hotline is being used inappropriately. The auditor finds the facility compliant with this standard provision. The auditor finds the facility compliant with this standard provision.</p> <p>115.53(c) During the audit at FCI Seagoville, officials provided the auditor with a copy of a Memorandum of Understanding (MOU) with the Parkland Rape Crisis Center, outlining a Gratuitous Service Agreement (GSA). This agreement ensures inmates receive confidential emotional support services related to sexual violence and access to a victim advocate while at a local hospital. At the time of the onsite audit, the MOU with the Parkland Rape Crisis Center was in the process of renewal and was still under review by the BOP agency's contract services. Updated information and flyers detailing inmate access were provided to the auditor and were prominently displayed throughout the facility. The auditor finds the facility compliant with this standard provision.</p>
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<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<b>Documentation Review:</b>

	<p>Third-Party Reporting Flyers</p> <p>Bureau of Prisons FCI Seagoville Website</p> <p><b>Findings:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the Bureau posts publicly, and maintains, the third-party reporting avenue on its public website. The auditor reviewed the Bureau of Prisons website Sexual Abuse Prevention-Inmates have the right to be safe from sexually abusive behavior. The website provides information about the Agency's Zero Tolerance for Sexual Abuse policy and instructions on how family members can report concerns regarding an inmate. This ensures transparency and accountability, emphasizing the agency's commitment to the safety and well-being of inmates. During the onsite inspection of the facility the auditor noted posting regarding how to report throughout the facility in inmate housing areas and visitation areas. Zero Tolerance posting were in all inmate housing areas. The postings list various ways to report by email or writing, with details of the agency website that allowed staff, friends, family of adult in custody and general public can also submit complaints. The auditor finds the facility compliant with this standard provision.</p> <p><a href="https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp">https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp</a> .</p>
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<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Documents Review:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>Texas Administrative Code</p> <p><b>Interviews:</b></p> <p>Warden</p> <p>PREA Compliance Manager (PCM)</p> <p>Specialized staff</p> <p>Random staff</p> <p>Health Services Staff</p> <p><b>Findings:</b></p>

115.61(a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program requires that all staff members report information concerning incidents or possible incidents of sexual abuse or sexual harassment to the Operations Lieutenant in accordance with the Program Statement Standards or Employee Conduct. The Operations Lieutenant is then required to notify the PCM. During onsite inspection of the facility the ten random staff interviewed conveyed the procedures for reporting incidents of inmate sexual abuse and sexual harassment immediately to a supervisor or the Operations Lieutenant. The auditor finds the facility compliant with this provision of the standard.

115.61 (b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program requires the information concerning the identity of the alleged inmate victim and the specific facts of the case are limited to staff who need to know because of their involvement with the inmate’s welfare and the investigation of the incident. The auditor interviewed random staff during the onsite inspection each staff clearly understood the requirements of maintaining confidentiality of sexual assault and sexual harassment investigations and any further discussion would occur with the investigating officer. The auditor finds the facility compliant with this provision of the standard.

115.61(c) Medical and mental health staff interviewed during the audit reported the requirement to immediately report incidents of sexual abuse of inmates. Staff did confirm that they would inform the inmate of their duty to report and limits to the confidentiality of information learned from the inmate. The auditor finds the facility compliant with this provision of the standard.

115.61(d) The BOP Program Statement requires that the agency notify designated State or local services agencies if the alleged sexual abuse victim is under the age of 18. FCI Seagoville does not house inmates under the age of 18 but have disabled and elderly inmates that can be considered vulnerable. Medical and mental health staff interviewed during the audit reported the requirement to immediately report incidents of sexual abuse of inmates. The auditor finds the facility compliant with this provision of the standard.

115.61(e) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that staff must report and respond to all allegations of sexually abusive behavior, regardless of the source of the report. The PCM is to refer the incident for investigation to the appropriate office and review the incident for any further response. The facility warden and PCM confirmed that the institution investigates all allegations of sexual abuse and sexual harassment, regardless of the how the allegation is received. All allegations are forwarded to the investigators for review and investigation. The auditor finds the facility compliant with this provision of the standard.

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

	<p><b>Auditor Discussion</b></p> <p><b>Documentation Review:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p><b>Interview:</b></p> <p>Facility Warden</p> <p>Agency Head Designee Written Interview</p> <p><b>Findings:</b></p> <p>115.62 PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states when an inmate alleges that another inmate or staff member is the perpetrator of sexual abuse, the Operations Lieutenant is immediately notified. Depending on the severity of the alleged behavior, immediate safeguards are implemented for the inmate. These measures may include monitoring the situation, changing housing or work assignments, or placing both the alleged victim and perpetrator in Segregated Housing, among other actions. The decisions regarding safeguarding the inmate must consider the impact on staff members, as outlined in the Master Agreement. Removal from the facility is considered an extreme measure, with alternatives such as reassignment to another unit or post, or other effective measures to separate staff from inmates being explored. Simultaneously, the Operations Lieutenant promptly refers all inmates who are reported or suspected victims of sexual abuse to Psychology Services for assessment of vulnerability and treatment needs. Additionally, the Institution PREA Compliance Manager is notified of the situation by the Operations Lieutenant.</p> <p>During the onsite inspection, the facility warden was interviewed regarding the agency’s protection protocols. She emphasized that immediate steps would be taken to remove the inmate from any perceived threat, initiating an investigation promptly thereafter. A comprehensive risk assessment would be conducted to evaluate the seriousness of the situation. Various measures are available to ensure the inmate's safety without resorting to restrictive housing. The Agency Head Designee, in an interview provided to the auditor, affirmed that the agency acts swiftly to protect alleged victims by separating them from potential harm. Responses vary based on the severity of the threat: if the threat involves another inmate, options include changing housing or work assignments, or placing the inmate in the Special Housing Unit if necessary. When the threat involves a staff member, additional measures such as reassigning the staff member or temporarily removing them from the facility during the investigation are considered. The audit finds the facility compliant with this standard provision.</p>
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<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

**Documents:**

PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program

Investigative Files

**Interviews:**

BOP Agency Head Designee Interview

Warden Interview

**Findings:**

115.63(a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states in cases where there is an allegation that sexually abusive behavior occurred at another Bureau facility, the Warden (or his/her designee) 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. 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 (or his/her designee) contacts the appropriate office of that correctional agency. The FCI Seagoville facility reported no reports of inmate allegations that occurred at another facility or any allegations from another facility that occurred at FCI Seagoville during the 12 months prior to the audit. The auditor finds the facility compliant with this provision of the standard.

115.63(b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the PREA standard language that notification be provided as soon as possible, but no later than 72 hours after receiving the allegation. The FCI Seagoville PAQ reported no reports of inmate allegations that occurred at another facility or any allegations from another facility that occurred at FCI Seagoville during the 12 months prior to the audit. The auditor finds the facility compliant with this provision of the standard.

115.63(c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the PREA standard language that the agency shall document that it has provided such notification. The FCI Seagoville PAQ reported no reports of inmate allegations that occurred at another facility or any allegations from another facility that occurred at FCI Seagoville during the 12 months prior to the audit. The auditor finds the facility compliant with this provision of the standard.

115.63(d) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the PREA standard language that the facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards. According to a written response from the BOP

	<p>agency head designee, when other agencies make referrals directly to the institution, particularly to the Warden. In cases where agencies are uncertain about contacting the institution directly, they may reach out to the Bureau of Prisons National PREA Coordinator. The National PREA Coordinator then forwards the referral to the Warden of the institution. If initial notifications bypass the Warden, staff receiving them promptly forward them to ensure allegations are properly investigated. The Warden determines if the allegations can be handled locally or require referral to the Office of Internal Affairs (OIA).</p> <p>Each institution meticulously tracks referrals from other facilities or agencies. If our agency receives a referral, we collaborate with the sending facility to conduct a thorough investigation, which includes interviews, statements, and gathering evidence. All pertinent information and evidence are then provided to the designated facility responsible for completing the investigation.</p> <p>Additionally, the National PREA Coordinator recently received notification via mail from the Florida Department of Corrections regarding an inmate in their custody. The coordinator promptly forwarded this information to Florida’s PREA Coordinator for appropriate action. The auditor finds the facility compliant with this provision of the standard.</p>
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<b>115.64</b>	<b>Staff first responder duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Documentation Review:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>Sexually Abusive Behavior Prevention and Intervention Program Staff Training Curriculum</p> <p><b>Interviews:</b></p> <p>Targeted Staff</p> <p>Random Staff</p> <p>Non-Security First Responder</p> <p><b>Interviews:</b></p> <p>Targeted inmates</p> <p>Specialized staff</p> <p>Random staff</p>

	<p><b>Findings:</b></p> <p>115.64(a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the PREA standard language and states the staff first responder must preserve the crime scene. SIS staff are responsible for collecting information/evidence. The investigation, in coordination with the agency to which the case may be referred, must follow the guidance given in agency policies and practices concerning evidence gathering and processing procedures. During the onsite inspection, ten randomly selected staff members were able to provide detailed descriptions of their first responder duties. The Specialized Investigative Lieutenant informed the auditor that he and his investigative team are tasked with collecting physical evidence and ensuring it is stored appropriately for access by OIG. The auditor verified the first responder duties were listed in the Sexually Abusive Behavior Prevention and Intervention Program Staff Training Curriculum listing the (4) PREA standard requirements. The auditor finds the facility compliant with the provision of this standard.</p> <p>115.64(b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the standard language requiring a non-security staff member first responder to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. The PAQ documented two instances where non-security staff acted as first responders. During the onsite audit, the auditor interviewed a non-security staff member who had responded to an incident of sexual abuse. The medical staff member explained to the auditor the appropriate procedures for handling such incidents as a first responder. He stated that he promptly removed the alleged victim from the area to separate them from the assailant and immediately informed a security supervisor. The auditor finds the facility compliant with the provision of this standard.</p>
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<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p><b>Documentation Review:</b></p> <p>SEA-5324.12(d) Sexually Abusive Behavior Prevention and Intervention Program Institutional Supplement</p> <p><b>Interviews:</b></p> <p>Warden</p> <p>PREA Compliance Manager</p> <p>Targeted Staff</p>

	<p>Random Staff</p> <p><b>Findings:</b></p> <p>115.65(a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program  The program statement contains the coordinated response plan for the Bureau. The Plan provided a detailed protocol for handling incidents of sexual abuse within a prison. Overall, this protocol outlines a comprehensive approach to handling incidents of sexual abuse within the prison, ensuring that victims receive appropriate medical, psychological, and investigative support while addressing security concerns. The purpose of the plan is to establish procedures aimed at preventing sexually assaultive behavior. It included provisions for medical and psychological support, ensuring safety, and addressing incidents involving assailants through appropriate control, discipline, and consideration for prosecution.</p> <p>During the onsite inspection the auditor interviewed 10 random staff regarding the actions taken upon receiving, observing, or hearing a sexual abuse or sexual harassment. Eight of the ten had pocket cards with information regarding their first responder duties. Interviews with facility warden and her administrative (Associate Warden, Executive Assistant/Camp Admin, Captain, Chief of Psychology) were all able to describe their roles and responsibility within the coordinated response plan. The audit finds the facility compliant with the provisions of this standard.</p>
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<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>According to the Agency Auditor</p> <p>115.66(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:  Agency Directives and BOP PREA Plan.</p> <p>INTERVIEWS:  Agency Head Designee</p> <p>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</p>

	warranted. The auditor was advised that the CBA is currently being renegotiated and will contain the required language in its final form.
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<b>115.67</b>	<b>Agency protection against retaliation</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Documentation Review:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>Sexual Abuse Investigation Files</p> <p><b>Interviews:</b></p> <p>Agency Head Designee Written Interview</p> <p>Warden</p> <p>PREA Compliance Manager (PCM)</p> <p>Specialized Staff</p> <p>Targeted Inmates</p> <p><b>Findings:</b></p> <p>115.67 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states The Institution PREA Compliance Manager monitors staff and inmates who have reported sexual abuse allegations to protect them from retaliation for 90 days. However, if the initial monitoring indicates a continuing need, periodic status checks occur. During the onsite inspection, the PCM and Special Investigative Services (SIS) Lieutenant noted that inmates who reported sexual abuse and witnesses concerned about retaliation are monitored for 90 days after the report. Inmates who reported abuse recalled having regular discussions with PCM or psychology staff following their report. The auditor examined seven inmate-on-inmate sexual abuse investigative files all deemed as unsubstantiated, necessitating a 90-day monitoring period afterward. PCM or SIS lieutenant conducted periodic checks as per protocol. The auditor concluded that the investigation was meticulously documented, meeting all necessary requirements. The auditor determined that the facility is compliant with this standard provision.</p> <p>115.67 (b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the PCM monitors staff and inmates who have reported sexual abuse allegations to protect them from retaliation for 90 days. However, if the initial monitoring indicates a continuing need, periodic status checks occur. The auditor reviewed the Agency Head’s interview written responses regarding the inmate and</p>

staff protections against retaliation. The responses indicate the PCM monitors inmates and staff to ensure there is no retaliation for alleging or reporting sexually abusive behavior. For inmates, this monitoring includes housing and cell assignments, work assignments, programming changes, and disciplinary action. For staff, the monitoring includes reassignment of work, posts, performance evaluations, and shift changes. In addition, the person being monitored will be offered psychology services to ensure their mental and emotional wellbeing is cared for. The facility warden emphasized the implementation of necessary measures to safeguard inmate victims and cooperating witnesses from retaliation by staff or other inmates. These measures encompass referral for emotional support via psychology services for inmates and access to the Employee Assistance Program (EAP) for staff. Inmates who reported abuse mentioned engaging in regular discussions with PCM or psychology staff after making their report. Notably, none of the inmate victims were assigned to the SHU due to reporting sexual abuse. Additionally, there were no instances of retaliation identified in any of the seven inmate-on-inmate investigative files that necessitated additional monitoring. The auditor determined that the facility is compliant with this standard provision.

115.67 (c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the PCM monitors staff and inmates who have reported sexual abuse allegations to protect them from retaliation for 90 days. However, if the initial monitoring indicates a continuing need, periodic status checks occur. During the onsite inspection of the facility, the auditor examined seven inmate-on-inmate sexual abuse investigative files. These files contained periodic checks carried out by the PCM or SIS lieutenant, which involved evaluations for negative performance reviews and housing arrangements possibly signaling retaliation. No incidents demanding additional monitoring due to evidence of retaliation were found. Furthermore, there were no staff witnesses who warranted monitoring in the 12 months leading up to the audit. The auditor finds the facility compliant with this standard provision.

115.68	Post-allegation protective custody
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Documents:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>BOP Form BP-A1002, Safeguarding of Inmates Alleging Sexual Abuse/ Assault Allegation.</p> <p><b>Interviews:</b></p> <p>Specialized staff</p>

	<p>Targeted Inmates</p> <p><b>Findings:</b></p> <p>115.68 PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that the agency follows the Program Statement from Standard 115.43 and utilizes BOP Form BP-A1002, Safeguarding of Inmates Alleging Sexual Abuse/ Assault Allegation. The PS states inmates are placed in administrative detention in accordance with the Program Statement Special Housing Units. The auditor interviewed one staff member who supervise inmates in segregated housing regarding the provisions of this standard. He conveyed inmate victims that report sexual abuse or harassment are not assigned to the Special Housing Unit (SHU) unless requested to be placed in protective custody. The facility reported there were no inmates' places in the SHU during the previous twelve months. Interviews with inmates that reported sexual abuse stated that they were not assigned to segregated housing and to their knowledge the alleged perpetrator is assigned to a different housing or segregated housing. The auditor was provided with a copy of the BP-A1002 Safeguarding of Inmates Alleging Sexual Abuse/Assault Allegation Form that would be utilized when an inmate sexual abuse victim is assigned to segregated housing. The auditor finds the facility compliant with this provision of the standard.</p>
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<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Documents:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>Investigation files</p> <p><b>Interviews:</b></p> <p>PREA Compliance Manager</p> <p>Specialized staff</p> <p><b>Findings:</b></p> <p>115.71(a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states upon activating the full Response Protocol, the investigation phase is initiated and required notifications must be made. Required notification must be made. When an inmate is the alleged to have perpetrated sexually abusive behavior against another inmate, the Special Investigative Agent (or SIS) is notified immediately. When staff is alleged to have perpetrated sexually abusive behavior against an inmate, the Warden is notified immediately. The Warden notifies the Regional Director and the</p>

Office of Internal Affairs (OIA), who in turn notify the Office of the Inspector General (OIG), and, when appropriate, the Federal Bureau of Investigation (FBI). When an inmate alleged to have perpetrated sexually abusive behavior against a staff member, the SIA/SIS must be contacted immediately, with follow-up notification to the Warden. The Warden refers these matters for criminal investigation and possible prosecution in accordance with the Program Statement Criminal Matter Referrals. SIS staff shall immediately respond and start the investigative process. Anonymous allegations will be investigated however there will certain steps taken to ensure the inmate's anonymity. Third party allegations will be investigated with interviewing the victim before an investigation is initiated. The victim may decline an investigation when requested by a third party. During the onsite inspection, the auditor examined eight PREA-related investigations. The auditor found that these investigations were conducted with great thoroughness and detail. The auditor finds the facility compliant with standard provision.

115.71(b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program requires that sexual abuse investigators must have received special training pursuant to standard 115.34. The training was verified by the auditor under the 115.34 Specialized training: Investigations review. The auditor finds the facility compliant with standard provision.

115.71(c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program, provides investigators with guidelines for performing their investigations. The guidelines include the initial steps of gathering and preserving evidence and interviewing alleged victims, suspected perpetrators, and witnesses. The SIS staff described the measures taken to preserve evidence, ensuring compliance with all provisions of the standard. They explained that when an inmate undergoes a forensic medical exam at the local hospital, they or their staff may be required to collect the evidence kit and hold it until retrieval by the OIG. During the onsite inspection, the auditor reviewed eight PREA-related investigations and found them to be very thorough and detailed. The auditor finds the facility compliant with standard provision.

115.71(d). The auditor reviewed the procedures for handling investigations involving staff members within the agency. The SIS discussed the coordination between investigative efforts and the Office of Internal Affairs, particularly when misconduct is suspected. The standard practice of suspending administrative investigations during criminal investigations seems reasonable to avoid interference. Additionally, refraining from conducting compelled interviews until the criminal investigation is completed aligns with protocol. The auditor finds the facility compliant with standard provision.

115.71(e) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program requires that the credibility of the victim not be determined by the person's status as an inmate or staff member. The agency does not require an inmate who alleges sexual abuse to submit to a polygraph examination as a condition for proceeding with the investigation of such an allegation. The auditor asked how the agency handles investigations regarding allegations of sexual abuse involving inmates. The SIS

investigator emphasized that truth-telling methods, such as polygraph examinations, are strictly prohibited in these cases. Additionally, he assured the auditor that the investigation's outcome is solely determined by the evidence gathered, unaffected by the victim's inmate status. The auditor's interviews with four inmates who reported sexual abuse further confirmed that polygraph examinations were neither requested nor required. The auditor finds the facility compliant with standard provision.

115.71(f) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states that administrative investigations should also consider information on whether other factors such as physical layouts, staffing patterns, institution operations, etc., contributed to the abuse. The program statement also requires that the investigative report include all supporting documentation of the review, evidence reviewed and the findings of the investigation. The auditor interviewed an SIS investigator regarding the process for reviewing allegations against agency staff members. This process involves examining potential violations of both policy and law. The investigator emphasized the requirement to compile a comprehensive report at the conclusion of each investigation, detailing the allegation, evidence collected, interview summaries, and the rationale behind the final determination. Notably, all substantiated allegations are forwarded for potential criminal prosecution. Upon reviewing eight sexual abuse investigations conducted within the past year, the auditor found that each investigation had a thorough final report containing all necessary components as per the standard. The auditor finds the facility compliant with standard provision.

115.71(g) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program an investigator is required to complete a report of investigation at the completion of all criminal investigations. The report is to contain a description of the allegation, a summary of the information received through interviews with inmates and staff members, a listing of the evidence collected, and a description of the credibility assessment and final determination. SIS staff reported to the auditor that criminal investigations are conducted the Office of Internal Affairs, the Office of the Inspector General or the Federal Bureau of Investigation. The auditor did not have an opportunity to interview OIG or OIA investigators. The auditor finds the facility compliant with standard provision.

115.71(h) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program includes a provision that all sexual assault and sexual abuse cases that are found to be substantiated are to be referred for prosecution. During the onsite inspection of the facility, SIS Investigator reported the administrative investigations that reveal conduct of a criminal nature, reported to OIG or OIA for referrals to prosecution. The The auditor finds the facility compliant with standard provision.

115.71(i) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention confirmed the requirement to maintain the sexual abuse records for the time required in this provision. The auditor finds the facility compliant with standard provision.

115.71(j). PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program requires agency investigators to complete sexual abuse investigations even if the alleged abuser or victim is no longer housed within the institution or under the

	<p>employ of the BOP. The SIS investigator reported sexual abuse investigation will be completed regardless of if the inmate or staff member is no longer assigned to the facility. The auditor finds the facility compliant with standard provision.</p> <p>115.71(k). The auditor is not required to audit t 115.71 The auditor finds the facility compliant with standard provision.</p> <p>115.71(l) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the standard language that when outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. The auditor was provided a written interview response from the facility regarding this standard. The PREA Coordinator provided the following response: When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. The auditor finds the facility compliant with standard provision.</p>
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<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Documents:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>Investigation files</p> <p><b>Interviews:</b></p> <p>Specialized staff</p> <p><b>Findings:</b></p> <p>115.72(a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the Bureau applies this section in accordance with its disciplinary/adverse action process and collective bargaining agreement, and applicable laws, rules, and regulations. In an interview with the Special Investigative Services (SIS) Lieutenant, the auditor learned that the institution employs the preponderance of evidence standard for all sexual abuse and sexual harassment investigations. Upon reviewing investigations onsite, it was observed that the outcomes aligned with the preponderance of evidence guidelines. The auditor finds the facility compliant with this standard provision.</p>

<b>115.73</b>	<b>Reporting to inmates</b>
	<p data-bbox="256 188 959 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 266 544 300"><b>Auditor Discussion</b></p> <hr/> <p data-bbox="256 344 448 378"><b>Documents:</b></p> <p data-bbox="256 412 1334 445">PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p data-bbox="256 490 512 524">Investigation files</p> <p data-bbox="256 568 496 602"><b>Investigations:</b></p> <p data-bbox="256 636 496 669">Specialized staff</p> <p data-bbox="256 703 376 736">Inmates</p> <p data-bbox="256 781 408 815"><b>Findings:</b></p> <p data-bbox="256 848 1461 1375">115.73 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states The Special Investigative Lieutenant provides all notifications to inmates required under this section. During the review of the investigation files during the onsite inspection the auditor was able to determine that all administrative investigation had appropriate outcomes. Specialized Investigative Specialist (SIS) Lieutenant provides all notifications to inmates required under this section. During the review of the investigation files during the onsite inspection the auditor was able to determine that all investigation had appropriate outcomes. The eight administrative investigations reviewed were deem unsubstantiated. The SIS investigator informed the auditor that administrative investigative outcomes are provided for all inmate sexual abuse and sexual harassment investigations, and inmates are duly notified of these outcomes. The auditor finds the facility compliant with standard provision.</p> <p data-bbox="256 1420 1477 1576">115.73(b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states The SIS Lieutenant provides all administrative investigation notifications to inmates required under this section. The auditor finds the facility compliant with standard provision.</p> <p data-bbox="256 1621 1477 2069">115.73(c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program outlines the required notifications to an inmate related to the staff member alleged to have committed sexual abuse against the inmate. Inmates are notified only if there is a nexus between the listed actions in this section and an incident of sexual abuse. The timing of such notifications should not interfere with any pending criminal or administrative investigations. All notifications are made in accordance with the Freedom of Information Act/Privacy Act. In interviews with inmates who reported sexual abuse, one stated that they were informed when the perpetrator had been transferred to another facility. Another inmate mentioned receiving notification that a staff member had been reassigned during the investigation of their claims. The auditor finds the facility compliant with standard provision.</p>

	<p>115.73(d) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program outlines the required notifications to an inmate related to the inmate alleged to have committed sexual abuse against the inmate. The notifications in the policy meet the requirements of the standard. During interviews with inmates who reported sexual abuse, all mentioned receiving investigation notifications. The auditor then reviewed copies of these notifications attached to the sexual abuse/sexual harassment investigation files. The auditor finds the facility compliant with standard provision.</p> <p>115.73(e) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program requires that all notifications to inmates in this standard be documented in the investigation file. During the onsite inspection of the facility, the auditor reviewed the inmate notifications in the administrative investigation files. The auditor examined eight investigation files from the previous 12 months. In each file, all notifications were readily located. The auditor finds the facility compliant with standard provision.</p> <p>115.73(f) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the Bureau’s obligation to report terminates if the inmate-victim is released from the agency’s custody. The auditor finds the facility compliant with standard provision.</p>
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Documentation Review:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>PS 3420.11 Standards of Employee Conduct</p> <p><b>Interviews:</b></p> <p>PREA Compliance Manager</p> <p>Targeted Staff</p> <p><b>Findings:</b></p> <p>115.76(a) PS 3420.11 Standards of Employee Conduct states Title 18, U.S. Code Chapter 109A provides the regulations stipulate penalties of up to life imprisonment for instances of sexual abuse of inmates involving the use or threat of force. All allegations of sexual abuse will undergo thorough investigation and, when warranted, will be referred to authorities for prosecution. Employees are liable to face administrative actions, which may include removal, for any inappropriate contact, sexual behavior, or relationships with inmates, regardless of whether such actions constitute prosecutable crimes. Sanctions for misconduct of a sexual nature can be</p>

imposed without requiring physical contact. During the onsite inspection, interviews with the PCM and Special Investigative Services (SIS) Lieutenant revealed that all investigations related to staff sexual abuse are reported to the Warden. The Warden then notifies the Regional Director and the Office of Internal Affairs (OIA), who subsequently inform the Office of the Inspector General (OIG) and, if necessary, the Federal Bureau of Investigation (FBI). This process is outlined in PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program. The auditor finds the facility compliant with this standard provision. The auditor finds the facility compliant with this standard provision.

115.76(b). PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states if evidence supports that a staff member engaged in sexual abuse, the matter will first be referred for criminal prosecution. PS 3420.11 Standards of Employee Conduct emphasize that penetration is not a prerequisite for convicting sexual contact cases, and all allegations of sexual abuse will undergo comprehensive investigation and, if deemed necessary, will be referred to authorities for prosecution. According to the Pre-Audit Questionnaire (PAQ), there were no substantiated investigations concerning staff involvement in inmate sexual abuse within the 12 months preceding the audit for review. The one staff investigation was ongoing without an outcome during the time of the audit. The auditor finds the facility compliant with this standard provision.

115.76(c) Standards of Employee Conduct under Penalty #31 in the Standards of Employee Conduct addresses improper relationships with inmates, former inmates, their families, or associates. The severity of the penalty depends largely on the degree of involvement. For the first offense, penalties vary from a 15-day suspension to removal; for the second offense, penalties range from a 30-day suspension to removal; removal is compulsory for the third offense, and a two-year reckoning period is imposed. The auditor finds the facility compliant with this standard provision.

115.76(d) PS 3420.11 Standards of Employee Conduct states Title 18, U.S. Code Chapter 109A provides the regulations stipulate penalties of up to life imprisonment for instances of sexual abuse of inmates involving the use or threat of force. All allegations of sexual abuse will undergo thorough investigation and, when warranted, will be referred to authorities for prosecution. Employees are liable to face administrative actions, which may include removal, for any inappropriate contact, sexual behavior, or relationships with inmates, regardless of whether such actions constitute prosecutable crimes. Sanctions for misconduct of a sexual nature can be imposed without requiring physical contact. During the onsite inspection, discussions with the PCM and SIS Lieutenant indicated that all investigations concerning staff sexual abuse are reported directly to the Warden. Subsequently, the Warden notifies the Regional Director and the Office of Internal Affairs (OIA). These entities then inform the Office of the Inspector General (OIG) and, if warranted, involve the Federal Bureau of Investigation (FBI) as per the guidelines detailed in PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program. The auditor finds the facility compliant with this standard provision.

<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Documentation Review:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>PS 3420.11 Standards of Employee Conduct</p> <p><b>Interviews:</b></p> <p>PREA Compliance Manager</p> <p>Targeted Staff</p> <p><b>Findings:</b></p> <p>115.77(a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the standard language 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, unless the activity was clearly not criminal, and to relevant licensing bodies. This procedure is typically followed in cases where criminal prosecution may be pursued. According to the Pre-Audit Questionnaire (PAQ), there were no contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates during the 12 months preceding the audit. The auditor finds the facility compliant with this standard provision.</p> <p>115.77(b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the facility shall take appropriate remedial measures 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. This procedure is typically followed in cases where criminal prosecution may be pursued. In an interview, the warden affirmed that if a contractor or volunteer is found to engage in sexual abuse with an inmate, they would be promptly removed from the facility and not allow inmate contact until the completion of the investigation. The auditor finds the facility compliant with this standard provision.</p>

<b>115.78</b>	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Documents:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p>

Investigation files

Bureau of Prisons Admission & Orientation Handbook

**Interviews:**

Specialized staff

**Findings:**

115.78(a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. The Bureau of Prisons Admissions & Orientation Handbook lists sexual acts that are prohibited acts that would warrant disciplinary sanctions for administrative or criminal acts. The auditor finds the facility compliant with this standard provision.

115.78(b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program requires that sanctions for inmates be proportionate with the nature and circumstance of the abuses committed, the inmate's disciplinary history, and the sanctions imposed for the comparable offenses by other inmates with similar histories. The PAQ listed no inmate disciplinary sanctions due to a sexual abuse incident there. The auditor was unable to determine if an inmate's disciplinary sanctions were appropriately review and comparable offenses by other inmates with similar histories. The auditor finds the facility compliant with this standard provision.

115.78(c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program includes a provision to consider whether the inmate's mental disabilities or mental illness contributed to the sexual abuse behavior. The PAQ listed no inmate disciplinary sanctions due to a sexual abuse incident there. The auditor was unable to determine if an inmate was appropriately review for mental disabilities or mental illness contributed to the sexual behavior. The auditor finds the facility compliant with this standard provision.

115.78(d) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program include a provision to offer therapy, counseling, or other interventions to address and correct underlying reasons or motivations for the abuse. During the onsite inspection, a facility psychologist was interviewed, who mentioned that the facility operates a Sex Offender Management Program (SOMP), with many inmates assigned actively participating in the therapeutic program. However, no records were provided during the audit indicating that individuals involved in sexual abuse incidents had been referred to the program for additional treatment. The auditor finds the facility compliant with this standard provision.

115.78(e) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states Sexual abuse and sexual harassment of staff members should be addressed through other existing statutes, policies, and procedures, such as using the inmate

	<p>discipline system and referral to criminal prosecutions as appropriate. There are no reported incidents of non-consent inmate on staff sexual abuse investigation that warranted an inmate disciplinary in the 12 months prior to the audit. The auditor finds the facility compliant with this standard provision.</p> <p>115.78(f) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation. The BOP states that the maintenance of an effective sexual abuse prevention policy, and general secure and orderly running of an institution, requires that inmates be held responsible for manipulative behavior and intentionally making false allegations. The eight investigations reviewed by the auditor did not have any incidents of inmate discipline due false reports. The auditor finds the facility compliant with this standard provision.</p> <p>115.78(g) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program prohibits all sexual activity between inmates. Any sexual activity is subject to discipline. The Bureau of Prisons Admissions &amp; Orientation Handbook lists inappropriate sexual behavior as a prohibited act. The auditor finds the facility compliant with this standard provision.</p>
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Documents:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>Investigation files</p> <p><b>Interviews:</b></p> <p>Specialized staff</p> <p>Warden</p> <p><b>Findings:</b></p> <p>115.81 (a-b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states follow-up meetings are conducted by Psychology Services. Psychology Services consults with Health Services if necessary. The Program Statement reiterates the standard provision that if the screening according to § 115.41 indicates that a prison inmate has previously experienced sexual victimization, whether within an institutional or community setting, staff must ensure that the inmate is provided a follow-up meeting with a medical or mental health practitioner within 14 days of the</p>

intake screening. Staff members interviewed regarding the screening for victimization risk reported that inmates are questioned about prior experiences of sexual abuse and any tendencies towards abusive behavior. Following the screening, inmates are given the opportunity to meet with mental health professionals. Targeted inmates who disclosed previous sexual victimization during screening were interviewed. Two inmates mentioned they were not initially offered additional visits, although institutional records with their signatures indicated they had been seen within two weeks of the screening. The auditor finds the facility compliant with the provisions of this standard.

115.81 (c) The FCI Seagoville is a prison. This provision does not apply.

115.81 (d) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states it is appropriate under this section to provide staff information on an inmate's history of being a sexual abuser; for example, placing the inmate in the Posted Picture File, to maintain the safe, secure, and orderly running of the institution. The facility warden, PCM, chief psychologist, and counselor informed the auditor that inmate screening records are stored electronically, with access restricted to staff who require it for counseling, treatment, security management, education, programming, work assignments, and housing assignments. They emphasized that not all staff members have access to inmate assessment information. The auditor finds the facility compliant with this standard provision.

115.81(e) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the standard language 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. Health and psychology services staff interviewed stated that informed consent would be obtained from an inmate who reports prior sexual abuse that occurred outside the institution. The auditor finds the facility compliant with this standard provision.

115.82	Access to emergency medical and mental health services
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents:</p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p><b>Interviews:</b></p> <p>Inmates who reported sexual abuse</p> <p><b>Findings:</b></p>

115.82 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states medical staff are responsible for examination, documentation, and treatment of inmate injuries arising from sexually abusive behaviors, including testing when appropriate for pregnancy and sexually transmissible infections (STIs), including HIV. When an inmate self-reports, or is referred to Health Services, medical staff notify Psychology Services and Correctional Services prior to conducting an injury assessment. The injury assessment, and the inmate's subjective/objective findings, are documented fully in the electronic health record. Health Services staff perform the injury assessment without compromising forensic evidence. Interviews with health service and psychology staff state forensic medical examinations are conducted at a local hospital. Interviews with inmates that reported sexual abuse reported that they were given medical treatment within 24 hours. The auditor asked if they were given mental health services care, and all stated yes. The auditor finds the facility compliant with this standard provision.

115.82 (b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states the Operations Lieutenant promptly refers all inmates reported or suspected of being the victim of sexually abusive behavior to the Health Services Unit (or the on-call clinician during non-business hours) for physical assessment and documentation of injuries. Health service and psychology staff confirmed in interviews that inmates reporting sexual abuse receive immediate medical attention. Inmates who reported incidents of sexual abuse stated they received medical treatment within 24 hours and did not experience any delays in care. Investigative records reviewed also indicated that inmates were examined by medical staff and received referrals to mental health services. The auditor finds the facility compliant with this standard provision.

115.82 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states institution providers render follow-up care, including screening for infectious disease (HIV, viral hepatitis, or other sexually transmissible infections), pregnancy testing for female victims, and administration of prophylactic medication (if exposure to bloodborne pathogens is suspected). During interviews, medical and mental health staff stated that services would be provided as needed. Inmates interviewed during the audit mentioned that services were offered, but none required care at that time. The auditor finds the facility compliant with this standard provision.

115.82 (d) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states Bureau policies concerning inmate co-pays for medical treatment shall not be applied to victims of sexual abuse. Interviews with inmates that reported sexual abuse reported that they were not charge for treatment after the report of sexual abuse. The auditor finds the facility compliant with this standard provision.

**115.83**

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

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

**Documents:**

PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program

**Interviews:**

Targeted Mental Health Staff

Inmates who reported sexual abuse

**Findings:**

115.83 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the standard language that the facility shall 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.

Interviews with inmates that reported sexual abuse reported that they were given medical treatment within 24 hours. The auditor asked they were given to mental health services care, and all stated yes. Interviews with a health services provider and psychologist indicate that the services are provided services comparable to community health care. The auditor finds the facility compliant with this standard provision.

115.83 (b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the standard language 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. Interviews with inmates that reported sexual abuse reported that they were given medical treatment within 24 hours. The auditor asked they were given to mental health services care, and all stated yes. The auditor finds the facility compliant with this standard provision.

115.83 (c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the standard language that the facility shall provide such victims with medical and mental health services consistent with the community level of care. Interviews with a health services provider and psychologist indicate that the services are provided services comparable to community health care. The auditor finds the facility compliant with this standard provision.

115.83 (d) The FCI Seagoville is a male facility and exempt from this standard provision

115.83 (e) The FCI Seagoville is a male facility and exempt from this standard provision

115.83 (f) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program

	<p>reiterates the standard language that Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. Interviews with inmates that reported sexual abuse reported that they were given medical treatment and offered tests for sexually transmitted diseases. Only one inmate indicated he accepted the services. The auditor finds the facility compliant with this standard provision.</p> <p>115.83 (g) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the standard language 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. Inmates who reported sexual abuse stated that they were not billed for any medical aftercare treatment. The auditor finds the facility compliant with this standard provision.</p> <p>115.83 (h) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the standard language that all prisons shall 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. A facility psychologist was interviewed during the onsite inspection. She conveyed that the facility operates a Sex Offender Management Program (SOMP) and inmates assigned are participating in the program. The auditor finds the facility compliant with this standard provision.</p>
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<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Documents:</b></p> <p>PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program</p> <p>Investigation files</p> <p><b>Interviews:</b></p> <p>Specialized staff</p> <p>Warden</p> <p><b>Findings:</b></p> <p>115.86 (a) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states in cases of unsubstantiated or substantiated investigations the Institution Executive Staff review the incident to assess the facility’s response to the allegations. The auditor finds the facility compliant with this provision of the standard.</p>

115.86 (b) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the standard language that incident reviews are completed within 30 days of the conclusion of the investigation. Investigative files reviewed during the onsite inspection revealed the incident reviews were completed within 30 days. The auditor finds the facility compliant with this provision of the standard.

115.86 (c) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program reiterates the standard language requiring the review team to include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. Additionally, the PS states the review team also includes input from the local Union President, or his/her designee from the local Union. The local Union representative is provided an opportunity to review the draft and submit the Union's recommendations, taking the time frames of this section into account. The Union's recommendations are included in the review team's final report and recommendations as an addendum. Adoption of the Union's recommendations in the final report is at the discretion of the review team. Any subsequent implementation of any final recommendations will comply with collective bargaining agreements as indicated in 115.86(e). During the onsite inspection of the facility, the auditor interviewed 5 staff representatives who represent the Incident Review Team. Each team member described their specific roles during the review and was able to provide the auditor a description of the review process. The auditor finds the facility compliant with this provision of the standard.

115.86 (d) PS 5324.12 Sexually Abusive Behavior Prevention and Intervention Program states all factors noted within PREA Standard 115.86 (d) noted below are considered during the incident review. The Institution PREA Compliance Manager documents the review in a report, including recommendations for improvements, if any. If the unsubstantiated allegation involved a staff member, the report under this section must not include the staff member's personally identifiable information. The report is submitted to the Warden, who ensures implementation of the recommendations or documents the reason for not following them. In cases of substantiated sexual abuse, Institution Executive Staff review the incident to assess the facility's response. All factors noted within PREA Standard 115.86 (d) noted below are considered. The Institution PREA Compliance Manager documents the review in a report, including recommendations for improvements, if any. The report is submitted to the Warden, who ensures implementation of the recommendations or documents the reason for not following them. A copy of this report is forwarded to the Regional Director through the Regional PREA Coordinator. Consideration for staff affected by the incident is necessary. Efforts to mitigate potential stress associated with these events should be offered to affected staff, such as offering Employee Assistance Program information. Targeted Staff (5) interviewed regarding the incident review process state that the team reviews all 6 elements required by this standard. If any of the 6 elements have an impact on the incident, a report is prepared and submitted to the facility head warden for review and approval of any recommendations. The auditor reviewed 7 sexual abuse investigation files during the onsite inspection and determined the review was conducted appropriately. All investigations were deemed Unsubstantiated with no recommendations. The auditor finds the facility compliant with this provision of the standard.

<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Audited at Agency Level
	<b>Auditor Discussion</b>
	<b><i>115.87 The (a-f) provisions of this standard were completed during the Central Agency Audit.</i></b>

<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Audited at Agency Level
	<b>Auditor Discussion</b>
	<b><i>115.88 The (a-d) provisions of this standard were completed during the Central Agency Audit.</i></b>

<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Audited at Agency Level
	<b>Auditor Discussion</b>
	<b><i>115.89 The (a-d) provisions of this standard were completed during the Central Agency Audit.</i></b>

<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<b><i>115.401 (a-b) provisions of this standard were completed during the Central Agency Audit.</i></b>
	<b>DIRECTIVE AND DOCUMENT REVIEW:</b>
	Aggregated data on website.
	<b>Findings:</b>
	115.401(a) 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) This is the Agency's second year of cycle 4. The agency is following their audit cycle and planned future audits. The data was posted on the agency website.

**115.401 (h-i, m-n) provisions of this standard were completed during this audit.**

**Documentation Review:**

Agency Policies and Procedures

Inmate Records

**Interviews:**

PREA Compliance Manager

Warden

Specialized Staff

Random Staff

Medical/Mental Health Staff

Targeted/Random Inmates

**Findings:**

115.401 (h) During the onsite inspection, the auditor was allowed to inspect all sections of the facility (Main building, Jail, Industry, Camp). The auditor was able to conduct informal and formal interviews with inmates, agency staff, as well as contract staff. The auditor finds the facility compliant with this standard provision.

115.401 (i) During the onsite inspection, the auditor was provided with the necessary documents requested for review to determine the appropriateness of PREA Standard compliance. The auditor finds the facility compliant with this standard provision.

115.401 (m) During the onsite inspection, the auditor requested to formally interview 40 inmates. A private area was provided to conduct the individual interviews with inmates without interruption. The auditor finds the facility compliant with this standard provision.

115.401 (n) The facility posted the required audit notice and provided photos of various sections to the auditor prior to the audit. The audit notices were observed during the onsite inspection, in various high traffic areas throughout the facility. No inmate, staff, volunteer or contractor correspondence letters were received prior to the audit. The auditor finds the facility compliant with this standard provision.

	<b>Auditor Overall Determination:</b> Audited at Agency Level
	<b>Auditor Discussion</b>

<b>Appendix: Provision Findings</b>		
<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure 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
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional	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
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	

	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
<b>115.13 (c) Supervision and monitoring</b>		
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
<b>115.13 (d) Supervision and monitoring</b>		
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
<b>115.14 (a) Youthful inmates</b>		
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (b) Youthful inmates</b>		
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or	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
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
<b>115.16 (a)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes

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

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

	consent or refuse?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b) Hiring and promotion decisions</b>		
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c) Hiring and promotion decisions</b>		
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d) Hiring and promotion decisions</b>		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e) Hiring and promotion decisions</b>		
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
<b>115.17 (f) Hiring and promotion decisions</b>		
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have	yes

	contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the	yes

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

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

	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes

	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	no
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	

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

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

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

	health care practitioners who work regularly in its facilities.)	
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following	yes

	criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	

	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
<b>115.41 (g) Screening for risk of victimization and abusiveness</b>		
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
<b>115.41 (h) Screening for risk of victimization and abusiveness</b>		
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
<b>115.41 (i) Screening for risk of victimization and abusiveness</b>		
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
<b>115.42 (a) Use of screening information</b>		
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of	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
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes
<b>115.42 (d)</b>	<b>Use of screening information</b>	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to	yes

	shower separately from other inmates?	
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
<b>115.43 (b)</b>	<b>Protective Custody</b>	
	Do inmates who are placed in segregated housing because they	yes

	are at high risk of sexual victimization have access to: Programs to the extent possible?	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
<b>115.43 (c)</b>	<b>Protective Custody</b>	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d)</b>	<b>Protective Custody</b>	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation	yes

	can be arranged?	
<b>115.43 (e)</b>	<b>Protective Custody</b>	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
<b>115.51 (a)</b>	<b>Inmate reporting</b>	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
<b>115.51 (b)</b>	<b>Inmate reporting</b>	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	

	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision,	yes

	does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days?	yes

	(N/A if agency is exempt from this standard.)	
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of	yes

	understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of	yes

	confidentiality, at the initiation of services?	
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report	yes

	required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate	yes

	with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	

	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has	yes

	committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (d) Reporting to inmates</b>		
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (e) Reporting to inmates</b>		
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a) Disciplinary sanctions for staff</b>		
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b) Disciplinary sanctions for staff</b>		
	Is termination the presumptive disciplinary sanction for staff who	yes

	have engaged in sexual abuse?	
<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	

	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	

	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph §	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.)	
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	

	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes

<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

# 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.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Marc Coudriet	<b>Date of Signature:</b> 10/04/2023

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

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

<b>Agency Chief Executive Officer Information:</b>	
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<b>Agency-Wide PREA Coordinator Information</b>			
<b>Name:</b>	Cynthia Campagna	<b>Email Address:</b>	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.

<b>Number of standards exceeded:</b>	
0	
<b>Number of standards met:</b>	
10	
<b>Number of standards not met:</b>	
0	

<b>Standards</b>	
<b>Auditor Overall Determination Definitions</b>	
<ul style="list-style-type: none"> <li>• Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>• Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>• Does Not Meet Standard (requires corrective actions)</li> </ul>	
<b>Auditor Discussion Instructions</b>	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

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

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,

	<p>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.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>115.12(a) (b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>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.</p> <p>A review of the agency directive reflected all contracts will meet the required entity's obligation to adopt and comply with the PREA standards.</p> <p>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.</p> <p>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.</p> <p>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 actively soliciting new contracts with private facilities.</p>

115.17	Hiring and promotion decisions
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>

**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.

	<p>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.</p> <p>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.</p> <p>115.17(g)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directives and BOP PREA Plan address this provision. Agency directive defines staff to include volunteer or contracted program services staff.</p>
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<b>115.18 Upgrades to facilities and technologies</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.18(a)</p> <p>INTERVIEWS:</p> <p>Interviews with the Agency Head designee confirm that the standard is being met.</p> <p>FINDINGS:</p> <p>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.</p> <p>115.18(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Video Surveillance Schematic.</p> <p>INTERVIEWS:</p> <p>Interviews with the Agency Head designee confirm that the standard is being met.</p> <p>FINDINGS:</p>

	<p>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.</p>
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<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.42(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directive and the PREA Screen Tool.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>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.</p> <p>115.42(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>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</p>

	<p>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.</p> <p>115.42(c)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Agency Directives and BOP PREA Plan.</p> <p><b>INTERVIEWS:</b></p> <p>Agency PREA Coordinator.</p> <p><b>FINDINGS:</b></p> <p>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.</p>
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<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.66(a)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Agency Directives and BOP PREA Plan.</p> <p><b>INTERVIEWS:</b></p> <p>Agency Head.</p> <p><b>FINDINGS:</b></p> <p>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.</p>

<b>115.87</b>	<b>Data collection</b>
	<p data-bbox="256 188 959 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 266 544 300"><b>Auditor Discussion</b></p> <p data-bbox="256 344 485 378">115.87(a and c)</p> <p data-bbox="256 412 783 445">DIRECTIVE AND DOCUMENT REVIEW:</p> <p data-bbox="256 479 804 512">Agency Directives and BOP PREA Plan.</p> <p data-bbox="256 557 405 591">FINDINGS:</p> <p data-bbox="256 636 1474 949">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.</p> <p data-bbox="256 994 1422 1106">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.</p> <p data-bbox="256 1151 405 1184">115.87(b)</p> <p data-bbox="256 1218 783 1252">DIRECTIVE AND DOCUMENT REVIEW:</p> <p data-bbox="256 1285 804 1319">Agency Directives and BOP PREA Plan.</p> <p data-bbox="256 1364 405 1397">FINDINGS:</p> <p data-bbox="256 1442 1458 1599">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.</p> <p data-bbox="256 1644 405 1677">115.87(d)</p> <p data-bbox="256 1711 804 1744">Agency Directives and BOP PREA Plan.</p> <p data-bbox="256 1789 405 1823">FINDINGS:</p> <p data-bbox="256 1868 1442 2047">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 <a href="https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp">https://www.bop.gov/inmates/custody_and_care/sexual_abuse_prevention.jsp</a>.</p>

	<p>115.87(e)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision.</p> <p>115.87(f)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and BOP PREA Plan address(es) this provision.</p>
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<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.88(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan. Annual report.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>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.</p> <p>Staff interviewed reported in detail the process followed when reviewing the data, identifying problem areas and corrective action, and preparing the annual report.</p> <p>115.88(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>FINDINGS:</p>

	<p>Agency Directive(s) and BOP PREA Plan address(es) this provision.</p> <p>115.88(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>Annual report.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>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: <a href="http://www.bop.gov">www.bop.gov</a>.</p> <p>115.88(d)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and BOP PREA Plan.</p> <p>INTERVIEWS:</p> <p>Agency PREA Coordinator.</p> <p>FINDINGS:</p> <p>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.</p>
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<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

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.

	<p><b>FINDINGS:</b></p> <p>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.</p>
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<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b>
	<b>Auditor Discussion</b>
	<p>115.401(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Aggregated data on website.</p> <p>FINDINGS:</p> <p>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.</p> <p>115.401(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Aggregated data on website.</p> <p>FINDINGS:</p> <p>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.</p>

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

	<p>issuance by the Auditor. This information is made available to the public and is in accordance with 28 C.F.R. § 115.405.</p>
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<b>Appendix: Provision Findings</b>		
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure 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
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity	yes

	described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	

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

	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.)	
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	

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

<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	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
<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes