Prison Rape Elimination Act (PREA) Audit Report **Adult Prisons & Jails** ☐ Interim \square N/A Date of Interim Audit Report: 10/29/20 If no Interim Audit Report, select N/A **Date of Final Audit Report:** 06/06/21 **Auditor Information Darnel Carlson** Email: dmcarlson16@gmail.com Name: Company Name: Click or tap here to enter text. Mailing Address: P.O. Box 1201 City, State, Zip: Brainerd, MN 56401 Telephone: 218-831-9636 **Date of Facility Visit:** September 16-17, 2020 **Agency Information** Becker County Sheriff's Office Name of Agency: Governing Authority or Parent Agency (If Applicable): Becker County Board of Commissioners 1428 Stony Road Detroit Lakes, MN 56501 **Physical Address:** City, State, Zip: 1428 Stony Road Detroit Lakes, MN 56501 **Mailing Address:** City, State, Zip: The Agency Is: Private for Profit Military Private not for Profit □ County ☐ State Federal Agency Website with PREA Information: http://www.co.becker.mn.us/dept/sheriff/jail.aspx **Agency Chief Executive Officer** Sheriff Todd Glander Name: 218-847-2661 Email: todd.glander@co.becker.mn.us Telephone: **Agency-Wide PREA Coordinator** Name: Chris Burton 218-847-2939 #7 Email: chris.burton@co.becker.mn.us Telephone: PREA Coordinator Reports to: Number of Compliance Managers who report to the PREA Coordinator: Jail Administrator **Facility Information**

Name of Facility: Becker Co	ounty Jail			
Physical Address: 1428 Ston	City, State,	z ip: Detroit Lak	kes, MN 56501	
Mailing Address (if different fro Click or tap here to enter text.	-	City, State,	Zip: Click or tap h	nere to enter text.
The Facility Is:	☐ Military	☐ Private	e for Profit	☐ Private not for Profit
☐ Municipal	□ County	☐ State		☐ Federal
Facility Type:	Prison		⊠ J	ail
Facility Website with PREA Info	rmation: http://www.co.bec	ker.mn.us/d	ept/sheriff/PDFs/PR	REA_Policy_08202020.pdf
Has the facility been accredited	within the past 3 years?	es 🗵 No		
If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years): ACA NCCHC CALEA Other (please name or describe: Click or tap here to enter text. N/A If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:				
Minnesota Department of Corrections Inspection and Enforcement Unit				
	Warden/Jail Administ	rator/Sner	iπ/Director	
Name: Paula Peterson -	- Jail Administrator			
Email: paula.peterson@	co.becker.mn.us	Telephone:	218-847-2939) #7
	Facility PREA Cor	npliance M	lanager	
Name: Click or tap here to	enter text.			
Email: Click or tap here to 6	enter text.	Telephone:	Click or tap her	re to enter text.
Facility Health Service Administrator ☐ N/A				
Name: MEnD Correction	nal Care			
Email: tgeller@mendcar	re.com	Telephone:	320-774-1080)
	Facility Cha	racteristic	S	
Designated Facility Capacity:		186		
Current Population of Facility:		58		
Average daily population for the past 12 months:		64		

Has the facility been over capacity at any point in the past 12 months?		☐ Yes	
Which population(s) does the facility hold?	☐ Females ☐ Males ☐ Both Females and Males		
Age range of population:		18-99	
Average length of stay or time under supervision:		15 days	
Facility security levels/inmate custody levels:		Minimum; Medium;	Maximum
Number of inmates admitted to facility during the past	12 mont	hs:	1644
Number of inmates admitted to facility during the past in the facility was for 72 hours or more:	12 mont	hs whose length of stay	0
Number of inmates admitted to facility during the past in the facility was for 30 days or more:	12 mont	hs whose length of stay	0
Does the facility hold youthful inmates?		⊠ Yes □ No	
Number of youthful inmates held in the facility during facility never holds youthful inmates)	the past	12 months: (N/A if the	26 □ N/A
Does the audited facility hold inmates for one or more correctional agency, U.S. Marshals Service, Bureau of Customs Enforcement)?			⊠ Yes □ No
Federal Bureau of Prisons U.S. Marshals Service U.S. Immigration and Custom: Bureau of Indian Affairs U.S. Military branch State or Territorial correctional or detention of the description of the de		agency on agency detention facility or detention facility (e.g. police lockup or	
Number of staff currently employed by the facility who may have contact with inmates			44
Number of staff hired by the facility during the past 12 months who may have contact with inmates:			9
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:			2
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:			1
Number of volunteers who have contact with inmates, currently authorized to enter the facility:			35

Physica	al Plant			
Number of buildings:				
Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.				
Number of inmate housing units:				
Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.				
Number of single cell housing units:		0		
Number of multiple occupancy cell housing units:		10		
Number of open bay/dorm housing units:		3		
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):		0		
In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)			□ No	□ N/A
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?			□ No	
Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?		⊠ Yes	□ No	
Medical and Mental Health Servi	ces and Forensic Me	dical Exam	ıs	
Are medical services provided on-site?	⊠ Yes □ No			
Are mental health services provided on-site?	⊠ Yes □ No			

	☐ On-site			
Where are according to a solid formation and including	Local hospital/clinic			
Where are sexual assault forensic medical exams prov Select all that apply.	Rape Crisis Center	Rape Crisis Center		
	Other (please name	or describe: Click or tap here to enter		
	text.)			
ı	Investigations			
Crii	minal Investigations			
Number of investigators employed by the agency and/of for conducting CRIMINAL investigations into allegation harassment:	3			
When the facility received allegations of sexual abuse	or sexual harassment (whether	☐ Facility investigators		
staff-on-inmate or inmate-on-inmate), CRIMINAL INVES		□ Agency investigators		
Select all that apply.		☐ An external investigative entity		
	Local police department			
Calact all automal autities were entitle for CDIMINAL	☑ Local sheriff's department			
Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no	☐ State police			
external entities are responsible for criminal investigations)	A U.S. Department of Justice component			
	Other (please name or describe: Click or tap here to enter text.)			
	□ N/A			
Administrative Investigations				
Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?				
When the facility receives allegations of sexual abuse	or sovijal harassmont (whother	☐ Facility investigators		
staff-on-inmate or inmate-on-inmate), ADMINISTRATIV		□ Agency investigators		
conducted by: Select all that apply		☐ An external investigative entity		
Select all external entities responsible for	☐ Local police department			
ADMINISTRATIVE INVESTIGATIONS: Select all that	□ Local sheriff's department			
apply (N/A if no external entities are responsible for administrative investigations)	☐ State police			
	☐ A U.S. Department of Justice	component		
Other (please name or describ		be: Click or tap here to enter text.)		
	□ N/A			

Audit Findings

Audit Narrative (including Audit Methodology)

The Prison Rape Elimination Act (PREA) on-site audit of the Becker County Jail located in Detroit Lakes, Minnesota, was conducted on September 16-17, 2020. Pre-Audit preparation included a thorough review of the Pre-Audit Questionnaire and all documentation and materials submitted by the facility. The documentation included agency policies, procedures, forms, staff training records, and curriculum. The programmer provided a copy of the staff schedule and inmate roster on the first day of the on-site audit. There were 58 inmates in custody on the first day of the on-site audit. Concerns over the spread of the Coronavirus have reduced the number of inmates in custody.

The audit notices were posted in visible areas throughout the facility six weeks before the audit and during the on-site audit. I did not receive any inmate correspondence throughout the audit process.

During the on-site audit on September 16-17, 2020, the auditor was given a classroom to work in and conduct confidential interviews with staff. Fourteen formal personal interviews were conducted with facility staff representing all shifts. They included eight random staff members, two staff members who perform risk screenings, two intake staff, and two intermediate-or-higher-level facility staff who conduct unannounced rounds. Also interviewed were the Sheriff, an investigator, a medical provider, and two contractors. Interviews with the Assistant Jail Administrator and Programmer included PREA Coordinator, Incident Review Team member, and designated staff member charged with monitoring for retaliation. The Jail Administrator was not available to interview during the on-site audit.

Confidential interviews with inmates were conducted in a classroom. Fifteen random inmates were interviewed, which meets the required number of inmate interviews based on the jail population of 58 inmates.

I interviewed one inmate that met the targeted criteria.

The facility reported one allegation of substantiated, unsubstantiated, or unfounded reports of sexual abuse and sexual harassment. The facility employs 44 employees, including the Jail Administrator, Assistant Jail Administrator, Programmer, 4 Sergeants, 20 correctional officers, four transport officers, 1 STS Crew Leader, 11 part-time correctional officers, and one administrative support staff technician.

The Programmer conducted a facility tour. All areas of the facilities were toured, which included (booking, sergeants office, central control, kitchen, laundry, medical, program classroom/library, recreation room, staff breakroom, vehicle sallyport, officer work area, and 13 housing areas). The auditor observed the location of cameras, staff supervision of inmates, placement of posters, PREA information resources, and security monitoring. The auditor observed toilets and sinks, and showers in each cell; a full shower curtain covered every shower to allow inmate's privacy when showering. The auditor was given access to all areas of the facility and talked to staff and inmates informally during walk-throughs of the facility during the visit.

I reviewed samples of personnel records to determine compliance with training mandates, background check procedures.

I reviewed samples of inmate files to evaluate screening and intake procedures. Also examined were inmate education documentation and acknowledgments.

The Becker County Sheriff's Office has continued cultivating a zero-tolerance culture for sexual abuse and sexual harassment, moving from the old facility to the new facility. Staff and inmates report feeling

safe working and living in the Becker County Jail. Staff understood their responsibilities in preventing, detecting, reporting, and responding to sexual abuse and harassment in the facility.

Samples of personnel records were reviewed to determine compliance with training mandates, background check procedures.

Samples of inmate files were reviewed to evaluate screening and intake procedures. Also, reviewed was inmate education documentation and acknowledgments.

The Becker County Sheriff's Office has continued cultivating a culture of zero-tolerance for sexual abuse and sexual harassment moving from the old facility to the new facility. Staff and inmates report feeling safe working and living in the Becker County Jail. Staff were friendly, helpful and readily available for interviews and open to answering questions. Staff understood their responsibilities in preventing, detecting, reporting, and responding to sexual abuse and harassment in the facility

On December 8, 2016, the facility was found in compliance with the PREA standards in the old facility.

During the past 12 months, the facility reported one allegation of substantiated, unsubstantiated, or unfounded reports of sexual abuse and sexual harassment. The allegation of staff on inmate sexual harassment was unfounded. The facility received zero reports from inmates that they were sexually abused or sexually harassed in another facility and received zero reports from another facility that an inmate was sexually abused or harassed at its facility.

Interviews with inmates confirmed they are provided PREA education and understood the agency's zero-tolerance policy. During the booking process, inmates are provided information on the facility's zero-tolerance of sexual abuse and harassment and how to report sexual abuse and sexual harassment allegations. When an inmate logs into the kiosk the first time, the inmate must read and acknowledge the facility's PREA education information which is available in multiple languages. Every 30 days after that, inmates are required to read and accept the PREA education information. The inmate handbook tab is also available on the kiosk. Interviews with random inmates confirmed they received comprehensive PREA education. Inmates interviewed reported feeling safe in the facility and believed that staff would respond to any report of sexual abuse or harassment.

Interviews with staff verified initial and ongoing PREA training. The responses to the questions confirmed their knowledge of their responsibilities in detecting, preventing, reporting, and responding to sexual abuse and sexual harassment. Staff was able to articulate the different ways inmates and staff could report sexual abuse or sexual harassment and steps to follow if he/she were the first to respond to an incident. Staff expressed confidence that their administration takes all reports of sexual abuse and sexual harassment seriously and would investigate every allegation, and would not tolerate any form of retaliation against staff or inmates. Staff reported feeling safe at work.

The facility has a signed Memorandum of Understanding (MOU) Lakes Crisis and Resource Center https://www.lakescrisis.com/ to provide emotional support and be a third-party reporter. The facility would transport an inmate victim of sexual abuse to Essentia Health St. Mary's Hospital located in Detroit Lakes, Minnesota for treatment https://www.essentiahealth.org/find-facility/profile/essentiahealth-st-marys-detroit-lakes/. Examinations will be performed by a Sexual Assault Nurse Examiner (SANE) if possible; if a SANE is not available, the examination will be performed by other qualified medical practitioners.

The contact information for Lakes Crisis and Resource Center is posted throughout the facility and published in the Inmate Handbook and states the calls are free and private.

reviewing documentation, information gathered during the on-site audit, and staff and inmate views, this auditor found facility leadership promotes and supports a culture of zero-tolerance found abuse and sexual harassment.	or

Facility Characteristics

The Becker County Jail is a class III facility under the Minnesota Department of Corrections (MNDOC) 2911 rules governing adult detention facilities in Minnesota. The facility is provisionally licensed and inspected by the MNDOC to determine continued compliance with Minnesota Chapter 2911 rules governing adult detention facilities in Minnesota. The facility design is podular indirect; custody staff complete staggered inmate well-being checks every 30 minutes.

Becker County has built a new facility since its last audit that opened on March 29, 2019. The Minnesota Department of Corrections licenses the facility to hold a maximum of 186 inmates. There were 49 adult male inmates, nine adult female inmates, and zero juvenile inmates in custody on the first day of the PREA audit. The facility houses sentenced inmates not to exceed any limits set by Minnesota Statutes, adult pre-trial and pre-sentence inmates indefinitely, and juveniles up to 24 hours, excluding weekends and holidays. The facility has a housing contract with the Minnesota Department of Corrections Work Release and ICWC Programs.

There are two main corridors (main hallway and minimum hallway) in the facility where all areas are located.

Central control, dormitory housing units I, II, and III are located off the minimum hallway. Dormitory I is 14 beds (7 bunks), a one-level unit with two individual showers with curtains and private restrooms with doors. There is a dayroom in the dorm with a kiosk.

Dormitory II (2A and 2B) is a 12 bed (6 bunk) one-level unit with two individual showers with curtains and private restrooms with doors. One entrance goes into the sleeping area, and the second entrance goes into the dayroom area; a kiosk is located in the dayroom area. Dormitory III is a six-bed (3 bunks) one-level unit with one individual shower with a curtain and a private restroom with a door. There is a dayroom with a kiosk. Also located off the minimum hallway are two locker rooms off a vestibule used for inmates leaving and returning from work release programs, sentence to service, and ICWC.

Located off the main hallway are general housing units A-G. A pod housing unit is a 16 bed (8 double-bunked cells) two-tier housing unit with a dayroom on the lower tier. Each cell has a toilet, shower with a curtain, and sink. There is a kiosk located in the dayroom. B pod housing unit is a 16 bed (8 double-bunked cells) two-tier housing unit with a dayroom on the lower tier. Each cell has a toilet, shower with a curtain, and sink. There is a kiosk located in the dayroom. C pod housing unit is a 16 bed (8 double-bunked cells) two-tier housing unit with a dayroom on the lower tier. Each cell has a toilet, shower with a curtain, and sink. There is a kiosk located in the dayroom. D pod housing unit is a 16 bed (8 double-bunked cells) with a dayroom situated on the lower tier. There are two sub-dayrooms located off the main dayroom. Sub dayroom #1 has four beds (2 double-bunked cells), and sub dayroom #2 has four beds (2 double-bunked cells.) Each cell has a toilet, shower with a curtain, and sink. There is a kiosk located in the main dayroom. E pod housing unit is a 12 bed (6 double-bunked cells) two-tier housing unit with a dayroom situated on the lower tier. Each cell has a toilet, shower with a curtain, and sink. There is a kiosk located in the dayroom. F pod housing unit is a 12 bed (6 double-bunked cells) two-tier housing unit with a dayroom on the lower tier. There is a sub-dayroom located off the main dayroom with six beds (3 double-bunked cells.)

Each cell has a toilet, shower with a curtain, and sink. There is a kiosk located in the main dayroom. G pod housing unit is a 56 bed (28 double-bunked cells) two-tier direct supervision housing unit with a dayroom on the lower tier. Each cell has a toilet, shower with a curtain, and sink. There is a kiosk located in the dayroom.

There is an officer work station in the hallway facing the housing units. The wall of the housing units facing the desk have windows that allow facility staff to observe inmate activities.

There is a program room located between the F and G pod housing units. Located off the main hallway are the program office, classrooms, computer lab, and gym.

The pre-book area consists of a DMT breath test machine, officer work area, interview room, restroom, and an entrance to the booking group holding cell.

The booking area includes an elevated staff workstation, booking pod I, consisting of 4 beds (2 double-bunked cells) one level unit with a sink, toilet, and shower in each cell. There is a small dayroom in the pod with a kiosk. Booking pod II is a six-bed (3 double-bunked cells) one-level unit with a sink, toilet, and shower in each cell. There is a small dayroom in the pod with a kiosk. The booking area has a transfer cell between the vehicle sallyport and booking with doors on both sides generally used for uncooperative inmates. Additionally, located off the booking area are the Sergeant's office, a group holding cell, two individual holding cells, inmate changing room, and inmate property storage room.

There are four classrooms, a gym, computer lab in the facility for inmate programming. There is a program office adjacent to one of the classrooms.

The medical unit has an open area with a workstation, exam room, medication storage area, small exam room used for Telemedicine, and an equipment storage room.

Central control is responsible for monitoring the jail's perimeter and granting access into and out of the facility. The officer posted in central control is also responsible for monitoring the facility surveillance systems. There is a correctional officer assigned to central control 24 hours, seven days per week.

Jail Administration, a conference room, and a public video visitation area are located off the front lobby of the jail. The Sergeant's Office is located inside the secured perimeter of the jail.

The kitchen is managed by staff through a contract with Summit Food

Service https://summitfoodservice.com/ to prepare inmate meals. Inmate meals are delivered from the kitchen to the housing units. Inmates do not have direct access to the kitchen, and inmate workers are not used in the kitchen to help prepare meals, wash dishes, or clean the kitchen.

Inmate workers used in the laundry room are responsible for cleaning linens, towels, and clothing for the facility.

Inmate workers are supervised by correctional officers and the video monitoring system.

The facility contracts with MEnD Correctional Care https://mendcare.com/ to provide licensed medical and mental health professionals to deliver healthcare and medications to the inmates.

The medical clinic within the jail is set up to provide emergent level treatment and triage. Inmates are transported to the emergency department or specialty appointments for advanced or specialized medical treatment.

The program department offers various programs for inmates who want to begin a recovery program or explore their faith.

Adult Basic Education

The Work Release Program allows sentenced inmates, meet the criteria and are approved to leave the facility the opportunity to continue working for their employer during their incarceration.

Sentence to Service Crew

Work crew jobs for inmates in the laundry.

Religious services are offered on Sunday.

Recovery programs include Alcoholics Anonymous and other programs for inmates dealing with alcohol, drug, or other addictions.

Recreation

Book Cart

The facility uses a video visitation system to accommodate visits between inmates and their friends and family, which are recorded.
To reduce the chance of spreading the Coronavirus, the facility suspended inmate visitation, inmate programs, and volunteers entering the building. The Becker County Jail is a stand-alone building; inmates are transported from the jail to the Becker County Court House for court hearings.

Summary of Audit Findings

The facility did not meet the requirements of this standard because:

115.13 (d) – The facility was not conducting or documenting unannounced rounds.

Corrective Action Required:

The corrective action to take would be to provide documentation of completed unannounced since the dates of the on-site audit.

The facility provided documentation of unannounced rounds conducted on all shifts.

The facility did not meet the requirements of this standard because:

115.17 (e) – The facility reports not completing criminal record background checks at least every five years of current employees and contractors who may have contact with inmates.

Corrective Action Required:

The corrective action to take would be to develop a process to complete criminal records background checks at least every five years of current employees and contractors who may have contact with inmates. Complete criminal records background checks of current employees and contractors who have been employed for five years or longer.

The facility provided documentation of its process to complete criminal records background checks at least every five years of current employees and contractors who may have contact with inmates. The facility provided documentation that criminal record background checks were completed on current employees and contractors who have been employed for five years or longer.

Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

Standards Exceeded

Number of Standards Exceeded: 0 List of Standards Exceeded: 0

Standards Met

Number of Standards Met: 45

Standards Not Met

Number of Standards Not Met: 0 List of Standards Not Met: 0

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11	(a)			
•		the agency have a written policy mandating zero tolerance toward all forms of sexual and sexual harassment? $\ oxtimes$ Yes $\ oxtimes$ No		
•		the written policy outline the agency's approach to preventing, detecting, and responding ual abuse and sexual harassment? $\ oxdot \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		
115.11	(b)			
•	Has th	ne agency employed or designated an agency-wide PREA Coordinator? $oxdot$ Yes $oxdot$ No		
•	Is the	PREA Coordinator position in the upper-level of the agency hierarchy? $oxtimes$ Yes $oxtimes$ No		
•	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? \boxtimes Yes \square No			
115.11	(c)			
•		agency operates more than one facility, has each facility designated a PREA compliance ger? (N/A if agency operates only one facility.) \square Yes \square No \boxtimes NA		
•	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) \square Yes \square No \boxtimes NA			
Audito	or Over	rall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)		
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		

Instructions for Overall Compliance Determination Narrative

<u>A.</u> The facility has implemented a zero-tolerance policy as detailed in the facility's Prison Rape Elimination Act (PREA) policy which comprehensively addresses the Agency's approach to preventing, detecting, and responding to all forms of sexual abuse and sexual harassment. The

policy outlines prohibited behavior and contains the basic definitions outlined in the PREA standards. The PREA policy establishes the foundation for the Agency's training efforts with staff, volunteers, contractors, and inmates.

- **B.** The facility has a designated PREA Coordinator, Assistant Jail Administrator Chris Burton who reports to the Jail Administrator, who reports to the Sheriff. The PREA Coordinator reports having sufficient time and authority to develop, implement, and oversee the Agency's efforts toward PREA compliance at the facility. The Chain of Command policy outlines the chain of command in the jail identifying the Assistant Jail Administrator as the designated PREA Coordinator.
- **C.** Becker County operates one facility.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Facility Chain of Command policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Assistant Jail Administrator Chris Burton (PREA Coordinator)
- Interview with Vivian Anderson (Programmer)

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12	(a)
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•	or other obligation or after	agency is public and it contracts for the confinement of its inmates with private agencies or entities including other government agencies, has the agency included the entity's ion to comply with the PREA standards in any new contract or contract renewal signed or August 20, 2012? (N/A if the agency does not contract with private agencies or other is for the confinement of inmates.) \square Yes \square No \bowtie NA
115.12	(b)	
•	Does a agency (N/A if	any new contract or contract renewal signed on or after August 20, 2012 provide for γ contract monitoring to ensure that the contractor is complying with the PREA standards? the agency does not contract with private agencies or other entities for the confinement ates.) \square Yes \square No \boxtimes NA
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

- **<u>A.</u>** The facility has not entered into any housing contracts with other agencies for the confinement of their inmates.
- **B.** The facility has housing agreements with the Minnesota Department of Corrections (MNDOC), United States Marshals Office, and Clay County, Minnesota.

Policy, Materials, Interviews, and Other Evidence Reviewed:

Completed Pre-Audit Questionnaire submitted by the Agency

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

1	1	5	1	3	(a)
		IJ.			เลเ

.13	(a)
•	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? \boxtimes Yes \square No
•	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices? \boxtimes Yes \square No
•	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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)? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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?

S	standards? Yes No
S	n calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated ncidents of sexual abuse? \boxtimes Yes \square No
	n calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? $\ oxed{\boxtimes}\ {\sf Yes}\ oxed{\square}\ {\sf No}$
115.13 ((b)
jı	n circumstances where the staffing plan is not complied with, does the facility document, and ustify all deviations from the plan? (N/A if no deviations from staffing plan.) \square Yes \square No \boxtimes NA
115.13 ((c)
a	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 planestablished pursuant to paragraph (a) of this section? \boxtimes Yes \square No
a	n 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? \boxtimes Yes \square No
a	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? \boxtimes Yes \square No
115.13 ((d)
le	Has the facility/agency implemented a policy and practice of having intermediate-level or higherevel supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? \boxtimes Yes \square No
- [:	s this policy and practice implemented for night shifts as well as day shifts? $oxtimes$ Yes $oxtimes$ No
t	Does the facility/agency have a policy prohibiting staff from alerting other staff members that hese supervisory rounds are occurring unless such announcement is related to the legitimate operational functions of the facility? \boxtimes Yes \square No

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The facility reports that the average daily population is 64. On the first day of the on-site audit, there were 58 inmates in custody; the staffing plan is predicated on 186 inmates, the licensed capacity approved by the Minnesota Department of Corrections Inspection Unit.

- A. The facility PREA policy outlines the requirements of the formalized, written staffing plan, which includes considerations (1-11) in paragraph "a" of this standard and the rules set by the Minnesota Department of Corrections (2911.0900.)
- **B.** The facility does not deviate from its staffing plan. Voluntary or mandated staff overtime is assigned to maintain minimum staffing. The facility reports zero deviations from the staffing plan.
- **<u>C.</u>** The facility PREA policy requires the PREA Coordinator to review the staffing plan a minimum of once per year.
- <u>D.</u> The facility PREA policy outlines the requirement of supervisors conducting unannounced rounds. It prohibits staff members who are aware of unannounced rounds from alerting other staff as to when or where the rounds are occurring unless related to the legitimate operational needs of the facility. Supervisors complete rounds through the jail during their shift; however, supervisors were not documenting these rounds.

During the on-site audit, the facility implemented supervisors conducting and documenting unannounced rounds.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Review of the facility staffing plan
- Completed Pre-Audit Questionnaire
- Interview with Assistant Jail Administrator Chris Burton (PREA Coordinator)
- Sergeant interviews

The facility did not meet the requirements of this standard because:

115.13 (d) – The facility was not conducting or documenting unannounced rounds.

Corrective Action Required:

The corrective action to take would be to provide documentation of completed unannounced since the dates of the on-site audit.

The facility provided documentation of completed unannounced rounds before the deadline of the final audit.

Standard 115.14: Youthful inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.14	(a)	
•	sound,	the facility place all youthful inmates in housing units that separate them from sight, and physical contact with any adult inmates through use of a shared dayroom or other on space, shower area, or sleeping quarters? (N/A if facility does not have youthful as [inmates <18 years old].) \boxtimes Yes \square No \square NA
115.14	(b)	
•	youthfu	as outside of housing units does the agency maintain sight and sound separation between ul inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 old].) \boxtimes Yes \square No \square NA
•	inmate	as outside of housing units does the agency provide direct staff supervision when youthfules and adult inmates have sight, sound, or physical contact? (N/A if facility does not have ul inmates [inmates <18 years old].) \boxtimes Yes \square No \square NA
115.14	(c)	
•	with th	the agency make its best efforts to avoid placing youthful inmates in isolation to comply is provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) \Box No \Box NA
•	exercis	the agency, while complying with this provision, allow youthful inmates daily large-muscle se and legally required special education services, except in exigent circumstances? (N/A ty does not have youthful inmates [inmates <18 years old].) \boxtimes Yes \square No \square NA
•	possib	uthful inmates have access to other programs and work opportunities to the extent le? (N/A if facility does not have youthful inmates [inmates <18 years old].) \Box No \Box NA
Audito	r Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The Becker County Jail reports holding 26 juvenile inmates at the facility in the past 12 months. The Minnesota Department of Corrections Inspection Unit has issued a provisional license for the facility to

hold juvenile inmates up to 24 hours (excluding weekends and holidays.) There were zero juvenile inmates in custody on the dates of the on-site audit.

A-C. The Minnesota Department of Corrections has issued a provisional license for the facility to house juvenile offenders up to 24 hours, excluding weekends and holidays. A youthful inmate would be held in an individual cell pending court or transport to a juvenile facility.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Facility tour

Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.15 (a)
----------	----

1 10.10	(a)
•	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? \boxtimes Yes \square No
115.15	(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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square NA
115.15	(c)
•	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? \boxtimes Yes $\ \square$ No
•	Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.) \boxtimes Yes \square No \square NA
115.15	(d)
	\"/

 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,

Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell

checks? ⊠ Yes □ No

	_	nitalia, except in exigent circumstances or when such viewing is incidental to routine cell s? $oxed{\boxtimes}$ Yes $\oxed{\square}$ No
•		the facility require staff of the opposite gender to announce their presence when entering nate housing unit? \boxtimes Yes $\ \square$ No
115.1	5 (e)	
•		the facility always refrain from searching or physically examining transgender or intersex es for the sole purpose of determining the inmate's genital status? $oxed{\boxtimes}$ Yes $oxed{\square}$ No
•	conve inform	nmate's genital status is unknown, does the facility determine genital status during resations with the inmate, by reviewing medical records, or, if necessary, by learning that ration as part of a broader medical examination conducted in private by a medical ioner? \boxtimes Yes \square No
115.1	5 (f)	
•	in a pr	the facility/agency train security staff in how to conduct cross-gender pat down searches rofessional and respectful manner, and in the least intrusive manner possible, consistent ecurity needs? \boxtimes Yes \square No
•	interse	the facility/agency train security staff in how to conduct searches of transgender and ex inmates in a professional and respectful manner, and in the least intrusive manner ble, consistent with security needs? \boxtimes Yes \square No
Audite	or Over	rall Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Audite	or Over	rall Compliance Determination
<u>A.</u>	gende medic gende 12 mo	acility PREA policy prohibits staff from conducting cross-gender strip searches or cross- er visual body cavity searches except in exigent circumstances or when performed by all practitioners. In the past 12 months, the facility reports there have been zero cross- er strip searches or cross-gender visual body cavity searches of inmates. Also, in the past enths, there have been zero cross-gender strip searches or cross-gender visual body searches of inmates that did not involve exigent circumstances or were performed by

B. The facility PREA policy states the Becker County Jail shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. In the past 12 months, the facility reports there have been zero pat-down searches of female inmates conducted by male staff.

non-medical staff.

Also, in the past 12 months, there have been zero pat-down searches of female inmates by male staff due to exigent circumstances.

- <u>C.</u> The facility PREA policy requires jail staff to document all cross-gender strip searches and body cavity searches of inmates and all cross-gender pat-down searches of female inmates.
- <u>D.</u> The facility PREA policy ensures inmates are permitted to shower, perform bodily functions, and change clothing without a non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks.
- **<u>E.</u>** The facility PREA policy prohibits staff from searching or physically examining transgender or intersex inmates for the sole purpose of determining an inmate's genital status.
- <u>F.</u> The facility has trained 100 percent of its staff to conduct cross-gender pat-down searches and searches of transgender or intersex inmates professionally and respectfully.

Random inmate interviews confirmed opposite gender announcements from staff when entering their housing areas. Inmates stated staff respects their privacy and they can get dressed, shower, and perform bodily functions out of the view of staff of the opposite gender.

Staff confirmed during interviews that male staff does not conduct any searches of female inmates. Staff also confirmed they do not conduct cross-gender strip searches of male or female inmates. The staff was able to explain or demonstrate the pat-search training they received. Staff interviewed knew they must announce their presence before entering a housing unit holding inmates of the opposite gender.

During the dates of the on-site audit, there were zero transgender or intersex inmates identified to interview.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Random staff interviews
- Random inmate interviews
- Training records and curriculum
- Observations during the facility tour

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.16 (a)

■ 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
No

•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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)? \boxtimes Yes \square No
•	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? \boxtimes Yes $\ \square$ No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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 of have low vision? \boxtimes Yes \square No
115	.16 (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? \boxtimes Yes \square No

•	imparti	se steps include providing interpreters who can interpret effectively, accurately, and ally, both receptively and expressively, using any necessary specialized vocabulary? $\ \square$ No
115.16	(c)	
•	types o	he agency always refrain from relying on inmate interpreters, inmate readers, or other of inmate assistance except in limited circumstances where an extended delay in ng an effective interpreter could compromise the inmate's safety, the performance of firsterse duties under §115.64, or the investigation of the inmate's allegations? ⊠ Yes □ No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

- A. The facility ensures key information about the Prison Rape Elimination Act (PREA) is continuously and readily available or visible to inmates through posters, the inmate handbook, and PREA information on the kiosk. The facility uses the Language Line and has TTI/TTD unit for the hearing impaired. Allowing disabled and limited English proficient inmates equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and harassment.
- **B.** The facility uses the Language Line and a TTI/TTD unit. The kiosk offers several different languages inmates can select to review the inmate handbook and the PREA information.
- <u>C.</u> The facility PREA policy states the Becker County jail shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise an inmate's safety, the performance of first responder duties, or the investigation of an inmate's allegations.

During the on-site audit, there were zero inmates with disabilities or limited English proficient inmates in custody. Random staff interviews confirmed they would use only qualified interpreters to communicate with the inmate.

The facility reports zero instances in the past 12 months of inmate interpreters, readers, or another type of inmate assistant used to assist in first responder duties, or investigate the inmate's allegation.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- The facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the agency
- Interview with Sheriff Todd Glander
- Random staff interviews

- Language line contract information
- Deaf and Hearing-Impaired Communication Form
- Deaf and Hearing-Impaired Programs Request Form

Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.17	(a)
•	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 □ No
•	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? \boxtimes Yes \square No
•	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 question immediately above? \boxtimes Yes \square No
•	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)? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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 question immediately above? \boxtimes Yes \square No
115.17	(b)
•	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates? \boxtimes Yes \square No
•	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? $\ \boxtimes$ Yes $\ \square$ No
115.17	(c)
•	Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check? \boxtimes Yes \square No

-	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? \boxtimes Yes \square No
115.17	' (d)
•	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? \boxtimes Yes \square No
115.17	' (e)
•	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? \boxtimes Yes \square No
115.17	' (f)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? \boxtimes Yes $\ \square$ No
115.17	' (g)
•	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? \boxtimes Yes \square No
115.17	' (h)
•	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.) \boxtimes Yes \square No \square NA

☐ Exceeds Standard (Substantially exceeds requirement of standards) ☑ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

□ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

Auditor Overall Compliance Determination

- **A.** Facility policy C114 and the facility PREA policy outlines the requirements of hiring or promoting of anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who has the prohibited conduct specified in paragraph (a) (1-3) of this standard.
- **B.** Any incidents of sexual harassment will be considered in determining whether to hire or promote anyone or enlist the services of any contractor who may have contact with inmates. This information is outlined in the facility PREA policy and Becker County Personnel Policy Manual.
- C. Facility policy C114 and the facility PREA policy state criminal records background checks is completed before hiring new employees who may have contact with inmates. The Sheriff verified that background checks are completed before hiring new employees who may have contact with inmates. Criminal background record checks are performed through the Minnesota Bureau of Criminal Apprehension (BCA) which, includes local, State, Federal, and predatory offender registers.
- <u>D.</u> Criminal background record checks are completed through the Minnesota Bureau of Criminal Apprehension (BCA) which, includes local, State, Federal, and predatory offender registers before enlisting the services of any contractor who may have contact with inmates.
- **E.** Facility reports not conducting criminal record background checks at least every five years of current employees and contractors who may have contact with inmates.
- **F.** Applicants who may have contact with inmates are asked about previous misconduct described in paragraph (a) of this standard in the interview during the thorough background process. Employees do not complete annual self-evaluations
- **G.** The facility PREA policy outlines the requirement of this standard.
- **<u>H.</u>** Becker County will provide 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 unless prohibited by law.

In the past 12 months, the facility reports that nine persons hired who may have contact with inmates received criminal records background checks.

In the past 12 months, the facility reports one contract for services employee criminal background record checks were conducted.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility policy C114
- Facility PREA policy
- Becker County Personnel Policy
- Completed Pre- Audit Questionnaire submitted by the Agency.
- Employee file review
- Criminal records background check reviews

The facility did not meet the requirements of this standard because:

115.17 (e) – The facility reports not completing criminal record background checks at least every five years of current employees and contractors who may have contact with inmates.

Corrective Action Required:

The corrective action to take would be to develop a process to complete criminal records background checks at least every five years of current employees and contractors who may have contact with inmates. Complete criminal records background checks of current employees and contractors who have been employed for five years or longer.

The facility provided documentation of its process to complete criminal records background checks at least every five years of current employees and contractors who may have contact with inmates. The facility provided documentation that criminal record background checks were completed on current employees and contractors who have been employed for five years or longer.

11	5.	.18	В ((a)
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	Standard 115.18: Upgrade	es to facilities and techi	nologies
All Ye	s/No Questions Must Be Answere	ed by the Auditor to Complete	the Report
115.18	3 (a)		
•	If the agency designed or acquired modification of existing facilities, di expansion, or modification upon the if agency/facility has not acquired a facilities since August 20, 2012, or ⊠ Yes □ No □ NA	d the agency consider the effect e agency's ability to protect inma a new facility or made a substan	t of the design, acquisition, ates from sexual abuse? (N/A tial expansion to existing
115.18	3 (b)		
•	If the agency installed or updated a other monitoring technology, did the agency's ability to protect inmates updated a video monitoring system technology since August 20, 2012, ⊠ Yes □ No □ NA	ne agency consider how such teo from sexual abuse? (N/A if ager n, electronic surveillance system	chnology may enhance the ncy/facility has not installed or , or other monitoring
Audite	or Overall Compliance Determinat	tion	
	☐ Exceeds Standard (Subst	antially exceeds requirement of	standards)
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		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions	for Overall Compliance Determination Narrative
<u>A.</u>	The n	the last PREA audit, Becker County built a new facility that opened on March 29, 2019. ew facility design, placement of cameras, and approved staffing levels allow the Agency to inmates from sexual abuse.
<u>B.</u>	Protec	ecker County Jail opened a new facility on March 29, 2019, with a new security system. cting inmates from sexual abuse was considered during the planning of the new system ne set-up and placement of cameras.
<u>Pc</u>	• Co	laterials, Interviews, and Other Evidence Reviewed: completed Pre-Audit Questionnaire submitted by the Agency terview with Sheriff Todd Glander acility tour
		RESPONSIVE PLANNING
01		
Stan	dard	115.21: Evidence protocol and forensic medical examinations
		115.21: Evidence protocol and forensic medical examinations uestions Must Be Answered by the Auditor to Complete the Report
	s/No Q	•
All Ye	s/No Q I (a) If the a a unifor for ad respon	•
All Ye	s/No Q I (a) If the a a unifo for ad respon	agency is responsible for investigating allegations of sexual abuse, does the agency followorm evidence protocol that maximizes the potential for obtaining usable physical evidence ministrative proceedings and criminal prosecutions? (N/A if the agency/facility is not nsible for conducting any form of criminal OR administrative sexual abuse investigations.)
All Ye	s/No Q I (a) If the a unifor ad responding Yes I (b) Is this agence	agency is responsible for investigating allegations of sexual abuse, does the agency followorm evidence protocol that maximizes the potential for obtaining usable physical evidence ministrative proceedings and criminal prosecutions? (N/A if the agency/facility is not nsible for conducting any form of criminal OR administrative sexual abuse investigations.)

•	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? \boxtimes Yes \square No
•	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? \boxtimes Yes \square No
•	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)? \boxtimes Yes \square No
•	Has the agency documented its efforts to provide SAFEs or SANEs? $oximes$ Yes \odots No
115.21	(d)
•	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? \boxtimes Yes $\ \square$ No
•	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 <i>always</i> makes a victim advocate from a rape crisis center available to victims.) \square Yes \square No \boxtimes NA
•	Has the agency documented its efforts to secure services from rape crisis centers? \boxtimes Yes $\ \square$ No
115.21	(e)
•	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? \boxtimes Yes \square No
•	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? \boxtimes Yes $\ \square$ No
115.21	(f)
•	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.) \square Yes \square No \boxtimes NA
115.21	(g)
•	Auditor is not required to audit this provision.

115.21 (c)

115.21 (h)

•	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 <i>always</i> makes a victim advocate from a rape crisis center available to victims.) □ Yes □ No ⋈ NA		
uditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

Instructions for Overall Compliance Determination Narrative

- **<u>A.</u>** The Becker County Sheriff's Office uses trained investigators to conduct criminal and administrative investigations of sexual abuse and harassment allegations.
- **B.** The Agency follows its Investigations policy which outlines the protocol for conducting sexual abuse investigations. The investigator who conducts criminal investigations explained the investigatory protocols used for conducting criminal sexual abuse and harassment investigations at the facility.
- C. Forensic medical examinations will be conducted at Essentia Health St. Mary's Hospital located in Detroit Lakes, Minnesota https://www.essentiahealth.org/find-facility/profile/essentia-health-st-marys-detroit-lakes/ Forensic medical exams will be performed on sexual abuse victims transported from the jail. Treatment services will be provided without financial cost to the victim.
- <u>D.</u> The facility has a signed Memorandum of Understanding (MOU) to provide victim support services with Lakes Crisis and Resource Center located in Detroit Lakes, Minnesota https://www.lakescrisis.com/ At the request of the victim, an advocate will accompany the victim through the forensic medical examinations and investigatory interviews. Emotional support, crisis intervention, and information services would be offered to the victim.
- **E.** The signed MOU between the facility and the Lakes Crisis and Resource Center located in Detroit Lakes, Minnesota https://www.lakescrisis.com/ includes providing victim advocate services and emotional support services to inmate victims of sexual abuse.
- F. The Agency conducts criminal investigations into allegations of sexual abuse.

The facility reported zero forensic medical examinations conducted in the past 12 months.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Facility policy 1002

- Completed Pre-Audit Questionnaire submitted by the Agency
- MOU between the facility and Lakes Crisis Resource Center https://www.lakescrisis.com/
- Interview with an investigator
- Interview with Assistant Jail Administrator Chris Burton (PREA Coordinator)
- Interview with Vivian Anderson (Programmer)
- An inmate who reported sexual abuse/harassment

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must	Be Answered by the	Auditor to Complete th	e Report

, and a second of the second o		
115.22 (a)		
■ Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? ⊠ Yes □ No		
■ Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? \boxtimes Yes \square No		
115.22 (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 □ No		
■ Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? ✓ Yes ✓ No		
■ Does the agency document all such referrals? \boxtimes Yes \square No		
115.22 (c)		
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 ☐ No ☒ NA		
115.22 (d)		
 Auditor is not required to audit this provision. 		
115.22 (e)		
 Auditor is not required to audit this provision. 		
Auditor Overall Compliance Determination		
☐ Exceeds Standard (Substantially exceeds requirement of standards)		

	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	or Overall Compliance Determination Narrative
<u>A.</u>	and se	cility reports that administrative or criminal investigations are completed for sexual abuse xual harassment allegations. The facility reported receipt of 1 allegation of sexual abuse ual harassment during the past 12 months.
<u>B.</u>	investi abuse	policy requires all allegations of sexual abuse or harassment are referred for gation. The facility publishes its policy regarding the referral of allegations of sexual or harassment for criminal investigations on its website. www.co.becker.mn.us/dept/sheriff/PDFs/PREA Policy 08202020.pdf
<u>C.</u>	This pa	aragraph is not applicable; the Agency conducts criminal investigations.
Po	FacCoBechttpInte	aterials, Interviews, and Other Evidence Reviewed: cility PREA policy mpleted Pre-Audit Questionnaire submitted by the Agency cker County website: c://www.co.becker.mn.us/dept/sheriff/PDFs/PREA_Policy_08202020.pdf erview with Sheriff Todd Glander erview with a criminal investigator
		TRAINING AND EDUCATION
Stan	dard 1	l15.31: Employee training
		uestions Must Be Answered by the Auditor to Complete the Report
115.3	l (a)	
•		he agency train all employees who may have contact with inmates on its zero-tolerance for sexual abuse and sexual harassment? \boxtimes Yes $\ \square$ No
•	respon	he agency train all employees who may have contact with inmates on how to fulfill their sibilities under agency sexual abuse and sexual harassment prevention, detection, ng, and response policies and procedures? \boxtimes Yes \square No
•		he agency train all employees who may have contact with inmates on inmates' right to be om sexual abuse and sexual harassment $oxtimes$ Yes \oxtimes No
•	and en	he agency train all employees who may have contact with inmates on the right of inmates apployees to be free from retaliation for reporting sexual abuse and sexual harassment? \Box No

•	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? \boxtimes Yes \square No	
•	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? \boxtimes Yes \square No	
•	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? \boxtimes Yes \square No	
•	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? \boxtimes Yes \square No	
•	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? \boxtimes Yes \square No	
•	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? \boxtimes Yes \square No	
115.31	(b)	
•	Is such training tailored to the gender of the inmates at the employee's facility? $oximes$ Yes \odots No	
•	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? \boxtimes Yes \square No	
115.31	(c)	
•	Have all current employees who may have contact with inmates received such training? \boxtimes Yes $\ \Box$ No	
•	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? \boxtimes Yes \square No	
•	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? \boxtimes Yes \square No	
115.31	(d)	
•	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? \boxtimes Yes \square No	
Auditor Overall Compliance Determination		
	☐ Exceeds Standard (Substantially exceeds requirement of standards)	

		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	
Instru	ctions 1	for Overall Compliance Determination Narrative	
<u>A.</u>	inmate harass	cility PREA policy outlines the training topics all employees who have contact with s receive training on preventing, detecting, and responding to sexual abuse and sexual ment of inmates. All current staff has received training on the eleven topics listed in aph "a" of this standard.	
<u>B.</u>	gender that ho	aining is designed for the unique needs of the inmates in the facility to include cross- r supervision and respectful searching techniques. Becker County operates one facility buses adult male and female inmates and juvenile inmates over 14 up to 24 hours, ing weekends and holidays.	
<u>C.</u>	during Minnes	cility ensures all employees receive training on the Prison Rape Elimination Act (PREA) orientation and bi-annually after that. Staff is given the annual PREA training through sota Sheriff's Association (MSA) online training portal and National Institute of Corrections online training courses.	
<u>D.</u>		cility documents all staff training signed acknowledgments of staff training and standing of the training. Staff also sign a PREA Code of Conduct and Fraternization	
	Policy, Materials, Interviews, and Other Evidence Reviewed:		
•	Compl	PREA policy eted Pre-Audit Questionnaire submitted by the Agency	
•		Training Plan g records review	
•	PREA	acknowledgment form	
•		ew with Vivian Anderson (Programmer) m staff interviews	
Stan	dard 1	I15.32: Volunteer and contractor training	
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report	
115.32	! (a)		
•	been ti	e agency ensured that all volunteers and contractors who have contact with inmates have rained on their responsibilities under the agency's sexual abuse and sexual harassment ition, detection, and response policies and procedures? \boxtimes Yes \square No	
115.32	(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

	contrac	report such incidents (the level and type of training provided to volunteers and ctors shall be based on the services they provide and level of contact they have with s)? \boxtimes Yes \square No
115.32	(c)	
•		he agency maintain documentation confirming that volunteers and contractors tand the training they have received? $oxtimes$ Yes \oxtimes No
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

- A. The facility trains all volunteers and contractors who have contact with inmates on their responsibilities regarding sexual abuse and sexual harassment of inmates. The contracted medical provider MEnD Correctional Care provides their employees PREA training every two years on the eleven topics outlines in paragraph "a" in standard 115.31. Refresher information is provided to MEnD contract employees in years which employees do not receive refresher training. Refresher information includes a review of the PREA policy and articles relevant to preventing, detecting, and responding to sexual abuse and sexual harassment. The contracted food service provider Summit Food Service provides training for their employees every two years on the eleven topics outlined in paragraph (a) in standard 115.31. Summit provides quarterly staff training on topics related to the foodservice industry and PREA. The Summit contracted food service employees do not have direct one-on-one contact with inmates.
- **B.** The programmer facilitates volunteer training. Volunteers are required to complete a volunteer packet, review facility PREA information, and sign an acknowledgment form that training has been received and understood. Volunteers are educated on applicable jail rules and regulations, general expectations of volunteers, the lines of authority, responsibility, and accountability for volunteers.
- <u>C.</u> The facility documents all training; volunteers are required to sign a document acknowledging receipt and understanding of PREA training. MEnD Correctional Care and Summit Food Service require their employees to sign and acknowledge receipt and understanding of training.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Vivian Anderson (Programmer)
- Interview with Medical Staff
- Interview with Summit Staff
- MEnD Correctional Care Training Curriculum
- Summit Food Service Training Curriculum

• Signed acknowledgments

Standard 115.33: Inmate education

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.33	5 (a)
•	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? \boxtimes Yes \square No
•	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? \boxtimes Yes \square No
115.33	(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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.33	s (c)
•	Have all inmates received the comprehensive education referenced in 115.33(b)? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.33	s (d)
•	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? \boxtimes Yes \square No
•	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? \boxtimes Yes $\ \square$ No
•	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? \boxtimes Yes \square No

•		re otherwise disabled? Yes No
•		he agency provide inmate education in formats accessible to all inmates including those ave limited reading skills? \boxtimes Yes \square No
115.33	8 (e)	
•		he agency maintain documentation of inmate participation in these education sessions? \Box No
115.33	3 (f)	
•	continu	ition to providing such education, does the agency ensure that key information is uously and readily available or visible to inmates through posters, inmate handbooks, or written formats? \boxtimes Yes \square No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions	for Overall Compliance Determination Narrative
<u>A.</u>	proces was fo and se bookin bookin every i	cility reports that 1644 inmates were admitted in the past 12 months. The facility is in the is of developing reports to extract data on the number of inmates whose length of stay in 30 days or more. Inmates are informed of the facility's zero-tolerance of sexual abuse exual harassment and how to report sexual abuse and sexual harassment during the gip process. Inmates are given a PREA Orientation Form to read and sign during the gip process. Interviews with intake staff confirmed there is a set format completed on intake during the booking process. Interviews with inmates verified they are provided the olerance policy and how to report during the booking process.
<u>B.</u>	informate require availab	t of the initial sign-on, inmates must read and acknowledge the facility's PREA education ation which is available in multiple languages. Every 30 days after that, inmates are ed to read and accept the PREA education information. The inmate handbook tab is also ble on the kiosk. Interviews with random staff verified their understanding of the inmate tion process. Interviews with random inmates confirmed they received PREA education.
<u>C.</u>	The fa	cility provides every inmate with PREA education.
<u>D.</u>	langua The fa	cility's handbook and PREA education are located on the kiosk, which offers multiple age translations. Interpretive services are available for limited English proficient inmates. cility has a TTI/TTD machine for deaf and hard-of-hearing inmates. A verbal orientation raff member will be provided for inmates with limited reading skills or visually impaired.

- **E.** Inmate signatures acknowledging receipt and understanding of training are maintained electronically on the kiosk. Inmates also sign a form during intake acknowledging receipt of the Agency's zero-tolerance policy and how to report allegations of sexual abuse and harassment.
- <u>F.</u> Essential information about PREA is continuously and readily available or visible through posters throughout the facility, kiosks with PREA education, and inmate handbook.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- PREA posters displayed throughout the facility
- Inmate Handbook
- Interviews with intake staff
- Interviews with random inmates

Standard 115.34: Specialized training: Investigations

115.3	4 (a)
	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 □ No □ NA

115.34 (b)	
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•	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).) \boxtimes Yes \square No \square NA
•	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).) \boxtimes Yes \square No \square NA
•	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).) \boxtimes Yes \square No \square NA
•	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 □ No □ NA

•	require not cor	he agency maintain documentation that agency investigators have completed the ed specialized training in conducting sexual abuse investigations? (N/A if the agency does not any form of administrative or criminal sexual abuse investigations. See 115.21(a).) \square No \square NA
115.34	(d)	
•	,	r is not required to audit this provision.
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

Instructions for Overall Compliance Determination Narrative

Does Not Meet Standard (Requires Corrective Action)

- A. The facility PREA policy outlines the requirement that all investigative staff receives specialized investigation training. The licensed investigator received specialized training sponsored by the Minnesota Sheriff's Association conducted by the Minnesota Department of Corrections. The licensed investigator interviewed has over seven years working in law enforcement and has been an investigator for over a year. It was evident during the interview the investigator takes all allegations of sexual assault, and sexual harassment seriously and vigorously investigates every allegation reported.
- **B.** The specialized training includes all the topics listed in paragraph "b" of this standard.
- <u>C.</u> Training documentation is maintained for the employees that have completed specialized investigative training in confinement settings.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Pre-Audit Questionnaire submitted by the Agency
- Interview with Sheriff Todd Glander
- Interview with a licensed investigator
- Training documentation

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.35 (a)

115.34 (c)

 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.) \boxtimes Yes \square No \square NA
•	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.) \boxtimes Yes \square No \square NA
•	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.) \boxtimes Yes \square No \square NA
•	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.) \boxtimes Yes \square No \square NA
115.35	5 (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.) \square Yes \square No \boxtimes NA
115.35	5 (c)
•	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) \boxtimes Yes \square No \square NA
115.35	5 (d)
•	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.) \boxtimes Yes \square No \square NA
•	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.) \boxtimes Yes \square No \square NA
Audito	or Overall Compliance Determination
	☐ Exceeds Standard (Substantially exceeds requirement of standards)

		standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Ins	structions f	or Overall Compliance Determination Narrative
<u>A.</u>	training for facility. An	acted medical provider, MEnD Correctional Care, provides PREA training and intervention the Medical Provider, Mental Health Provider, and Registered Nurse who work in the interview with a registered nurse confirmed receipt of training and understood her lities for detecting, responding, and reporting sexual misconduct.
<u>B.</u>	This parag hospital.	raph is not applicable; forensic medical examinations are conducted at a community
C	The trainin	g is documented, and copies were provided.
<u>U.</u>	THE HAIIIII	g is documented, and copies were provided.
<u>D.</u>	through Mi	rectional Care employees receive full training outlined in paragraph (a) of this standard EnD Correctional Care during initial orientation and every other year after that. The ovides training to MEnD employees on its zero-tolerance policy and facility-related s.
<u>Po</u>		ials, Interviews, and Other Evidence Reviewed: PREA policy
	•	eted Pre-Audit questionnaire submitted by the Agency
	 Intervie 	ew with the nursing staff
		Correctional Care PREA training and intervention policy acknowledgments and certificates of training
	• Signed	acknowledgments and certificates of training
	SC	CREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS
St	tandard 1	15.41: Screening for risk of victimization and abusiveness
AII	I Yes/No Qu	lestions Must Be Answered by the Auditor to Complete the Report
11	5.41 (a)	
		inmates assessed during an intake screening for their risk of being sexually abused by mates or sexually abusive toward other inmates? \boxtimes Yes \square No
		inmates assessed upon transfer to another facility for their risk of being sexually abused or inmates or sexually abusive toward other inmates? \boxtimes Yes \square No
11	5.41 (b)	
		lke screenings ordinarily take place within 72 hours of arrival at the facility? □ No

•	Are all PREA screening assessments conducted using an objective screening instrument? \boxtimes Yes $\ \square$ No
115.4	1 (d)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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)? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No

purposes? \boxtimes Yes \square No

115.41 (c)

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

•	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? $oximes$ Yes \odots No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.41	(f)
•	Within a set time 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? \boxtimes Yes \square No
115.41	(g)
•	Does the facility reassess an inmate's risk level when warranted due to a referral? \boxtimes Yes \square No
•	Does the facility reassess an inmate's risk level when warranted due to a request? \boxtimes Yes $\ \square$ No
•	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse? \boxtimes Yes $\ \square$ No
•	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? \boxtimes Yes \square No
115.41	(h)
•	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? \boxtimes Yes \square No
115.41	(i)
•	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? \boxtimes Yes \square No
Audito	or Overall Compliance Determination
	☐ Exceeds Standard (Substantially exceeds requirement of standards)

115.41 (e)

Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

- **<u>A.</u>** The facility PREA policy outlines the procedures for assessing inmates during intake for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.
- **B.** The facility PREA policy requires the intake screening to occur within 72 hours of arrival at the facility ordinarily. Interviews with staff who perform risk screenings confirmed the screening form was completed during the booking process. Interviews with random inmates verified the screening form was completed during the booking process.
- <u>C.</u> The facility uses a comprehensive assessment tool to determine if the inmate is a likely victim or predator.
- <u>D.</u> The assessment tool the facility uses considers the criteria outlined in paragraph (d) of this standard.
- **<u>E.</u>** The assessment tool considers prior acts of sexual abuse, prior convictions for violent offenses, and history of previous institutional violence or sexual abuse as known to the Agency.
- **<u>F.</u>** The facility PREA policy requires inmates' risk of victimization be reassessed for the risk of victimization or abusiveness within 30 days from the inmate's arrival to the facility.
- **G.** The facility PREA policy requires an inmates' risk level be reassessed when warranted based upon any additional, relevant information received since the intake screening, due to a referral, request, incident of sexual abuse, or receipt of other information that bears on the inmate's risk of sexual victimization or abusiveness.
- **<u>H.</u>** The facility PREA policy prohibits disciplining inmates for refusing to answer (d)(1); (d)7; (d)(8); or (d)(9) of this standard.
- **<u>I.</u>** The assessments are stored securely in the inmate file.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- PREA Intake Screening Form
- Interviews with staff responsible for risk screening
- Interview Assistant Jail Administrator Chris Burton
- Interview with Vivian Anderson (Programmer)
- Interview with randomly selected inmates

Standard 115.42: Use of screening information

115.42 (a)	
kee	les the agency use information from the risk screening required by § 115.41, with the goal of eping separate those inmates at high risk of being sexually victimized from those at high risk being sexually abusive, to inform: Housing Assignments? \boxtimes Yes \square No
kee	bes the agency use information from the risk screening required by § 115.41, with the goal of eping separate those inmates at high risk of being sexually victimized from those at high risk being sexually abusive, to inform: Bed assignments? \boxtimes Yes \square No
kee	bes the agency use information from the risk screening required by § 115.41, with the goal of eping separate those inmates at high risk of being sexually victimized from those at high risk being sexually abusive, to inform: Work Assignments? \boxtimes Yes \square No
kee	bes the agency use information from the risk screening required by § 115.41, with the goal of eping separate those inmates at high risk of being sexually victimized from those at high risk being sexually abusive, to inform: Education Assignments? \boxtimes Yes \square No
kee	besthe agency use information from the risk screening required by § 115.41, with the goal of eping separate those inmates at high risk of being sexually victimized from those at high risk being sexually abusive, to inform: Program Assignments? \boxtimes Yes \square No
115.42 (b)	
	les the agency make individualized determinations about how to ensure the safety of each nate? $oxed{\boxtimes}$ Yes $\oxed{\square}$ No
115.42 (c)	
fem woo ma a m	nen deciding whether to assign a transgender or intersex inmate to a facility for male or male inmates, does the agency consider, on a case-by-case basis whether a placement ould ensure the inmate's health and safety, and whether a placement would present an agement or security problems (NOTE: if an agency by policy or practice assigns inmates to male or female facility on the basis of anatomy alone, that agency is not in compliance with a standard)? \boxtimes Yes \square No
the hea	hen making housing or other program assignments for transgender or intersex inmates, does a agency consider on a case-by-case basis whether a placement would ensure the inmate's alth and safety, and whether a placement would present management or security problems? Yes \square No
115.42 (d)	
rea	e placement and programming assignments for each transgender or intersex inmate assessed at least twice each year to review any threats to safety experienced by the inmate? Yes $\ \square$ No

 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 □ No
115.42 (f)
 Are transgender and intersex inmates given the opportunity to shower separately from other inmates? ⋈ Yes □ No
115.42 (g)
• 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 ⋈ No ⋈ NA
• 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 ☐ No ☐ NA
• 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 □ No □ NA
Auditor Overall Compliance Determination
☐ Exceeds Standard (Substantially exceeds requirement of standards)
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (Requires Corrective Action)
Instructions for Overall Compliance Determination Narrative

<u>A.</u> The facility PREA policy outlines the procedures to follow for the classification of inmates to manage and separate inmates based on information gathered through the classification process

115.42 (e)

to keep separate inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

- **<u>B.</u>** The facility PREA policy outlines the agency's approach to making individualized determinations about how to ensure the safety of each inmate.
- <u>C.</u> The facility PREA policy considers housing and program assignments for transgender or intersex inmates on a case-by-case basis. The PREA Coordinator confirmed the placement of transgender or intersex inmates would be determined on a case-by-case basis.
- <u>D.</u> The facility PREA policy requires placement and programming assignments for each transgender or intersex inmates to be reassessed at least twice each year. The PREA Coordinator verified that generally, a reassessment would be completed every 30 days.
- **E.** The PREA Coordinator and staff responsible for risk screening confirmed a transgender or intersex inmate's views' regarding his/her safety will be given serious consideration.
- <u>F.</u> All the showers in the facility are private.
- **G.** The facility is not under a consent decree, legal settlement, or legal judgment to place lesbian, gay, bisexual, transgender, or intersex inmates in a dedicated unit.

The facility has not housed any transgender or intersex inmates in the 12 months before the audit or during the on-site audit.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Assistant Jail Administrator Chris Burton (PREA Coordinator)
- Interview with Vivian Anderson (Programmer)
- Interview with staff responsible for risk screening

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.43 (a)

•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No

115.43 (b)	
•	ed in segregated housing because they are at high risk of sexual to: Programs to the extent possible? \boxtimes Yes \square No
•	ed in segregated housing because they are at high risk of sexual to: Privileges to the extent possible? \boxtimes Yes \square No
	ed in segregated housing because they are at high risk of sexual to: Education to the extent possible? \boxtimes Yes \square No
	ed in segregated housing because they are at high risk of sexual to: Work opportunities to the extent possible? \boxtimes Yes \square No
the facility document the	access to programs, privileges, education, or work opportunities, does opportunities that have been limited? (N/A if the facility <i>never</i> restricts eges, education, or work opportunities.) \boxtimes Yes \square No \square NA
the facility document the	access to programs, privileges, education, or work opportunities, does duration of the limitation? (N/A if the facility <i>never</i> restricts access to cation, or work opportunities.) \boxtimes Yes \square No \square NA
the facility document the i	access to programs, privileges, education, or work opportunities, does easons for such limitations? (N/A if the facility <i>never</i> restricts access ducation, or work opportunities.) \boxtimes Yes \square No \square NA
115.43 (c)	
housing only until an alter ⊠ Yes □ No	mates at high risk of sexual victimization to involuntary segregated native means of separation from likely abusers can be arranged? t not ordinarily exceed a period of 30 days? ⊠ Yes □ No
115.43 (d)	
	ed housing assignment is made pursuant to paragraph (a) of this learly document the basis for the facility's concern for the inmate's
	ed housing assignment is made pursuant to paragraph (a) of this learly document the reason why no alternative means of separation No
115.43 (e)	
risk of sexual victimization	e who is placed in involuntary segregation because he/she is at high a, does the facility afford a review to determine whether there is a ation from the general population EVERY 30 DAYS? ⊠ Yes □ No

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

- **<u>A.</u>** The facility PREA policy prohibits inmates at high risk of sexual victimization from being placed in involuntary protective custody unless an assessment of all available alternatives has been made and it has been determined that there are no available alternative means of separation.
- **B.** The PREA Coordinator confirmed that inmates would have access to programs, privileges, education, and work opportunities. Any restrictions would be documented. Minnesota Department of Corrections 2911.2800 rules for licensure require a deprivation report about the item or activity that has been restricted.
- <u>C.</u> An inmate at high risk for sexual victimization would only be placed in involuntary protective custody until an alternative means of separation can be arranged, generally, no more than 30 days unless exigent circumstances exist. The PREA Coordinator confirmed adherence to this policy.
- <u>D.</u> If an inmate is placed in an involuntary segregated housing assignment, the basis for the safety concern and why no other alternative means of separation can be arranged shall be documented.
- **E.** An inmate's involuntary segregated housing assignment will be reassessed every 30 days. Minnesota Department of Corrections 2911.2800 rules for licensure require an inmate placed in involuntary segregated housing assignment to be reassessed every seven days.

In the past 12 months, the facility reports there have been zero inmates placed in involuntary protective custody for 1 to 24 hours awaiting completion of an assessment. In the past 12 months, the facility reports there have been zero inmates placed in involuntary protective custody for longer than 30 days waiting for alternative placement.

During the on-site PREA Audit, there were zero inmates at risk of sexual victimization or alleged to have suffered abuse housed in involuntary protective custody.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit questionnaire submitted by the Agency
- Interview with Assistant Jail Administrator Chris Burton (PREA Coordinator)
- Interview with Vivian Anderson (Programmer)

REPORTING

Standard 115.51: Inmate reporting

All Yes	s/No Questions Must Be Answered by the Auditor to Complete the Report
115.51	(a)
•	Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.51	(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? \boxtimes Yes \square No
•	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? \boxtimes Yes \square No
•	Does that private entity or office allow the inmate to remain anonymous upon request? \boxtimes Yes $\ \square$ No
•	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 <i>never</i> houses inmates detained solely for civil immigration purposes) \square Yes \square No \boxtimes NA
115.51	(c)
•	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? \boxtimes Yes \square No
•	Does staff promptly document any verbal reports of sexual abuse and sexual harassment? \boxtimes Yes $\ \square$ No
115.51	(d)
•	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? \boxtimes Yes \square No

Auditor Overall Compliance Determination

	Does Not Meet Standard (Requires Corrective Action)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Exceeds Standard (Substantially exceeds requirement of standards)

Instructions for Overall Compliance Determination Narrative

- <u>A.</u> The facility provides inmates multiple internal ways to report sexual abuse and harassment, retaliation, and staff neglect. Inmates receive information during the booking process, inmate handbook, PREA education tab on the kiosk, and other information posted in the jail. The reporting methods include request forms, verbal reporting, anonymous reporting, third-party reporting, and contacting New Horizons Crisis Center.
- **B.** The facility has a signed Memorandum of Understanding (MOU) with Lakes Crisis and Resource Center located in Detroit Lakes, Minnesota https://www.lakescrisis.com/. to act as an outside third-party reporting agency for inmates. Contact information and phone number is listed on posters visible throughout the facility and published in the Inmate Handbook. The phone call is a free call for the inmates. Random inmate interviews confirmed inmates are informed of the different ways they can report sexual abuse or sexual harassment, including sending a message on their texting device. The facility does not detain inmates solely for civil immigration purposes.
- C. The facility PREA policy requires staff to accept reports made verbally, in writing, anonymously, and from third parties and promptly document any verbal reports. Random staff interviews verified knowledge of their responsibility to accept any allegation of sexual abuse or sexual harassment verbally, in writing, from a third party, or anonymously and would immediately document a verbal report. When inmates interviewed were asked if they thought the Agency would take their reports of sexual abuse or harassment seriously, their responses were "yes."
- <u>D.</u> Staff may privately report any sexual abuse or harassment of inmates to a supervisor or any member of the administration. Staff may privately report outside the jail chain-of-command to the Sheriff, Chief Deputy, or County Attorney's Office.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Assistant Jail Administrator Chris Burton (PREA Coordinator)
- Interview with Vivian Anderson (Programmer)
- Interviews with randomly selected staff
- Interviews with randomly selected inmates
- Posters
- Inmate Handbook
- MOU with Lakes Crisis and Resource Center https://www.lakescrisis.com/

Standard 115.52: Exhaustion of administrative remedies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.52	(a)
•	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. \square Yes \boxtimes No
115.52	(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.) \boxtimes Yes \square No \square NA
•	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
115.52	(c)
•	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.) \boxtimes Yes \square No \square NA
•	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
115.52	(d)
•	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.) \boxtimes Yes \square No \square NA
•	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
	At any level of the administrative process, including the final level, if the inmate does not receive

from this standard.) \boxtimes Yes \square No \square NA

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

•	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.) \boxtimes Yes \square No \square NA
•	Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
115.52	? (f)
•	Has the agency established procedures for the filing of an emergency grievance alleging that are inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.). \boxtimes Yes \square No \square NA
•	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA

115.52 (e)

15.52 (g)
If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does 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 □ No □ NA
Auditor Overall Compliance Determination

□ Exceeds Standard (Substantially exceeds requirement of standards) □ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

- A. The facility reports zero grievances filed alleging sexual abuse or sexual harassment in the past 12 months. The facility reports there have been zero emergency grievances filed alleging sexual abuse or sexual harassment.
- **B.** The facility PREA policy ensures no time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse (applicable time limits will apply to any portion of the grievance that does not allege an incident of sexual abuse.) An inmate will not be required to use any informal grievance process, or otherwise attempt to resolve an alleged incident of sexual abuse with staff.
- <u>C.</u> The facility PREA policy ensures an inmate who alleges sexual abuse will not be required to submit a grievance to a staff member who is the subject of the complaint.
- <u>D.</u> The facility will issue a final decision within 90 days of the initial filing submitted by an inmate claiming sexual abuse or sexual harassment. An extension of up to 70 days may be granted if the standard time period for response is insufficient to make an appropriate decision. The inmate will be notified of the extension and provided a date by which the facility will make its decision.
- **E.** The facility allows third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies for sexual abuse and harassment allegations and file a request on behalf of the inmate. Third-party reports of sexual abuse or harassment will be forwarded to the shift supervisor or designee. If a third party files a report, the alleged victim must agree to have the request filed on his/her behalf and personally pursue any subsequent steps in the administrative process. The facility will document in an incident report the alleged victim's decision.
- **<u>F.</u>** Emergency grievances are permitted if an inmate is subject to a substantial risk of imminent sexual abuse. Upon receiving an emergency grievance alleging imminent sexual abuse, the supervisor will determine whether immediate action is reasonably necessary. The facility will provide an initial response within 48 hours, and an agency decision will be provided within 5 calendar days.
- **G.** The agency policy states an inmate may be disciplined for filing a grievance related to sexual abuse only where the Agency demonstrates that the inmate filed the grievance in bad faith.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Inmate Handbook

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.53	(a)		
•	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? \boxtimes Yes \square No		
•	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 <i>never</i> has persons detained solely for civil immigration purposes.) \boxtimes Yes \square No \square NA		
•	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? \boxtimes Yes \square No		
115.53	(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? \boxtimes Yes \square No		
115.53	(c)		
■ Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? ✓ Yes ✓ No			
•	■ Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? No		
Audito	or Overall Compliance Determination		
	Exceeds Standard (Substantially exceeds requirement of standards)		
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
	□ Does Not Meet Standard (Requires Corrective Action)		

Instructions for Overall Compliance Determination Narrative

- A. The facility has entered into an ongoing Memorandum of Understanding (MOU) for collaborative services with Lakes Crisis and Resource Center located in Detroit Lakes, Minnesota https://www.lakescrisis.com/ Contact information for these services are visibly posted throughout the facility and published in the Inmate Handbook. The facility does not house inmates solely for civil immigration purposes. Calls to Lakes Crisis and Resource Center are free calls.
- **B.** The information for this service is visibly posted throughout the facility and published in the Inmate Handbook. Random inmates interviewed knew where to find the contact information for Lakes Crisis and Resource Center.
- C. The facility maintains a Memorandum of Understanding (MOU) for collaborative services with Lakes Crisis and Resource Center.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Posters
- Inmate Handbook
- MOU between the facility and Lakes Crisis and Resource Center
- Random staff interviews
- Random inmate interviews

Standard 115.54: Third-party reporting

11	5	.54	(a)	١
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115.54	+ (a)		
•		be agency established a method to receive third-party reports of sexual abuse and sexual sment? $oxed{\boxtimes}$ Yes $\oxed{\square}$ No	
•	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? \boxtimes Yes \square No		
Audito	Auditor Overall Compliance Determination Exceeds Standard (Substantially exceeds requirement of standards)		
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

Instructions for Overall Compliance Determination Narrative

A. The facility has a method for receiving third-party reports of sexual abuse or harassment of inmates. Information on how to report is posted on the Agency's website: http://www.co.becker.mn.us/dept/sheriff/PDFs/PREA Policy 08202020.pdf Reporting options

available are making a report to the Becker County Sheriff's Office, Becker County Jail Administration Office, Jail Shift Supervisor, and Lakes Crisis and Resource Center.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Becker County website: http://www.co.becker.mn.us/dept/sheriff/PDFs/PREA Policy 08202020.pdf
- Memorandum of Understanding between the facility and Lakes Crisis and Resource Center
- Posted materials
- Inmate Handbook
- PREA 3rd Party Reporting Form (available on Agency website: http://www.co.becker.mn.us/dept/sheriff/PDFs/PREA Policy 08202020.pdf)

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.61 (a)	11	5.	.61	(a)
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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 □ No 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 □ No 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 □ No		Λ I
 knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? ⋈ Yes □ No 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? 	•	knowledge, suspicion, or information regarding an incident of sexual abuse or sexual
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?	•	knowledge, suspicion, or information regarding retaliation against inmates or staff who reported
	•	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?

115.61 (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 □ No

115.61 (c)

- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?

 ✓ Yes

 ✓ No

•	local v	alleged victim is under the age of 18 or considered a vulnerable adult under a State or ulnerable persons statute, does the agency report the allegation to the designated State all services agency under applicable mandatory reporting laws? \boxtimes Yes \square No
115.61	l (e)	
• Audito	 Does the facility report all allegations of sexual abuse and sexual harassment, including third party and anonymous reports, to the facility's designated investigators?	
	Ш	Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

- A. The facility PREA policy outlines the procedures and expectation that any staff member who becomes aware of an incident of sexual abuse, harassment, or retaliation against staff or inmates shall immediately notify their supervisor, any supervisor, Lieutenant, Assistant Jail Administrator, or Jail Administrator. Randomly selected staff interviews confirmed training and their responsibilities to report. Staff reported trust in their administration to take every allegation seriously, and the allegation would be investigated.
- **B.** Facility policy requires staff not to reveal any information related to a sexual abuse or sexual harassment report to anyone except supervisors and officials responsible for treatment, investigation, and other security and management decisions. Interviews with randomly selected staff verified receipt of training, understood their responsibility and would report information directly to their sergeant.
- <u>C.</u> Interviews with medical and mental health practitioners confirmed their knowledge of their duty to report. Medical and mental health practitioners understand their obligation to report to jail administration any knowledge, suspicion, or information regarding incidents of sexual abuse or harassment that occurred in any facility.
- <u>D.</u> The staff understands their responsibilities as mandated reporters and would report allegations to the appropriate authorities if the alleged victim is under 18 or considered a vulnerable adult.
- **E.** The facility reports all allegations of sexual abuse and sexual harassment to the designated facility investigator. The Sheriff and PREA Coordinator confirmed that the facility would investigate all allegations of sexual abuse and harassment.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency

115.61 (d)

- Interview with Sheriff Todd Glander
- Interviews with medical and mental health practitioners
- Random staff interviews

Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

11	5.	62	(a)
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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 □ No

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The facility reports that in the past 12 months, there have been zero instances where the facility determined an inmate was subject to a substantial risk of imminent sexual abuse. Interviews with the Sheriff and randomly selected staff confirmed the facility would take immediate action to protect the inmate.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Sheriff Todd Glander
- Interviews with randomly selected staff

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.63 (a)

■ 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

✓ No

115.63 (b)

Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?

⊠ Yes □ No

115.63	3 (c)	
•	Does t	he agency document that it has provided such notification? $oxtimes$ Yes \odots No
115.63	3 (d)	
•		he facility head or agency office that receives such notification ensure that the allegation stigated in accordance with these standards? \boxtimes Yes \square No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions 1	for Overall Compliance Determination Narrative
<u>A.</u>	while o	cility PREA policy states upon receiving an allegation that an inmate was sexually abused confined at another facility, the Jail Administrator or designee shall notify the head of the or Agency where the alleged abuse occurred.
<u>B.</u>		cility PREA policy requires the Jail Administrator or designee to notify the head of that as soon as possible but not later than 72 hours after receiving the allegation.
<u>C.</u>	The fa	cility PREA policy requires the jail to document that notification has been provided.
<u>D.</u>		cility PREA policy requires that allegations from other facilities/agencies that an inmate ed he/she was abused in the Becker County Jail are investigated according to PREA ards.
fac	ilities.	reported there had been zero allegations of sexual abuse the facility received from other The facility reported zero allegations it received that an inmate was abused while confined facility.
Policy		ials, Interviews, and Other Evidence Reviewed:
•	•	/ PREA policy eted Pre-Audit Questionnaire submitted by the Agency
•	COHIDI	eteu Fre-Audit Questionnalle submitted by the Adency

- Interview with Sheriff Todd Glander

Standard 115.64: Staff first responder duties

115.64	(a)	
•	membe	earning of an allegation that an inmate was sexually abused, is the first security staffer to respond to the report required to: Separate the alleged victim and abuser? \Box No
•	membe	earning of an allegation that an inmate was sexually abused, is the first security staffer to respond to the report required to: Preserve and protect any crime scene until riate steps can be taken to collect any evidence? \boxtimes Yes \square No
•	member actions changii	earning of an allegation that an inmate was sexually abused, is the first security staffer to respond to the report required to: Request that the alleged victim not take any that could destroy physical evidence, including, as appropriate, washing, brushing teeth, and clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred a time period that still allows for the collection of physical evidence? \boxtimes Yes \square No
•	member actions changii	earning of an allegation that an inmate was sexually abused, is the first security staffer to respond to the report required to: Ensure that the alleged abuser does not take any that could destroy physical evidence, including, as appropriate, washing, brushing teeth, ng clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred a time period that still allows for the collection of physical evidence? \boxtimes Yes \square No
115.64	(b)	
•	that the	rst staff responder is not a security staff member, is the responder required to request e alleged victim not take any actions that could destroy physical evidence, and then notify y staff? \boxtimes Yes \square No
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

In the past 12 months, the facility reports there have been zero allegations that an inmate was sexually abused. In the past 12 months, there have been zero allegations where a staff member was notified within a time that still allowed for the collection of physical evidence.

<u>A.</u> Facility policy details the duties of the first security staff member to respond.

A security staff first responder is required to:

- Separate the alleged victim and abuser;
- Preserve and protect the crime scene;
- If appropriate, request the alleged victim not destroy evidence (as detailed in this standard);
- If appropriate, ensure the alleged perpetrator not destroy evidence (as detained in this standard)

B. If the first responder is not a deputy, the facility PREA policy states the responder shall request the alleged victim not take any action that could destroy physical evidence and then notify a law enforcement staff member.

Random staff interviews confirmed understanding of first responder duties.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Random staff interviews

Standard 115.65: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.65 (a)

■ Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?

✓ Yes

✓ No

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse. The plan outlines responsibilities among staff first responders, medical practitioners, investigators, and facility leadership.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Coordinated Response Plan
- Facility Response staff reference guide
- First Responder PREA Checklist

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

•	on the agreer abuser	th the agency and any other governmental entities responsible for collective bargaining agency's behalf prohibited from entering into or renewing any collective bargaining ment or other agreement that limits the agency's ability to remove alleged staff sexual res from contact with any inmates pending the outcome of an investigation or of a mination of whether and to what extent discipline is warranted? Yes No
115.66	(b)	
•	Audito	r is not required to audit this provision.
Audito	r Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions	for Overall Compliance Determination Narrative
Agenc	y maint	as entered into a new collective bargaining agreement since the last PREA audit. The ains the authority to place staff on administrative leave pending the final disposition of an or a determination of whether and to what extent discipline will be imposed.
Policy	, Mater	ials, Interviews, and Other Evidence Reviewed:
•	Compl	r PREA policy eted Pre-Audit Questionnaire submitted by the Agency ew with Sheriff Todd Glander
•	IIILEIVI	ew with Sheriii Todd Glander
Stan	dard ′	115.67: Agency protection against retaliation
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.67	' (a)	
•	sexual	e agency established a policy to protect all inmates and staff who report sexual abuse or harassment or cooperate with sexual abuse or sexual harassment investigations from tion by other inmates or staff? \boxtimes Yes \square No
•		e agency designated which staff members or departments are charged with monitoring ion? $oxed{\boxtimes}$ Yes $\oxed{\square}$ No
115.67	(b)	

115.66 (a)

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

115.67	(c)
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? \boxtimes Yes \square No
115.67	(d)
•	In the case of inmates, does such monitoring also include periodic status checks? \boxtimes Yes \boxtimes No

victims, and emotional support services, for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? \boxtimes Yes \square No

113.07	(e)
•	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? \boxtimes Yes \square No
115.67	' (f)
•	Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

115 67 (0)

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

- <u>A.</u> The facility reports that in the past 12 months, there have been zero incidents of retaliation reported, known, or suspected. The facility PREA policy ensures that all inmates and members who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliation.
- **B.** The facility would use multiple protection measures such as housing changes, transfers, removal of alleged abusers from contact with victims, administrative reassignments, and support services for inmates or staff who fear retaliation. The Sheriff confirmed that immediate action would be taken. Random staff interviewed were confident that the administration would not tolerate retaliation and would take immediate action.
- <u>C.</u> The Assistant Jail Administrator confirmed that following a report of sexual abuse, monitoring of inmates or staff against retaliation would be conducted for at least 90 days. Monitoring after the 90 days would continue if needed. The facility has not had an incident that required monitoring for retaliation.
- <u>D.</u> The facility PREA policy requires status checks with inmates; the status checks would be conducted every week.
- **<u>E.</u>** The facility would take appropriate measures to protect an individual who cooperates with an investigation and expresses fear of retaliation.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Assistant Jail Administrator Chris Burton (PREA Coordinator)
- Interview with Sheriff Todd Glander

Standard 115.68: Post-allegation protective custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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 □ No

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

- **A.** The facility PREA policy prohibits inmates at high risk of sexual victimization from being placed in involuntary protective custody unless an assessment of all available alternatives has been made and it has been determined that there are no available alternative means of separation.
- **B.** The PREA Coordinator confirmed that inmates would have access to programs, privileges, education, and work opportunities. Any restrictions would be documented. Minnesota Department of Corrections 2911.2800 rules for licensure require a deprivation report about the item or activity that has been restricted.
- <u>C.</u> An inmate at high risk for sexual victimization would only be placed in involuntary protective custody until an alternative means of separation can be arranged, generally, no more than 30 days unless exigent circumstances exist. The PREA Coordinator confirmed adherence to this policy.
- <u>D.</u> If an inmate is placed in an involuntary segregated housing assignment, the basis for the safety concern and why no other alternative means of separation can be arranged shall be documented.
- **E.** An inmate's involuntary segregated housing assignment will be reassessed every 30 days. Minnesota Department of Corrections 2911.2800 rules for licensure require an inmate placed in involuntary segregated housing assignment to be reassessed every seven days.

In the past 12 months, the facility reports there have been zero inmates placed in involuntary protective custody for 1 to 24 hours awaiting completion of an assessment. In the past 12 months, the facility reports there have been zero inmates placed in involuntary protective custody for longer than 30 days waiting for alternative placement.

During the on-site PREA Audit, there were zero inmates at risk of sexual victimization or alleged to have suffered abuse housed in involuntary protective custody.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit questionnaire submitted by the Agency
- Interview with Assistant Jail Administrator Chris Burton (PREA Coordinator)
- Interview with Vivian Anderson (Programmer)

INVESTIGATIONS

Standard 115 71: Criminal and administrative agency investigations

Standard 113.71. Criminal and administrative agency investigations			
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report			
115.71 (a)			
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 □ No □ NA			
■ 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 □ No □ NA			
l15.71 (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 □ No			
115.71 (c)			
$lacktriangle$ Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? $oxtimes$ Yes \oxtimes No			
■ Do investigators interview alleged victims, suspected perpetrators, and witnesses? ☑ Yes □ No			
■ Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? ⊠ Yes □ No			
l15.71 (d)			
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 □ No			
115.71 (e)			
• •			

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? \boxtimes Yes \square No

•	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? \boxtimes Yes \square No
115.71	(f)
•	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
115.71	(g)
•	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? \boxtimes Yes \square No
115.71	(h)
•	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? \boxtimes Yes $\ \square$ No
115.71	(i)
•	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? \boxtimes Yes \square No
115.71	(j)
•	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? \boxtimes Yes \square No
115.71	(k)
•	Auditor is not required to audit this provision.
115.71	(1)
•	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).) \square Yes \square No \boxtimes NA

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

- **<u>A.</u>** The facility PREA policy states all investigations of sexual abuse and sexual harassment, including third-party and anonymous reports, will be conducted promptly, thoroughly, and objectively.
- **B.** The investigator who conducts criminal investigation has received training according to standard 115.34. The investigator is well trained and experienced in conducting investigations.
- <u>C.</u> The investigator interviewed explained the investigative steps used, including a collection of evidence, interviews, technology, reports, and any other pertinent information available.
- <u>D.</u> The investigator will conduct interviews, complete the case file and forward it to the County Attorney's Office to review. In complex cases, the investigator would consult with the County Attorney's Office before conducting compelled interviews.
- **E.** The credibility of the alleged victim, suspect, or witness is based on what the evidence supports as the investigation develops. Polygraphs would not be used in an investigation. Minnesota State Statute 611A.26.S.1 prohibits the use of polygraphs on victims of sexual abuse as part of or the condition for proceeding with the investigation, charging, or prosecution of such offense.
- <u>F.</u> The facility PREA policy outlines the requirement of this paragraph in response to administrative investigations. The facility reported zero administrative investigations conducted. The administrative investigation includes descriptions of any physical, testimonial, and documentary evidence, the reasoning behind the credibility assessments, and investigative facts and findings.
- **<u>G.</u>** Criminal investigations are documented and include interviews, evidence, a thorough description, and any additional information pertinent to the investigation.
- **<u>H.</u>** An investigation that supports criminal conduct will be forwarded to the Becker County Attorney's Office for prosecution.
- **<u>I.</u>** The facility retains all written reports from administrative and criminal investigations for as long as the alleged abuser is incarcerated or employed by the Agency, plus five years.
- <u>J.</u> The Sheriff confirmed that an investigation would be completed even if the staff member were no longer employed with the Agency.
- K. The Becker County Sheriff's Office conducts its sexual abuse investigations.

The facility reported there were zero administrative investigations and one criminal investigation conducted in the past 12 months.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Sheriff Todd Glander
- Interview with Assistant Jail Administrator Chris Burton (PREA Coordinator)
- Interview with Vivian Anderson (Programmer)
- Licensed investigator interview
- Investigative report review

Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.72 (a)

•	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? \boxtimes Yes \square No		
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

Instructions for Overall Compliance Determination Narrative

The facility reports they do not impose a standard higher than a preponderance (more than fifty percent) of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Licensed investigator interview

Standard 115.73: Reporting to inmates

115.73	s (a)
•	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? \boxtimes Yes \square No
115.73	3 (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.) \square Yes \square No \boxtimes NA
115.73	3 (c)
•	Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer posted within the inmate's unit? \boxtimes Yes \square No
•	Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer employed at the facility? \boxtimes Yes \square No
•	Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? \boxtimes Yes \square No
•	Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? \boxtimes Yes \square No
115.73	3 (d)
	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? \boxtimes Yes $\ \square$ No 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? \boxtimes Yes $\ \square$ No

115.73	8 (e)						
•	Does the agency document all such notifications or attempted notifications? $oximes$ Yes \odots No						
115.73 (f)							
•	Auditor is not required to audit this provision.						
Auditor Overall Compliance Determination							
		Exceeds Standard (Substantially exceeds requirement of standards)					
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)					
		Does Not Meet Standard (Requires Corrective Action)					
Instru	ctions	for Overall Compliance Determination Narrative					
<u>A.</u>	The facility PREA policy states following an investigation into an inmate's allegation that he or she suffered sexual abuse, the inmate shall be informed whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. In the past 12 months, the facility reports zero administrative and one criminal investigation of alleged inmate sexual abuse completed by the Agency.						
<u>B.</u>	This paragraph is not applicable; trained Becker County Sheriff's Office licensed investigators completes criminal investigations.						
<u>C.</u>	The facility PREA policy outlines the information provided to the inmate on the status of the accused staff member. (as detailed in this standard)						
<u>D.</u>	The facility PREA policy outlines the information provided to the inmate on the status of the alleged abuser if another inmate is accused. (as detailed in this standard)						
<u>E.</u>	docum	cility PREA policy states all such notifications or attempted notifications shall be nented. The jail's obligation to report under this standard shall terminate if the inmate is ed from the agency's custody.					
Policy, Materials, Interviews, and Other Evidence Reviewed:							
•	Compl	cility PREA policy eted Pre-Audit Questionnaire submitted by the Agency ed investigator interview					
		DISCIPLINE					

Standard 115.76: Disciplinary sanctions for staff

115.76	o (a)		
•		aff subject to disciplinary sanctions up to and including termination for violating agency I abuse or sexual harassment policies? $oxtimes$ Yes \oxtimes No	
115.76	6 (b)		
•		nination the presumptive disciplinary sanction for staff who have engaged in sexual ? $oxed{oxed}$ Yes $oxed{\Box}$ No	
115.76	6 (c)		
	Are disharass circum impos	sciplinary sanctions for violations of agency policies relating to sexual abuse or sexual sment (other than actually engaging in sexual abuse) commensurate with the nature and istances of the acts committed, the staff member's disciplinary history, and the sanctions ed for comparable offenses by other staff with similar histories? \boxtimes Yes \square No	
115.76	6 (d)		
•	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)? \boxtimes Yes \square No 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? \boxtimes Yes \square No		
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	
Instru	ctions	for Overall Compliance Determination Narrative	
<u>A.</u>	facility sexual memb PREA	past 12 months, the facility reports that there have been zero staff members from the who has been disciplined, terminated, or resigned before termination for violating agency labuse or sexual harassment policies. Additionally, in the past 12 months, zero staff ers reported to law enforcement or licensing boards for violating Agency policies. Facility Policy outlines the disciplinary sanctions up to and includes termination for violating labuse and harassment policies.	
<u>B.</u>	Termir abuse	nation will be the presumptive disciplinary sanction for staff who has engaged in sexual .	
<u>C.</u>		icility PREA policy outlines the progressive discipline of staff members for violations of serials related to sexual abuse or harassment (other than engaging in sexual abuse.)	

D. All terminations or resignations for violating Agency sexual abuse or harassment policies will be reported to law enforcement agencies unless the activity was not criminal and to any relevant licensing bodies. The facility would be required to submit a special incident report to the Minnesota Department of Corrections.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Sheriff Todd Glander

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

All 100/110 Queen line of De Allewered by the Additor to Complete the Report		
115.77 (a)		
■ Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? ⊠ Yes □ No		
Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? ☑ Yes □ No		
■ Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? No		
115.77 (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 □ No		
Auditor Overall Compliance Determination		
☐ Exceeds Standard (Substantially exceeds requirement of standards)		
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
□ Does Not Meet Standard (Requires Corrective Action)		
nstructions for Overall Compliance Determination Narrative		

- A. In the past 12 months, the facility reports there have been zero contractors or volunteers reported to law enforcement or relevant licensing bodies for engaging in sexual abuse of inmates.
- B. The facility will take appropriate remedial measures and shall consider whether to prohibit further contact with inmates in the case of any other violation of jail sexual abuse or harassment policies.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Audi	itor to Complete the Report
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All Yes/No Questions Must Be Answered by the Auditor to Complete the Report			
115.78 (a)			
■ 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 □ No			
115.78 (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 □ No			
115.78 (c)			
■ 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 □ No			
115.78 (d)			
■ 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 No			
115.78 (e)			
■ 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 □ No			
115.78 (f)			
For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? ⋈ Yes □ No			
115.78 (g)			
■ 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 □ No □ NA			

□ Exceeds Standard (Substantially exceeds requirement of standards) □ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

Auditor Overall Compliance Determination

- **<u>A.</u>** The facility has a formalized discipline plan applicable to inmates, followed by policy and the inmate handbook. The discipline plan includes a due process that allows the inmate to agree and sign the violation giving up the right to a hearing or request a hearing conducted by an impartial hearing board.
- **B.** Disciplinary decisions are based on the nature and circumstances of the abuse committed, the inmate's discipline history, and the sanctions imposed for comparable offenses by other inmates.
- <u>C.</u> The disciplinary process considers whether an inmate's mental disability or illness contributed to the inmate's behavior.
- <u>D.</u> The facility does not offer therapy, counseling, or other interventions to address and correct underlying reasons or motivations for offending inmates. The facility does have a mental health practitioner available to provide mental health services to inmates.
- **E.** An inmate would not be disciplined for sexual contact with a staff member unless there is a finding that the staff member did not consent to the contact.
- **F.** The facility does not discipline inmates for a report of sexual abuse made in good faith based on a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.
- **G.** The facility prohibits sexual activity between inmates and disciplines inmates for such activity and deems such activity as criminal sexual abuse only if it determines the activity was not coerced.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Inmate Handbook

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexual abuse

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report 115.81 (a) 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 ☐ No ☒ NA 115.81 (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.) \square Yes \square No \boxtimes NA 115.81 (c) 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? \boxtimes Yes \square No 115.81 (d) 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? 115.81 (e)

■ 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 □ No

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

- <u>C.</u> The facility reports that inmates who disclose any prior sexual victimization during the risk assessment are referred to medical staff. Staff who perform risk screenings confirmed a referral form would be completed and forwarded to medical staff. Medical staff interviewed report that inmates referred for a follow-up meeting with medical or mental health are seen within 14 days.
- <u>D.</u> Medical and mental health practitioners are limited from disclosing information related to sexual abuse victimization that occurred in an institutional setting. Any information shared with other staff will be strictly limited to security and management decisions. Medical and mental health staff interviewed would notify the Assistant Jail Administrator or Jail Administrator.
- <u>E.</u> Medical and mental health practitioners disclose limitations of confidentiality and their duty to report at the initiation of services. Informed consent would be obtained before disclosing prior victimization that did not occur in a confinement setting.

During the on-site audit, no inmates who disclosed sexual victimization during the PREA intake screening form being held in the facility.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Audit Questionnaire submitted by the Agency
- Interview with a medical practitioner
- Interviews with staff who perform risk screenings
- MEnD Correctional Care PREA policy and procedures
- MEnD Inmate Assessment Form
- MEnD PREA reporting decision tree

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.82	a)
	to inmate victims of sexual abuse receive timely, unimpeded access to emergency medical eatment and crisis intervention services, the nature and scope of which are determined by nedical and mental health practitioners according to their professional judgment? \square Yes \square No
115.82	o)

.0	L (D)
•	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? \boxtimes Yes \square No
•	Do security staff first responders immediately notify the appropriate medical and mental health practitioners? \boxtimes Yes \square No

•	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? \boxtimes Yes \square No		
115.82	(d)		
•	 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 □ No 		
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

Instructions for Overall Compliance Determination Narrative

- A. Inmate victims of sexual abuse, while incarcerated, shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. Inmate victims of sexual abuse while incarcerated, will be transported to the nearest appropriate location.
- **<u>B.</u>** The facility PREA policy requires staff to take preliminary steps to protect the victim and notify the on-call medical provider immediately.
- C. Inmates would be offered timely access to emergency contraception and sexually transmitted prophylaxis from the forensic examiner or advocate. If the inmate is not provided information at the hospital, jail medical will provide the inmate information. Medical staff interviewed would follow up with the inmate to set up a treatment plan for continuing medical care after consulting with the facility's medical provider.
- <u>D.</u> The facility PREA policy states 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.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Medical staff

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

115.82 (c)

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.83 (a)			
■ 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 □ No			
115.83 (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 □ No			
115.83 (c)			
■ Does the facility provide such victims with medical and mental health services consistent with the community level of care? ⊠ Yes □ No			
115.83 (d)			
• Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all-male" facility. Note: in "all-male" facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) ⋈ Yes ⋈ No ⋈ NA			
115.83 (e)			
If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all-male" facility. <i>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.</i>) ⊠ Yes □ No □ NA			
115.83 (f)			
 Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?			
115.83 (g)			
 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 □ No 			

115.83 (h)

•	inmate when d	acility is a prison, does it attempt to conduct a mental health evaluation of all known on-inmate abusers within 60 days of learning of such abuse history and offer treatment leemed appropriate by mental health practitioners? (NA if the facility is a jail.) □ No □ NA		
Audito	Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)		
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		

Instructions for Overall Compliance Determination Narrative

- <u>A.</u> The facility contracts with MEnD Correctional Care to provide medical and mental health services to inmates in the facility. The services include a medical provider, mental health provider, and RN nursing services.
- **B.** Interviews with medical staff confirmed they would provide follow-up services and treatment plans as appropriate to the inmate. The information would be sent with the inmate transferring to another facility for the continuation of care.
- <u>C.</u> Community-level care is provided to all inmates. In some instances, treatment is at a higher level of care based on the immediate medical and mental health treatment available at the jail.
- **D.** Medical staff would offer pregnancy tests to inmates as medically appropriate.
- **E.** The facility PREA policy states that if pregnancy results from sexual abuse, victims will receive information about and access to all lawful pregnancy–related medical services.
- **F.** Inmate victims of sexual abuse would be offered testing, treatment, and information for sexually transmitted infections. Medical staff confirmed an inmate would be offered testing, treatment, and information.
- **G.** The facility PREA policy states treatment will be provided to all individuals free of charge regardless of whether the victim names the abuser or cooperates with the investigation process.
- **H.** This paragraph is not applicable.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with medical staff

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Au	iditor to Complete the Report
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All Tes	s/No Questions must be Answered by the Auditor to Complete the Report		
115.86 (a)			
•	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? \boxtimes Yes \square No		
115.86	(b)		
•	Does such review ordinarily occur within 30 days of the conclusion of the investigation? $\ \ \boxtimes$ Yes $\ \ \Box$ No		
115.86	(c)		
•	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? \boxtimes Yes \square No		
115.86	(d)		
•	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? \boxtimes Yes \square No		
•	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? \boxtimes Yes \square No		
•	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? \boxtimes Yes \square No		
•	Does the review team: Assess the adequacy of staffing levels in that area during different shifts? $\ \ \ \ \ \ \ \ \ \ \ \ \ $		
•	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? \boxtimes Yes \square No		
•	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? \boxtimes Yes \square No		
115.86 (e)			
•	Does the facility implement the recommendations for improvement, or document its reasons for not doing so? \boxtimes Yes \square No		

Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions 1	or Overall Compliance Determination Narrative
<u>A.</u>	of alleg	past 12 months, the facility reports that one criminal and zero administrative investigation ged sexual abuse or assault were completed, and zero incident reviews were conducted. cility PREA policy states that an incident review shall be conducted at the conclusion of sexual abuse investigation, including where the allegation has not been substantiated the allegation has been determined to be unfounded.
<u>B.</u>	The Po	olicy states the review should occur within 30 days of the conclusion of the investigation.
<u>C.</u>		cility reports the incident review team includes the Assistant Jail Administrator and lead RN and would allow for input from supervisors and investigators.
<u>D.</u>	The fa	cility reports that the review team will consider (1)-(6) in the paragraph of this standard.
<u>E.</u>		cility reports any recommendations for improvement would be implemented or document asons for not doing so.
Policy		ials, Interviews, and Other Evidence Reviewed:
•	Compl Intervie	PREA policy eted Pre-Audit Questionnaire submitted by the Agency ew with Assistant Jail Administrator Chris Burton (PREA Coordinator) ew with Vivian Anderson (Programmer)
Stan	dard 1	115.87: Data collection
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.87	' (a)	
		he agency collect accurate, uniform data for every allegation of sexual abuse at facilities its direct control using a standardized instrument and set of definitions? \boxtimes Yes \square No
115.87	' (b)	
•		he agency aggregate the incident-based sexual abuse data at least annually? $\hfill\Box$ No

115	5.87 (c)		
	■ 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 □ No		
115	5.87 (d)		
	 ■ 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 □ No 		
115	5.87 (e)		
	■ Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) □ Yes □ No ☒ NA		
115	5.87 (f)		
	 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 ☐ No ☒ NA 		
Auditor Overall Compliance Determination			
	☐ Exceeds Standard (Substantially exceeds requirement of standards)		
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
	□ Does Not Meet Standard (Requires Corrective Action)		
Ins	structions for Overall Compliance Determination Narrative		
The facility collects accurate, uniform data for every allegation of sexual abuse and sexual harassment at its facility using a standardized instrument and set of definitions.			
A&C. The facility collects data for every allegation of sexual abuse and sexual harassment.			
<u>B.</u>	3. The Jail Administrator and Assistant Jail Administrator (PREA Coordinator) reviews the data annually.		
<u>D.</u>	The facility maintains, reviews, and collects data as needed from all available incident-based documents.		
<u>E.</u>	This paragraph is not applicable; the facility does not contract with a private facility for the confinement of its inmates.		
<u>F.</u>	This paragraph is not applicable; the Department of Justice has not requested agency data.		

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Facility PREA policy
- Completed Pre-Audit Questionnaire submitted by the Agency
- Interview with Assistant Jail Administrator Chris Burton (PREA Coordinator)
- Interview with Vivian Anderson (Programmer)

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

	The queened made zo a menor of the complete and the period		
115.88	(a)		
•	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? \boxtimes Yes \square No		
•	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? \boxtimes Yes \square No		
•	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? \boxtimes Yes \square No		
115.88	(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 $oxtimes$ Yes \oxtimes No		
115.88	(c)		
•	s 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? \boxtimes Yes \square No		
115.89	(d)		
•	■ 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 ✓ No		
Audito	Overall Compliance Determination		
	Exceeds Standard (Substantially exceeds requirement of standards)		
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		

	□ Does Not Meet Standard (Requires Corrective Action)
Instru	tions for Overall Compliance Determination Narrative
<u>A.</u>	The facility reviews data collected and uses the data for ongoing improvement and corrective action in its facility.
<u>B.</u>	The facility prepares an annual report that compares the current year's data and the previous years' data to continue to address sexual abuse and harassment.
<u>C.</u>	The facility completes an annual PREA report and publishes on their website:
<u>D.</u>	An explanation of redacted material is provided
• • • • •	Materials, Interviews, and Other Evidence Reviewed: Completed Pre-Audit Questionnaire submitted by the Agency Interview with Sheriff Todd Glander Interview with Assistant Jail Administrator Chris Burton (PREA Coordinator) Interview with Vivian Anderson (Programmer) Becker County website: http://www.co.becker.mn.us/dept/sheriff/PDFs/PREA Policy 08202020.pdf
Stan	lard 115.89: Data storage, publication, and destruction
All Ye	/No Questions Must Be Answered by the Auditor to Complete the Report
115.89	(a)
•	Does the agency ensure that data collected pursuant to § 115.87 are securely retained? $\ oxdot$ Yes $\ oxdot$ No
115.89	(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? \boxtimes Yes \square No
115.89	(c)
•	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? $oxtimes$ Yes \odots No
115.89	(d)
•	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 □ No

Audit	or Overall	Compliance Determination	
	□ E	xceeds Standard (Substantially exceeds requirement of standards)	
		eets Standard (Substantial compliance; complies in all material ways with the and and for the relevant review period)	
	_	oes Not Meet Standard (Requires Corrective Action)	
Instru	ctions for	Overall Compliance Determination Narrative	
<u>A.</u>	_ The Assistant Jail Administrator securely maintains documentation collected from standard 115.87.		
<u>B.</u>	The Agency's sexual abuse data is publicly distributed on the Agency's website: http://www.co.becker.mn.us/dept/sheriff/PDFs/PREA Policy 08202020.pdf		
<u>C.</u>	2. All personal identifiers are redacted before making the information public,		
<u>D.</u>	Policy dictates that sexual abuse data is maintained for a minimum of 10 years after the initial collection date.		
•	 Completed Pre-Audit Questionnaire submitted by the Agency Interview with Assistant Jail Administrator Chris Burton (PREA Coordinator) Interview with Vivian Anderson (Programmer) 		
		AUDITING AND CORRECTIVE ACTION	
Stan	dard 11	5.401: Frequency and scope of audits	
All Ye	s/No Ques	stions Must Be Answered by the Auditor to Complete the Report	
115.40	01 (a)		
•	agency, o	e prior three-year audit period, did the agency ensure that each facility operated by the or by a private organization on behalf of the agency, was audited at least once? (<i>Note:</i> onse here is purely informational. A "no" response does not impact overall compliance standard.) \boxtimes Yes \square No	
115.40	01 (b)		
•		e first year of the current audit cycle? (<i>Note: a "no" response does not impact overall ce with this standard</i> .) \square Yes \boxtimes No	

•	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.) \boxtimes Yes \square No \square NA	
•	each fa were a	is the third year of the current audit cycle, did the agency ensure that at least two-thirds of acility type operated by the agency, or by a private organization on behalf of the agency, udited during the first two years of the current audit cycle? (N/A if this is not the <i>third</i> year current audit cycle.) \square Yes \square No \boxtimes NA
115.40	1 (h)	
•		auditor have access to, and the ability to observe, all areas of the audited facility? $\hfill\Box$ No
115.40	1 (i)	
•		e auditor permitted to request and receive copies of any relevant documents (including nically stored information)? \boxtimes Yes \square No
115.40	1 (m)	
	Was th	be auditor permitted to conduct private interviews with inmates, residents, and detainees? $\hfill \square$ No
115.40	1 (n)	
113.40	' ('')	
•	lacktriangle Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? $oximes$ Yes $oximes$ No	
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instructions for Overall Compliance Determination Narrative		

This is Becker County Jail's second PREA Audit. On December 8, 2016, the Becker County Jail was found to be in full compliance with the Prison Rape Elimination Act (PREA) Standard. The facility transferring the PREA duties to the Assistant Jail Administrator with the upcoming retirement of the current PREA Coordinator. The soon-to-be-retired PREA Coordinator is experienced and knowledgeable. She has been thorough in completing the duties required from the PREA Coordinator. I was given full access to the facility and met privately with staff and inmates without interference. PREA audit posters in English and Spanish were posted six weeks before the audit and were hanging in all common areas throughout the jail. My name and address were visible to inmates. I received zero

that opened on March 29, 2019. 115.403 (f) 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 that there has never been a Final Audit Report issued.) \boxtimes Yes \square No \square NA **Auditor Overall Compliance Determination Exceeds Standard** (Substantially exceeds requirement of standards) \boxtimes Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period) **Does Not Meet Standard** (Requires Corrective Action) **Instructions for Overall Compliance Determination Narrative** The facility has the final audit report issued on December 8, 2016, posted on its website: http://www.co.becker.mn.us/dept/sheriff/PDFs/BECKER%20COUNTY%20PREA%20FINAL%20REPO RT.pdf

The contract agreement requires the facility to post a copy of the final PREA Audit Report within 90

correspondence during the audit process. Since the last PREA Audit, Becker County built a new jail

PREA Audit Report – V6.

days of receipt.

AUDITOR CERTIFICATION

I certify th	at:
\boxtimes	The contents of this report are accurate to the best of my knowledge.
\boxtimes	No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
	I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission. Auditors are not permitted to submit audit reports that have been scanned. See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Darnel Carlson	June 6, 2021	
Auditor Signature	Date	

PREA Audit Report – V6.

 $^{^1}$ See additional instructions here: $\underline{\text{https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110}$.

² See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.