

# PREA Facility Audit Report: Final

**Name of Facility:** Becker County Jail

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 01/21/2026

## Auditor Certification

The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Darnel Carlson	<b>Date of Signature:</b> 01/21/2026

## AUDITOR INFORMATION

<b>Auditor name:</b>	Carlson, Darnel
<b>Email:</b>	dmcarlson16@gmail.com
<b>Start Date of On-Site Audit:</b>	02/20/2024
<b>End Date of On-Site Audit:</b>	02/22/2024

## FACILITY INFORMATION

<b>Facility name:</b>	Becker County Jail
<b>Facility physical address:</b>	925 Lake Avenue, Detroit Lakes, Minnesota - 56501
<b>Facility mailing address:</b>	

## Primary Contact

<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

### **Warden/Jail Administrator/Sheriff/Director**

<b>Name:</b>	Paula Peterson
<b>Email Address:</b>	paula.peterson@co.becker.mn.us
<b>Telephone Number:</b>	218-847-2939 Ext.8

### **Facility PREA Compliance Manager**

<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

### **Facility Health Service Administrator On-site**

<b>Name:</b>	Advanced Correctional Healthcare
<b>Email Address:</b>	jailnurse@co.becker.mn.us
<b>Telephone Number:</b>	218-847-2939

### **Facility Characteristics**

<b>Designed facility capacity:</b>	186
<b>Current population of facility:</b>	62
<b>Average daily population for the past 12 months:</b>	57
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>What is the facility's population designation?</b>	Both womens/girls and mens/boys

<b>Age range of population:</b>	18-99
<b>Facility security levels/inmate custody levels:</b>	Minimum; Medium; Maximum
<b>Does the facility hold youthful inmates?</b>	Yes
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	48
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	1
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	30

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	Becker County Sheriff's Office
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	925 Lake Avenue, Detroit Lakes, Minnesota - 56501
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

<b>Agency Chief Executive Officer Information:</b>	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

<b>Agency-Wide PREA Coordinator Information</b>			
<b>Name:</b>	Christopher Burton	<b>Email Address:</b>	chris.burton@co.becker.mn.us

## Facility AUDIT FINDINGS

### Summary of Audit Findings

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

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

#### Number of standards exceeded:

0	
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#### Number of standards met:

45	
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#### Number of standards not met:

0	
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## POST-AUDIT REPORTING INFORMATION

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

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

<b>1. Start date of the onsite portion of the audit:</b>	2024-02-20
<b>2. End date of the onsite portion of the audit:</b>	2024-02-22

#### Outreach

<b>10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Identify the community-based organization(s) or victim advocates with whom you communicated:</b>	Lakes Crisis and Resource Center

### AUDITED FACILITY INFORMATION

<b>14. Designated facility capacity:</b>	186
<b>15. Average daily population for the past 12 months:</b>	57
<b>16. Number of inmate/resident/detainee housing units:</b>	13
<b>17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

<b>23. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	67
<b>24. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>25. Enter the total number of inmates/ residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>26. Enter the total number of inmates/ residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	1
<b>27. Enter the total number of inmates/ residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>28. Enter the total number of inmates/ residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>29. Enter the total number of inmates/ residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	0

<b>30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b>	No text provided.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b>	48

<p><b>37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>30</p>
<p><b>38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>1</p>
<p><b>39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>The auditor found nothing of concern to report.</p>
<h2>INTERVIEWS</h2>	
<h3>Inmate/Resident/Detainee Interviews</h3>	
<h4>Random Inmate/Resident/Detainee Interviews</h4>	
<p><b>40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>15</p>
<p><b>41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b></p>	<p><input checked="" type="checkbox"/> Age</p> <p><input checked="" type="checkbox"/> Race</p> <p><input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input checked="" type="checkbox"/> Length of time in the facility</p> <p><input checked="" type="checkbox"/> Housing assignment</p> <p><input checked="" type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>

<p><b>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b></p>	<p>At least one inmate was selected from each housing unit.</p>
<p><b>43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p><b>44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>The facility fully cooperated with the auditor's selection of inmates to be interviewed.</p>
<p><b>Targeted Inmate/Resident/Detainee Interviews</b></p>	
<p><b>45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>1</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<p><b>46. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:</b></p>	<p>0</p>

<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/detainees.</p> <p><input type="checkbox"/> The inmates/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/detainees).</b></p>	<p>The facility is approved to hold juvenile offenders for twenty-four hours, excluding weekends and holidays. The in-custody roster was reviewed, and no juvenile offenders were listed. During the on-site audit, no juvenile offenders were in the juvenile holding cell. The PREA Coordinator confirmed that no juveniles were being held during the onsite audit.</p>
<p><b>47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The pre-audit questionnaire did not identify any inmates who met the criteria under the targeted interview categories as physically disabled. Documents reviewed at the facility, observations onsite, and conversations with inmates and staff did not disclose any information about physically disabled inmates being housed there. I spoke with the PREA Coordinator to verify that there were no physically disabled inmates in the facility.</p>

<p><b>48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>1</p>
<p><b>49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The pre-audit questionnaire did not identify any inmates who met the criteria for the targeted interview categories of blindness or low vision. Documents were reviewed at the facility, and on-site observations were made. Conversations with inmates and staff did not reveal any information about blind or low-vision inmates being housed there. I spoke with the PREA Coordinator to verify that there were no blind or low-vision inmates in the facility.</p>
<p><b>50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>

<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The pre-audit questionnaire did not identify any inmates who met the criteria for the targeted interview categories for deaf or hard-of-hearing individuals. Documents were reviewed at the facility, and on-site observations were made. Conversations with inmates and staff did not reveal any information about deaf or hard-of-hearing inmates being housed there. I spoke with the PREA Coordinator to verify that there were no deaf or hard-of-hearing inmates.</p>
<p><b>51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The pre-audit questionnaire did not identify any inmates who met the criteria for the targeted interview categories for limited English individuals. Documents were reviewed at the facility, and on-site observations were made. Conversations with inmates and staff did not reveal any information about limited-English-proficient inmates being housed there. I spoke with the PREA Coordinator to verify that there were no limited-English-proficient inmates.</p>
<p><b>52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The pre-audit questionnaire did not identify any inmates who met the criteria for the targeted interview category who identified as lesbian, gay, or bisexual individuals. Documents were reviewed at the facility, and on-site observations were made. Conversations with inmates and staff did not reveal any information about inmates who identified as lesbian, gay, or bisexual being housed there. I spoke with the PREA Coordinator to verify that there were no inmates who identified as lesbian, gay, or bisexual.</p>

<p><b>53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The pre-audit questionnaire did not identify any inmates who met the criteria for the targeted interview category who identified as transgender or intersex. Documents were reviewed at the facility, and on-site observations were made. Conversations with inmates and staff did not reveal any information about inmates who identified as transgender or intersex being housed there. I spoke with the PREA Coordinator to verify that there were no inmates who identified as transgender or intersex.</p>
<p><b>54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The pre-audit questionnaire did not identify any inmates who reported sexual abuse in this facility. Documents were reviewed at the facility, and on-site observations were made. Conversations with inmates and staff did not reveal any information about inmates who reported sexual abuse in this facility being housed there. I spoke with the PREA Coordinator to verify that there were no inmates who reported sexual abuse in this facility.</p>
<p><b>55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The pre-audit questionnaire did not identify any inmates who disclosed prior sexual victimization during the risk screening. Documents were reviewed at the facility, and on-site observations were made. Conversations with inmates and staff did not reveal any information about inmates who disclosed prior sexual victimization during the risk screening being housed there. I spoke with the PREA Coordinator to verify that there were no inmates who disclosed prior sexual victimization during the risk screening in this facility.</p>

<p><b>56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>The pre-audit questionnaire did not identify any inmates in segregated housing at risk for sexual victimization. The PREA Coordinator said they have not used segregated housing for any inmate at risk of sexual victimization. The two staff members interviewed using the risk screening questionnaire said they have never had anyone in segregated housing for an inmate at risk of sexual victimization.</p>
<p><b>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>No text provided.</p>
<p><b>Staff, Volunteer, and Contractor Interviews</b></p>	
<p><b>Random Staff Interviews</b></p>	
<p><b>58. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>11</p>

<p><b>59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p><b>If "Other," describe:</b></p>	<p>Gender was considered for random staff interviews.</p>
<p><b>60. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p><b>a. Select the reason(s) why you were unable to conduct the minimum number of RANDOM STAFF interviews: (select all that apply)</b></p>	<p><input type="checkbox"/> Too many staff declined to participate in interviews.</p> <p><input type="checkbox"/> Not enough staff employed by the facility to meet the minimum number of random staff interviews (Note: select this option if there were not enough staff employed by the facility or not enough staff employed by the facility to interview for both random and specialized staff roles).</p> <p><input checked="" type="checkbox"/> Not enough staff available in the facility during the onsite portion of the audit to meet the minimum number of random staff interviews.</p> <p><input type="checkbox"/> Other</p>
<p><b>61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>All the staff members who worked during the three days of the on-site audit were interviewed.</p>

## Specialized Staff, Volunteers, and Contractor Interviews

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

<b>62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	9
<b>63. Were you able to interview the Agency Head?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>65. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>66. Were you able to interview the PREA Compliance Manager?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input type="checkbox"/> Other
<b>If "Other," provide additional specialized staff roles interviewed:</b>	Programmer Release Planner Training Officer
<b>68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>	2
<b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input type="checkbox"/> Religious <input type="checkbox"/> Other
<b>69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	1
<b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

<b>70. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	No text provided.
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## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

<b>71. Did you have access to all areas of the facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Was the site review an active, inquiring process that included the following:</b>	
<b>72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No

<p><b>75. Informal conversations with staff during the site review (encouraged, not required)?</b></p>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<p><b>76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b></p>	<p>The auditor has nothing additional to report.</p>

### **Documentation Sampling**

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

<p><b>77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b></p>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<p><b>78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b></p>	<p>Random inmate files were reviewed, as were random completed risk screenings and the inmates' participation in PREA education. The investigative file was reviewed. Also, staff training records and the training curriculum were reviewed.</p>

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

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

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

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

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

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

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

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	0	0	0	0
<b>Staff-on-inmate sexual abuse</b>	0	1	0	0
<b>Total</b>	0	1	0	0

### Sexual Harassment Investigation Outcomes

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

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

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

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

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

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

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

1

<p><b>86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
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#### Inmate-on-inmate sexual abuse investigation files

<p><b>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>

#### Staff-on-inmate sexual abuse investigation files

<p><b>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>1</p>
<p><b>91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p><b>92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
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#### **Sexual Harassment Investigation Files Selected for Review**

<p><b>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>a. Explain why you were unable to review any sexual harassment investigation files:</b></p>	<p>The facility reported that they had zero sexual harassment allegations reported.</p>
<p><b>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>

#### **Inmate-on-inmate sexual harassment investigation files**

<p><b>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<p><b>97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p><b>Staff-on-inmate sexual harassment investigation files</b></p>	
<p><b>98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p><b>100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p><b>101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b></p>	<p>No text provided.</p>

## SUPPORT STAFF INFORMATION

### DOJ-certified PREA Auditors Support Staff

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

Yes

No

### Non-certified Support Staff

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

Yes

No

## AUDITING ARRANGEMENTS AND COMPENSATION

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

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

## Standards

### Auditor Overall Determination Definitions

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

### Auditor Discussion Instructions

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

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b> <p>The agency has implemented a zero-tolerance policy, as detailed in policy #91. This policy addresses the agency's approach to preventing, detecting, and responding to all forms of sexual abuse and harassment and includes basic definitions. <b>XXX - need additional policy information</b></p> <p>The Assistant Jail Administrator (AJA) serves as the designated PREA coordinator, ensuring the agency's zero-tolerance policy is effectively implemented. The AJA reports having time and authority to develop, implement, and oversee the agency's efforts for PREA compliance. The AJA reports to the Jail Administrator, who reports to the Sheriff.</p> <p>The agency operates one facility.</p>

## **115.12 Contracting with other entities for the confinement of inmates**

	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>The agency does not contract with other agencies for the confinement of its confined persons. The agency contracts with the Minnesota Department of Corrections (DOC) to house offenders eligible for work release and the ICWC programs. The agency also has a housing contract with the United States Marshall Office.</p>

<b>115.13</b>	<p><b>Supervision and monitoring</b></p>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>The facility reports on the PAQ that the average daily population is 63 confined persons. On the first day of the onsite audit, there were 67 confined persons in custody. The staffing plan is based on 120 confined persons. The staffing plan is based on 120 confined persons. The facility has an alternate staffing plan based on 168 confined persons, which is the facility's maximum capacity. The staffing plan review includes considerations outlined in paragraph (a) of this standard and the approval from the Commissioner of Corrections as outlined in Minnesota 2911 Rules (2911.0900). The programmer, release planner, and additional staff are scheduled Monday - Friday to cover higher-activity times (court and programming). Court officers, the programmer, and the release planner were on duty during the on-site audit.</p> <p>The facility reported on the PAQ that there were no deviations from the staffing plan: part-time correctional officers and overtime cover open shifts.</p> <p>The Jail Administrator and Assistant Jail Administrator (PREA Coordinator) conduct a comprehensive annual review of the staffing plan. This review, as mandated by Minnesota 2911 Rules (2911.0900), ensures that the staffing plan is always in line with the facility's needs and is documented to indicate its thoroughness and appropriateness.</p> <p>Facility policy #91 requires supervisory staff to conduct and document unannounced rounds. It prohibits staff members who are aware of the rounds from alerting other staff as to when or where the rounds are occurring unless they are related to the facility's legitimate operational needs. The Sergeants conduct unannounced rounds on every shift, covering all periods. The Sergeant interviewed explained the process of completing unannounced rounds. Random video footage and the unannounced round log were reviewed onsite.</p> <p>The facility's policy #91, staffing coverage plan, staffing plan review, facility schedule, Minnesota 2911.0900 rules, and interviews with the Jail Administrator, Assistant Jail Administrator, and Sergeant demonstrated compliance with this standard.</p>

115.14	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Facility policy #90, policy #91, and module #45 outline the requirements of this standard.</p>
	<p>The facility provided a 2024 facility usage report to verify the number of juvenile offenders temporarily housed there. The Minnesota Department of Corrections Inspection Unit inspected the facility from 02/24/22 to 03/04/22. The inspector conducted a Juvenile Justice and Delinquency Prevention Audit (JJDP) Audit and noted that based on the documentation provided, no violations of JJDP were found during the inspection.</p>
	<p>The facility has a "Rural Exception" that allows it to hold a delinquent juvenile for up to twenty-four hours, excluding holidays and weekends—facility policy # 90 and module #45 outline where the juvenile would temporarily be placed. The facility's design allows for proper sight and sound separation from adult confined persons (booking units #1 and #2 or holding rooms #1 or #2 in booking). The general practice of the facility is to hold juvenile offenders for a maximum of six hours. The agency has a contract with Clay County in Minnesota to house juvenile offenders.</p>
	<p>A review of facility policy #90, policy #91, module #45, the 2022 Minnesota Department of Corrections Facility Inspection Report, the facility usage report, the juvenile housing contract, and the facility tour demonstrated compliance with this standard.</p>

115.15	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The facility reported on the PAQ that no cross-gender strip searches or cross-gender pat searches of female confined persons were conducted in the past twelve months. Except in exigent circumstances, the facility does not perform these searches.</p>
	<p>Article 66 and Module 17 prohibit staff from conducting cross-gender pat-down searches of female confined persons, except in exigent circumstances. The facility reported on the PAQ that male staff had conducted zero pat-down searches of female confined persons in the past twelve months. The twelve staff interviewed confirmed that at least one male and one female corrections officer are always on duty. The general practice in the facility is to conduct same-sex pat-down searches. Four female persons were interviewed and confirmed that they hadn't been prohibited from attending activities outside the housing unit. The four persons confirmed that</p>

there is always a female officer on duty, and male staff do not search female persons.

Module 19 prohibits cross-gender change-out searches of confined persons. If there is reasonable suspicion that a strip search is necessary, the facility requires staff to complete a Strip Search Form and forward it to the Sergeant.

Article 91 ensures that confined persons can shower, perform bodily functions, and change clothing in privacy; the article also requires a staff of the opposite gender to announce their presence when entering an opposite-gender housing unit. The staff interviewed confirmed that confined persons are given privacy, but staff are not consistent in announcing their presence when entering an opposite-gender housing unit. The sixteen confined persons interviewed said the staff was respectful of their privacy. Still, the staff of the opposite gender does not consistently announce their presence when entering opposite-gender housing units.

The twelve staff interviewed confirmed they would not search or physically examine a transgender or intersex confined person for the sole purpose of determining a person's genital status.

The facility reported on the PAQ that all the staff were trained to conduct cross-gender pat searches and searches of transgender and intersex confined persons. During interviews, staff were able to explain how they would conduct cross-gender, transgender, and intersex pat searches. The facility has modules that explain, step-by-step, how to conduct proper pat-down searches. The facility has a "transgender preference form" that is completed by both staff and the confined person to verify their preference for searches.

Interviews with staff and confined persons confirmed that staff of the opposite gender did not consistently announce their presence before entering a housing unit of the opposite gender.

To comply with this standard, the facility should retrain staff on the policy requiring them to announce their presence when entering a housing unit that houses opposite-gender housing units. To verify compliance, staff should sign an acknowledgment confirming receipt and understanding of the training. Facility supervisory staff should conduct random checks to confirm that staff are complying with the policy. The auditor will schedule a return visit to the facility to interview staff and confined individuals.

A return visit to the facility was conducted on September 20, 2024. Staff and confined persons were interviewed to confirm that staff were announcing their presence when entering housing units of the opposite gender. The confined persons reported that the staff started announcing themselves right after I left the first time. Staff were educated on the purpose of the announcement.

Article 91, Modules #16, #17, and #19, Article 66, Article 43, and a copy of the Transgender Preference Form, along with interviews with twelve staff members and sixteen confined persons, demonstrated compliance with this standard.

115.16	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The facility contracts with Language Line to accommodate confined individuals with limited English proficiency. Persons are given a texting device with multiple language options to facilitate reading the handbook for a confined person. Kiosks in each housing unit offer multiple language options for individuals with disabilities to access the handbook and orientation materials. Hard copies of documents are available in Spanish, and a staff member is always available to verbally orient confined persons with intellectual disabilities, blindness, or limited reading skills.</p>
	<p>The facility has a TTI/TTD unit to communicate with deaf and hard-of-hearing individuals confined there. The facility completes a checklist to ensure that these persons are provided with accommodations while they are housed there.</p>
	<p>The twelve staff interviewed would not use an inmate to provide interpreter services or any other assistance to report an allegation of sexual abuse or harassment.</p>
	<p>Paragraph (c) of this standard requires a facility policy that prohibits using 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 the inmate's safety, the performance of the first-responder duties, or the investigation of the inmate's allegations.</p>
	<p>To comply with this standard, the facility should add to its policy verbiage prohibiting the use of 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 the inmate's safety, the performance of the first-responder duties, or the investigation of the inmate's allegations.</p>
	<p>Corrective action response, the facility updated article #84 to include the required verbiage for paragraph (c)</p>

115.17	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Facility practice prohibits hiring or promoting staff members or hiring contractors who may have contact with confined persons who have engaged in the prohibited conduct specified in paragraph (a) of this standard. Any incidents of sexual harassment will be considered in determining whether to hire or promote anyone or retain the</p>

services of any contractor who may have contact with confined persons.

A comprehensive criminal background check is conducted on all potential new employees, contractors, and volunteers. This check is performed through the Minnesota Bureau of Criminal Apprehension (BCA) and covers local, Federal, State, and predatory offender registers. The Jail Administrator has confirmed that these checks are standard for the hiring process. Random files of new and long-term employees were reviewed to show compliance with this paragraph. The medical and food service contractors undergo the same rigorous process, with their potential employees' fingerprint cards submitted to the BCA for a comprehensive background check. The contracted vendor then provides the facility with a copy of the completed background for final approval. The agency makes its best effort to contact prior employers regarding a potential new hire during the background process.

A comprehensive criminal background check is conducted on all potential new employees, contractors, and volunteers. This check is performed through the Minnesota Bureau of Criminal Apprehension (BCA) and covers local, Federal, State, and predatory offender registers. The Jail Administrator has confirmed that these checks are a standard part of our hiring process. Random files of new and long-term employees were reviewed to show compliance with this paragraph. The medical and food service contractors undergo the same rigorous process, with their potential employees' fingerprint cards submitted to the BCA for a comprehensive background check. The contracted vendor then provides the facility with a copy of the completed background for final approval. The agency makes its best effort to contact prior employers regarding a potential new hire during the background process.

The facility conducts background checks on employees every 5 years, maintaining a spreadsheet documenting when each background check is completed. The medical and food service contractors undergo a background check every five years; the contracted vendor then provides the facility with a copy of the five-year background check. The Jail Administrator has confirmed that background checks are performed on employees and contractors every five years.

New applicants and staff applying for promotions...

Facility article #04 explains the expected code of conduct and that providing false information or material omissions is grounds for termination.

Any requests for information from an institutional employer regarding a former employee's prior misconduct will be shared upon receipt of a signed release of information, unless prohibited by law.

Paragraph (a) requires the information listed in (1), (2), and (3) to be outlined in the policy. *Currently, the policy includes information listed in (1) and (2).*

To comply with this standard, the facility should add (3) outlined in paragraph (a) to its policy.

**Corrective action taken: the facility updated article #91 (page 5) to include**

**#3 in paragraph (a) "Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section."**

Paragraph (b) requires the information listed in paragraph (b) to be outlined in the policy. *Currently, the policy does not include the information listed in paragraph (b).*

To comply with this standard, the facility should add information outlined in paragraph (b) to its policy.

**Corrective action taken, the facility updated article #91 (page 5) to include that the Becker County Jail shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or enlist the services of any contractor, who may have contact with inmates.**

Paragraph (c) requires the information listed in paragraph (c) to be outlined in the policy. *Currently, the policy does not include the information listed in paragraph (c).*

To comply with this standard, the facility should add information outlined in paragraph (c) to its policy.

**Corrective action taken: the facility updated article #91 (page 5) that before hiring new employees, who may have contact with inmates, Becker County Jail shall perform a criminal background records check, and consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignations during a pending investigation of an allegation of sexual abuse.**

Paragraph (d) requires the information listed in paragraph (d) to be outlined in the policy. *Currently, the policy does not include the information listed in paragraph (d)*

To comply with this standard, the facility should add information outlined in paragraph (d) to its policy.

**Corrective action taken: the facility updated article #91 (page 5) to state that the Becker County Jail shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates.**

Paragraph (e) requires the information listed in paragraph (e) to be outlined in the policy. *Currently, the policy does not include the information listed in paragraph (e).*

To comply with this standard, the facility should add information outlined in paragraph (e) to its policy.

**Corrective action taken: the facility updated article #91 (page 5) to state that the Becker County Jail shall conduct criminal background record checks at least every five years for current employees and contractors.**

115.18	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The facility reports in the PAQ that since the last PREA audit, the agency has not acquired a new facility or completed any substantial modifications to the building. Becker County opened its new facility on March 29, 2019. The Jail Administrator confirmed that the safety of confined persons was considered during the planning of the new facility.</p>
	<p>The facility reports in the PAQ that since the last PREA audit, the agency has not added additional cameras since the previous PREA audit. The electronic video system was checked during the onsite audit, and all cameras were fully operational. The facility design allows additional visual staff supervision in the hallways, programs, and central housing units.</p>
	<p>The Lieutenant and Jail Administrator are resolute in the agency's commitment to ensuring the safety and security of all facility members, including staff, visitors, and confined persons.</p>

115.21	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Becker County Sheriff's Office licensed investigators will conduct criminal investigations into allegations of sexual abuse and harassment. The twelve staff members explained their duties as first responders. Correctional staff are not trained to collect evidence; they are responsible for securing the scene until an investigator or licensed law enforcement officer arrives.</p>
	<p>Forensic medical examinations are conducted in the emergency department at Essentia Health - St. Mary's Detroit Lakes (<a href="https://www.essentiahealth.org/find-facility/find-facility/essentia-health-st-marys-detroit-lakes">https://www.essentiahealth.org/find-facility/find-facility/essentia-health-st-marys-detroit-lakes</a>) in Detroit Lakes, Minnesota, or Essentia Health - Fargo (<a href="https://www.essentiahealth.org/find-facility/essentia-health-fargo">https://www.essentiahealth.org/find-facility/essentia-health-fargo</a>) in Fargo, North Dakota. Both locations have SANE nurses available to conduct examinations. A uniform evidence protocol is used when performing examinations. The emergency department would contact an advocate for the alleged victim. As outlined in policy #4.3.1.1, treatment services are provided at no financial cost to the victim.</p>
	<p>The facility provides contact information for Lakes Crisis and Resource Center (<a href="https://www.lakescrisis.com/">https://www.lakescrisis.com/</a>) in Detroit Lakes, Minnesota, to provide emotional support services. Staff at the Lakes Crisis and Resource Center confirmed, upon</p>

	<p>request of a victim, that an advocate would provide emotional support services.</p> <p>The facility reports that zero forensic medical examinations have been conducted in the past twelve months.</p>
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<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Facility policy #91 ensures that any allegation that appears to be criminal is forwarded to the Becker County Sheriff's Office for investigation. The Lieutenant confirmed that all allegations of sexual abuse and sexual harassment are investigated. Claims that appear to be criminal are referred to a licensed investigator from the Becker County Sheriff's Office. Over the past 12 months, 4 allegations were reported, resulting in 4 administrative investigations.</p> <p>The agency publishes the information on its website: <b>chrome-extension://efaidnbmnnibpcajpcgkclefindmkaj/https://co.becker.mn.us/dept/sheriff/PDFs/PREA_Policy_02122025.pdf</b> and on posters located in the public lobby of the Sheriff's Office.</p> <p>To comply with this standard, the facility should add to article #91 that the facility ensures that an administrative investigation, criminal investigation, or both are completed for all allegations of sexual abuse and sexual harassment.</p> <p><b>Corrective action taken: the facility added to article #91 (page 9) that the Becker County Jail ensures that allegations of sexual abuse or harassment are referred to the Becker County Sheriff's Office for criminal investigation. Administrative allegations of sexual abuse and harassment will be investigated by the Becker County Jail.</b></p>

<b>115.31</b>	<b>Employee training</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>

<b>Auditor Discussion</b>	
<p>The facility's corrections articles 27 and 29 outline the training topics for new employees and all employees who may be in contact with confined persons receive, as outlined in paragraph (a) of this standard. Eleven staff members were interviewed, and their service tenure ranged from six months to twenty-one years. Staff with up to one year of service confirmed that they received PREA training during their initial field training program, and staff with over one year of service confirmed that they receive PREA training annually. The PREA coordinator provided copies of the PREA materials used in the training. The facility also uses the Minnesota Sheriff's Association (MSA) MNLET online training platform.</p> <p>The training is designed to meet the unique needs of individuals confined in the facility, including the differences between males and females in how they communicate, professional boundaries, and managing LGBTI individuals. The agency operates one facility that houses male and female confined persons. All employees receive the same training.</p> <p>Staff receive annual refresher PREA training. Additionally, staff receive yearly use-of-force training (which includes a refresher on cross-gender pat searches) and medical training, as well as quarterly emergency policy and procedure review, and monthly DTB trainings based on policy review and staff meetings where different training topics are discussed.</p> <p>Staff sign a training acknowledgement form, documenting receipt and understanding of the PREA training, which is maintained by the training officer in staff training files. Completed training certificates for training completed on the MNLETS platform are printed and stored in the staff training files by the training officer.</p> <p>The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, facility corrections articles 27 and 29, and signed training acknowledgment forms, training certificates, and completed training reports. Additionally, the classroom training curriculum and training pamphlets were reviewed, and interviews were conducted with the PREA Coordinator, training officer, and eleven correctional officers.</p>	

<b>115.32 Volunteer and contractor training</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
<p>The programmer is responsible for conducting PREA training for the volunteers. New volunteers are sent a flash drive with the PREA education information and volunteer handbook. The programmer meets with the volunteer to discuss and answer any questions about facility rules and PREA. The volunteer signs a training acknowledgment that the programmer keeps. The programmer provides a list of</p>	

approved volunteers.

Two volunteers were interviewed, and both confirmed that they had met individually with the programmer and discussed facility rules and PREA education. Both volunteers were advised to report any information to the programmer.

Food Services - Summit Food Services is the contracted provider and uses inmate workers in the kitchen. Summit Food Services requires staff to complete PREA training annually. The food service employees also sign a facility acknowledgment every year. The food service manager at the facility maintains the signed acknowledgments.

One contractor was interviewed, who confirmed that Summit Food Services requires employees to complete annual PREA training and sign a training acknowledgment, as well as a facility acknowledgment, every year.

Health Services - American Correctional Healthcare (ACH) is the contracted medical provider. ACH employees complete PREA training online through ACH's Sparks online training platform. Medical staff interviewed confirmed that they are required to complete annual PREA training through ACH. Completion certificates are maintained electronically.

The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, training curriculum, and pamphlets. Review of electronic and hard copy training certificates and interviews conducted with the programmer, two volunteers, and one contractor.

<b>115.33 Inmate education</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Over the past twelve months, the facility reported on the PAQ that 1371 confined persons were admitted. Out of these, 320 confined persons have stayed for more than thirty days. All confined persons receive initial PREA information during the booking process. The booking officer verbally explains the agency's zero-tolerance policy and who and how to report allegations or suspicions of sexual abuse or harassment. The individual is allowed to ask any questions before signing the form. The three staff members interviewed explained the process of educating individuals on the agency's zero-tolerance policy. Sixteen confined persons were interviewed. Nine individuals confirmed receiving initial PREA information during the booking process and signing the form. Six individuals had previous intakes and confirmed that the same PREA information was provided every time. One confined person wasn't sure.  When the confined person initially logs into the kiosk and texting device, they must

read and watch the PREA video and acknowledge the PREA education information before having full access to the kiosk or using the texting device. The PREA video and handbook are available at any time to confined persons on their texting devices and kiosks. The sixteen confined persons interviewed confirmed that they had to acknowledge the PREA statement and watch the PREA video before accessing other options on the kiosk and texting device. PREA posters are posted in each housing unit dayroom and other areas of the facility.

The facility contracts with Language Line to accommodate individuals with limited English proficiency who are confined. Texting devices, available to all confined individuals, enable text messaging and access to educational materials in both English and Spanish. Kiosks located in housing units offer options in both English and Spanish. The handbook and PREA video are available electronically on the kiosk and texting device.

The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, facility article 91, and the signed PREA documents, confirming the PREA video is on the texting devices, the inmate handbook, kiosk options, PREA posters displayed in the facility, as well as conducting interviews with staff, confined persons, and the PREA Coordinator.

<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Staff from the facility do not conduct PREA-related investigations. The Becker County Sheriff's Office (SO) has investigators who will conduct the investigations. The licensed investigator interviewed has 28 years of law enforcement experience and has received trauma-informed training.  To comply with this standard, the facility should add to article #91 - Specialized Training: Investigations - In addition to the general training provided to all employees pursuant to standard 115.31, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings. Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, Sexual abuse evidence collection in confinement settings, and the criteria and the evidence required to substantiate a case for administrative action or prosecution referral. The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting investigations of sexual abuse.

**Corrective action taken: The facility added to article #91 (page 12) that, in addition to the general training provided to all employees, the Becker County Jail shall ensure that its investigators have received specialized training described in this standard. The agency will document and maintain through employee signature or electronic verification that employees have received and understand the training.**

<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>All full- and part-time qualified health care and mental health care professionals who regularly work in the facility receive training listed in standard 115.31(a), as well as training that includes:</p> <ul style="list-style-type: none"><li>• Detecting and assessing signs of sexual abuse and harassment.</li><li>• Preserving physical evidence of sexual abuse.</li><li>• Responding effectively and professionally to victims of sexual abuse and sexual harassment.</li><li>• Reporting allegations or suspicions of sexual abuse and sexual harassment.</li></ul> <p>Nursing and mental health staff are contracted employees through Advanced Correctional Healthcare (ACH) who receive all required training listed in this standard on ACH's Sparks online training platform. Medical staff reviewed the training topics on the Sparks training platform.</p> <p>Forensic medical examinations are conducted at Essentia Health - Detroit Lakes or Sanford Medical Center in Fargo, ND.</p> <p>The medical and mental health staff interviewed stated that their training was completed on ACH's Sparks online training platform. Medical staff would report any information to the Sergeant on duty or follow the chain of command.</p> <p>The Sparks training completion certificates are maintained electronically, and the classroom training acknowledgment is signed in a hard copy.</p> <p>To comply with this standard, the facility should add to article #91 - Specialized Training: Medical and mental health care - All full- and part-time medical and mental health care practitioners who work regularly in the facility will be trained in:</p> <ul style="list-style-type: none"><li>• Detecting and assessing signs of sexual abuse and harassment.</li><li>• Preserving physical evidence of sexual abuse.</li><li>• Responding effectively and professionally to victims of sexual abuse and sexual harassment.</li></ul>

- Reporting allegations or suspicions of sexual abuse and sexual harassment.

Forensic medical examinations are not conducted at the Becker County Jail.

The agency shall maintain documentation that medical and mental health practitioners have received the training in standard 115.35 from the agency or elsewhere.

Medical and mental health care practitioners shall also receive the training mandated for employees under standard 115.31 or for contractors and volunteers under standard 115.32. Depending on the practitioner's status at the agency.

**Corrective action taken: the facility added to article #91 (page 12) in addition to the general training provided to all employees, all full and part-time medical and mental health care practitioners who work regularly in the facility shall be trained in the topics outlined in paragraph (a) of this standard. Also added to article #91 (page 12), medical practitioners providing services in the Becker County Jail will not conduct forensic medical examinations. For medical and mental health practitioners, the facility shall maintain documentation that they have received the specialized training outlined in this standard.**

<b>115.41 Screening for risk of victimization and abusiveness</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) (b) Article #91 (page 3) requires all confined persons to be assessed during an intake screening and upon transfer from another facility for their risk of being sexually abused by other confined persons or sexually abusive toward other confined persons within seventy-two hours of their intake. The intake officers complete the risk screening criteria during intake and within 72 hours of intake. Becker County is a small facility without designated staff to conduct risk screenings. The officer assigned to the officer's post in booking is responsible for completing the new intakes and completing the risk screening criteria. Two staff members were interviewed using the "<i>staff responsible for risk screening questionnaire</i>." Both staff members interviewed reported that a risk screening is completed on every new intake during the booking process and within seventy-two hours. The staff said they don't book more than one confined person at a time. In that case, one confined person would be placed on the lower tier, designated as a keep separate until the person can be booked into the jail. While on-site, the auditor observed a confined person being booked into the jail. The officer conducted the risk screening one-on-one, allowing for privacy. The officer and the confined person participated in a question-and-answer session. Fourteen of the sixteen confined persons interviewed confirmed that they were asked the risk screening questions. One person couldn't remember, and one person had been in the</p>

	<p>facility for fourteen months. A random selection (8) of confined persons' files was reviewed on-site. All files interviewed had a copy of the completed risk screening.</p> <p>(c) (d) (e) The risk screening criteria form was reviewed. The screening is objective, and the requirements of this standard are included, as outlined in paragraph (d) 1-10. The screening also considers prior acts of sexual abuse, prior convictions for violent offenses, and a history of previous institutional violence or sexual abuse as known to the agency. When asked, one staff member listed "sexual orientation" as one of the questions on the risk screening. The second staff member listed "if person is vulnerable", "person's own perception of vulnerability", and "sexual victimization".</p> <p>(f) Article #91 (page 3) outlines the facility's classification process. Within thirty days of the confined person's arrival at the facility, a Sergeant will complete a reclassification. Both staff members interviewed reported that a Sergeant reclassifies a confined person within twenty-one to thirty days of intake. A Sergeant who completes reclassifications was interviewed. New intakes are tracked, and a reclassification form is completed within twenty-one to thirty days. Reclassification forms were reviewed with the Sergeant on-site. Eight confined persons reported being reclassified, six confined persons had not been in the facility for thirty days, and two persons had been in the facility for over twelve months.</p> <p>(g) Article #91 (page 3) states, "An inmate's risk level will be reassessed due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Both staff members interviewed reported that a review would be completed if further information were received. The facility did not have any historic data to review.</p> <p>(h) Article #91 (page 3) states, "Inmates will not be disciplined for refusing to answer or not disclose complete information to questions regarding.</p> <ul style="list-style-type: none"> <li>• Whether or not the inmate has a mental, physical, or developmental disability;</li> <li>• Whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming;</li> <li>• Whether or not the inmate has previously experienced sexual victimization;</li> <li>• The inmate's perception of vulnerability."</li> </ul> <p>The two staff members interviewed said that a confined person is not disciplined for refusing to answer or not disclosing complete information on the risk screening.</p> <p>(i) The PREA Coordinator and the two staff members interviewed reported that the risk screenings are securely maintained in a confined person's folder. The folders are stored in a lockable cabinet at the officer's workstation. The PREA Coordinator confirmed that staff receive annual training on securing private data.</p> <p>The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91, the criteria screening form, completed screening forms, and observing a new intake process that includes completing the risk</p>
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	screening—interviews with the PREA Coordinator, staff responsible for risk screenings, and confined persons.
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<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) (b) The facility uses the risk screening criteria form and a points-based housing classification form to make individualized determinations for housing assignments. Staff complete the risk screening and housing classification during the booking process. The housing classification determines the custody level (minimum, medium, maximum) based on current and previous charges, escape history, institutional disciplinary history, alcohol and drug use, and certain stability factors. The answers are assigned points, and the total points determine custody level. The facility can override the custody level. The risk screening is based on yes/no answers and staff observations. A "yes" answer to the person being a victim or abuser flags the individual to review if a housing classification needs to be overridden. The PREA Coordinator confirmed that the screenings are used to identify at-risk confined persons immediately, and two staff members who conduct risk screenings both reported that they are used to determine safe housing.</p> <p>(c) Article #91 (page 3-4) states, "When deciding whether to assign a transgender or intersex inmate to a female or male housing unit, it will be considered on a case-by-case basis whether a placement would ensure the inmate's health and safety. In making housing and programming assignments, the facility shall consider on a case-by-case basis whether placement of a transgender or intersex inmate would present management or security problems." The PREA Coordinator and staff members interviewed reported that an individual determination would be made when determining placement for a transgender or intersex confined person. Jail administration would review the relevant information and speak with the individual before making a final decision on where to house the individual. During the on-site audit, there were no confined persons who identified as transgender or intersex in the facility. The PREA Coordinator and staff were asked if there had been a transgender person or an intersex person in the facility. It was reported that there hadn't been a transgender or an intersex confined person in the facility in the past twelve months. The PREA Coordinator reported that they have not had a transgender or intersex confined person in custody for an extended length of stay, but would follow the policy.</p> <p>(d) Article #91 (page 4) requires that placement and programming assignments for each transgender or intersex confined person shall be reassessed at least twice each year to review any threats to the confined person's safety. The PREA Coordinator reported that they have not had a transgender or intersex confined person in custody long enough to reassess placement and programming assignments, but would follow their policy.</p>

(e) The two staff members responsible for risk screenings said that a transgender or intersex confined person's own views with respect to their own safety will be given serious consideration.

(f) All the showers in the facility are private. The PREA Coordinator and staff members responsible for risk screening verified that all the showers in the facility are private. Still, they would let the transgender or intersex confined persons use the shower in the booking area.

(g) The facility is not subject to a consent decree. The PREA Coordinator confirmed that housing assignments are determined on a case-by-case basis in accordance with facility policy.

The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91, the housing classification, the risk screening criteria form, and observations from the on-site audit, including interviews with the PREA Coordinator and two staff members responsible for risk screenings.

<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) Article #91 (page 4) states, "inmates at risk for sexual victimization shall not be placed in involuntary segregated housing unless the jail has assessed all available alternatives and has determined that there is no available alternative means of separation from likely abusers. If an assessment cannot be conducted immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment." The facility reported on the pre-audit questionnaire that there have been zero confined persons at risk of sexual victimization who were held in involuntary segregated housing in the past twelve months for one to twenty-four hours, awaiting completion of assessment.</p> <p>(b) Article #91 (page 4) states, "inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document.</p> <ul style="list-style-type: none"> <li>• The opportunities that have been limited;</li> <li>• The duration of the limitation;</li> <li>• The reasons for such limitations.</li> </ul> <p>The Minnesota Department of Corrections (DOC) 2911 administrative rules governing jails (2911.2800) require a facility to have a written policy and procedure stating that</p>

whenever an inmate in administrative segregation is deprived of any usually authorized item or activity, a report of action is made and forwarded to the facility administrator or designee. Becker County is a small facility without designated staff to monitor the segregated housing unit. The officer assigned to the segregated housing post is responsible for conducting well-being checks and interacting with the confined persons. Three staff members interviewed who have been assigned to the segregated housing unit post all reported that they have not experienced anyone housed in segregated housing for PREA-related reasons. All three officers also confirmed that they are required to write an incident report if any opportunities are limited, and to include the reasons for the limitation and its duration. The facility did not have any current or historic documentation to review on confined persons being placed in segregated housing for the risk of sexual victimization, or who allege to have suffered sexual abuse.

(c) As outlined in article #91 (page 4), confined persons vulnerable to sexual abuse will be assigned involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such assignment shall not ordinarily exceed thirty days. The facility reported on the pre-audit questionnaire that there have been zero confined persons at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement. The Jail Administrator said that involuntary segregation has never been used to place a confined person vulnerable to sexual abuse. She confirmed that if involuntary segregated housing were used, Article #91 would be followed.

(d) Article #91 (page 4) states, "if an involuntary segregated housing assignment is made, the facility shall document the basis for the facility's concern for the inmate's safety and why no alternative means of separation can be arranged." The facility did not have any case files to review. The Jail Administrator confirmed that article #91 would be followed if involuntary housing was used.

(e) Article #91 (page 4) states, "the facility shall review the inmate every thirty days to determine whether there is a continuing need for separation from the general population." The Minnesota Department of Corrections (DOC) administrative rules governing jails (2911.2800) require that a confined person placed in involuntary segregated housing be reassessed every seven days. Two of the staff members who supervise confined persons in segregated housing said that a review would happen every seven days. One staff member wasn't sure. The Jail Administrator confirmed a review would be completed every seven days.

The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, Article #91, DOC 2911 rules, DOC facility inspection report, and an interview with the Jail Administrator and three officers who work in segregated housing. The facility did not have any case files to review.

115.51	Inmate reporting
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>(a) The facility has established multiple internal ways for confined persons to privately report sexual abuse and sexual harassment, retaliation by other confined persons or staff for reporting sexual abuse or sexual harassment, and staff neglect that may have contributed to such confined persons. Confined persons may report concerns:</p>
	<ul style="list-style-type: none"> <li>• Request forms</li> <li>• Verbally</li> <li>• Anonymously</li> <li>• In writing</li> <li>• Through a third-party reporting</li> <li>• Contacting Lakes Crisis Center</li> </ul>
	<p>The handbook (page 2) and the Tennessee Warning explain the multiple ways a confined person can privately report sexual abuse and sexual harassment, retaliation by other confined persons or staff for reporting sexual abuse or sexual harassment, and staff neglect that may have contributed to such confined persons. The handbook is available on the kiosk in each housing unit and on the texting devices given to confined persons. The facility has posters throughout about the zero-tolerance policy and reporting options. Of the sixteen confined persons interviewed, eight would report to a staff member, four would submit a grievance or kite on the kiosk, one would report in writing, one would call the hotline, and two claimed not to know but said they know where the information is. The majority of the confined persons listed more than one way they can privately report allegations. Eleven staff members were interviewed, each staff member listed multiple ways that are available for confined persons to report sexual abuse and harassment privately.</p>
	<p>(b) The agency does not have a memorandum of understanding with Lakes Crisis Resource Center. The representative confirmed that they would accept confidential reports and forward them to the facility. The representative did not have a recent example, but recalled historic data of receiving a report from a confined person and immediately reporting it back to the agency. The Lakes Crisis Resource Center's phone number is in the handbook and on posters hanging next to the telephones in the housing units, and it is listed as a free call. The phone system was tested, and an advocate answered the call. The facility does not hold confined persons solely for civil immigration purposes. The PREA Coordinator confirmed that the Lakes Crisis Resource Center will accept reports from confined persons in the facility and will notify the facility. The majority of the confined persons listed the hotline as an option for reporting an allegation.</p>
	<p>(c) Article #91 (page 7) states, "staff shall accept reports made verbally, in writing, anonymously, and from third-parties, and shall promptly document a verbal report."</p>

Eleven staff members were interviewed, all the staff members confirmed they would accept reports made verbally, in writing, anonymously, and from third-parties, and would document verbal reports as soon as possible. Sixteen confined persons were interviewed and fourteen confirmed they knew they could make an anonymous report.

(d) Article #91 (page 7), states that staff can privately report sexual abuse to their supervisor and jail administration. Staff are informed on how to submit private reports in article #91 (page 7). The eleven staff members stated they would report to a supervisor.

The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (pages 6-7), handbook, Tennessee warning, posters, testing the phone system, And interviews with staff members, PREA Coordinator, confined persons, and representative from the Lakes Crisis Resource Center.

<b>115.52 Exhaustion of administrative remedies</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) The facility is not exempt from this standard. The grievance process is outlined in Article #91 (page 6), the intake orientation form, and the handbook (page 15).</p> <p>(b) As outlined in article #91 (page 6), the intake orientation form, and the handbook (page 15), there is no time limit for a confined person to submit a grievance regarding an allegation of sexual abuse. The policy, intake orientation form, and handbook explain that grievances related to sexual abuse and harassment may be submitted to any staff member at any time. Also, the confined person does not have to use an informal grievance process to attempt to resolve with staff an allegation of sexual abuse or harassment.</p> <p>(c) As outlined in Article #91 (page 6), the intake orientation form, and the handbook (page 15), the confined person does not have to give the grievance to a staff member who is the subject of the complaint, and the grievance will not be referred to a staff member who is the subject of the complaint.</p> <p>(d) Article #91 (page 6) states, "the jail shall issue a final decision within ninety days of the initial filing of the grievance. The jail may claim an extension of up to seventy</p>

days for the response if the normal time period is insufficient to make the appropriate decision. The jail shall notify the inmate in writing of any such extension and provide a date by which a decision shall be made. At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for the reply, the inmate may consider the absence of a response to be a denial at that level." The facility reported on the pre-audit questionnaire that one grievance was reported in the past 12 months. A grievance alleging that a staff member inappropriately touched the reporting party during a pat-down search was reviewed with the PREA Coordinator. The final determination was unfounded after reviewing the camera footage of the search. The response was provided to the reporting party within five days.

- (e) As outlined in article #91 (page 6) and the intake orientation form, third parties, including fellow inmates, staff members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of the inmate. If a third party files such a request on behalf of the inmate. The alleged victim must agree to have the request filed on their behalf. The alleged victim must personally pursue any subsequent steps in the administrative process. If the alleged victim refuses to have the request processed on their behalf, the alleged victim's decision will be documented in the incident report. The facility reported on the pre-audit questionnaire that there have been zero grievances alleging sexual abuse by a third party, and where the inmate refused third-party assistance, filed in the past twelve months.
- (f) As outlined in Article #91 (page 6), inmates alleging a substantial risk of imminent sexual abuse may submit an emergency grievance to a supervisor. An initial response will be given to the inmate within forty-eight hours. The Jail Administrator or designee will issue a final decision within five days. The facility reported on the pre-audit questionnaire that no emergency grievances have been filed in the past twelve months.

- (g) As outlined in Article #91 (page 6), the jail may discipline inmates for filing a grievance alleging sexual abuse only if the jail can demonstrate the inmate filed the grievance in bad faith.

The PREA Coordinator explained that the facility has a four-person grievance committee. The committee members consist of a Sergeant and three correctional staff members. The facility's process is that correctional staff members handle the initial grievance, and the Sergeant responds to the first appeal. If the person is not satisfied with the response, they can appeal to the Assistant Jail Administrator (PREA Coordinator), who makes the final determination. Grievances can be submitted on paper and electronically. The person seals the grievance in an envelope, which is the practice for all written grievances, and gives the sealed envelope to the officer. Electronic grievances are rights-based, with access provided to the grievance committee and jail administration.

The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (pages 6 and 7), the handbook, the kiosk tab, the paper

	grievance form, and the grievance from the investigative file, and by discussing the process with the PREA Coordinator.
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<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>(a) Article #91 (pages 8-9) The Becker County Jail shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by providing inmates with mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or National victim advocacy or rape crisis organizations. The agency does not house confined persons detained solely for civil immigration purposes. The information is listed in the handbook and posted next to the telephones. The agency does not have a memorandum of understanding (MOU) with the Lakes Crisis and Resource Center (<a href="https://www.lakescrisis.com/">https://www.lakescrisis.com/</a>) located in Detroit Lakes, Minnesota. The Lakes Crisis and Resource Center's representative confirmed that they will provide advocacy services for individuals confined in the Becker County Jail. The PREA Coordinator confirmed that arrangements would be made for a confined person to meet privately with the advocate in the facility. The majority of the confined persons knew there was a hotline number to call. Some of the confined persons said they hadn't needed any services, but knew they were available and would check the posted list of telephone numbers.</p> <p>(b) The Tennessee Warning, handbook, and posters state that the call to the Lakes Crisis and Resource Center is private. The telephone system was tested, the number connected as a free call, and connected to the Lakes Crisis and Resource Center. Free calls on the phone system are not recorded. The confined persons interviewed were asked if they knew if a call to the hotline number would be private. Most of the confined persons said that free calls are not monitored.</p> <p>(c) The agency does not have a memorandum of understanding (MOU) with the Lakes Crisis and Resource Center. The representative from the center confirmed that they would provide services to confined persons in the facility without an MOU.</p> <p>The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (pages 8-9), the handbook, the Tennessee Warning, posters, testing the phone system, and interviews with the PREA Coordinator, confined persons, and a Lakes Crisis and Resource Center representative.</p>

<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard

<b>Auditor Discussion</b>	
<p>(a) The agency has set up different ways to receive third-party reports of sexual abuse and sexual harassment of confined persons. The third-party reporting information and a third-party reporting form are posted on the website.</p> <p>The agency publicly distributes third-party reporting information on its website:  <b>( chrome-extension://efaidnbmnnibpcajpcgkclefindmkaj/https://co.becker.mn.us/dept/sheriff/PDFs/PREA_Policy_02122025.pdf()</b></p> <p><b>(chrome-extension://efaidnbmnnibpcajpcgkclefindmkaj/https://co.becker.mn.us/dept/sheriff/PDFs/PREA%20Reporting%20Form%202020.pdf)</b></p> <p>The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page 6), the agency website, and calling the Lakes Crisis and Resource Center.</p>	

<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) Article #91 (page 7) requires any staff member who has knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment; retaliation against confined persons or staff who reported such an incident; and any staff neglect that may have contributed to such incident or retaliation, shall immediately report the incident or retaliation to their supervisor or any other supervisor. Eleven staff members were interviewed, and all said they would report the information to their Sergeant. If their Sergeant were not available, they would report to another supervisor or follow the chain of command. The minimum staffing requirement for the facility is having a Sergeant on-site twenty-four hours a day, seven days a week. The Jail Administrator and Assistant Jail Administrator (PREA Coordinator) schedule their shifts to cover ten hours in the facility Monday through Friday.</p> <p>(b) Article 91 (page 7) requires staff to report to their supervisor or any other supervisor. The Coordinated Response Plan - <b>B. Following Suspected Or Alleged Incident of Sexual Abuse</b> #7: "Share information related to the incident with only those people who need to know in order to ensure the survivor's safety, conduct the investigation, or provide treatment to the survivor or alleged perpetrator." The eleven staff members interviewed would report information only to their Sergeant, another Sergeant, or jail administration.</p> <p>(c) A facility nurse was interviewed and reported that confined persons are informed of their duty to report and their limitations of confidentiality before starting the initial health assessment. The nurse has not received a report of a confined person being sexually abused or sexually harassed. She has taken reports of outside sexual abuse</p>

	<p>or harassment that happened in the community.</p> <p>(d) The Jail Administrator and PREA Coordinator reported that any allegation of an underage or vulnerable adult would be reported to designated State or local services agencies under mandated report laws. Becker County investigators will be contacted immediately to begin the mandatory reporting process. The facility did not have any current or historic documentation of an underage or a vulnerable adult alleging sexual abuse or harassment.</p> <p>(e) The Jail Administrator confirmed that all allegations of sexual abuse and sexual harassment, including third-party and anonymous sources, are reported to the Sheriff's Office investigators. The Sheriff's Office will assign an incident report (ICR) number to the investigated allegation. The facility did not have any criminal complaints investigated in the past twelve months to review. The investigator confirmed that an ICR would be assigned to an allegation from the jail.</p> <p>The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, Article #91 (page 7), one investigation file, the coordinated response plan, and interviews with the Jail Administrator, PREA Coordinator, staff, medical staff, and investigator.</p>
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<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The facility reported in the PAQ that there had been zero instances where the facility determined a confined person was subject to a substantial risk of imminent sexual abuse in the past twelve months.</p> <p>Facility article #91 requires staff to take immediate action to protect a confined person who is believed to be subject to a substantial risk of imminent sexual abuse.</p> <p>The Lieutenant, Jail Administrator, and twelve staff interviewed said they would move the confined person to a safe area.</p>

<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) (b) Article #91 (page 11) requires the Jail Administrator or designee, upon</p>

receiving an allegation that an inmate was sexually abused while confined at another facility, to notify the head of the agency where the alleged abuse occurred as soon as possible, but no later than seventy-two hours after receiving the allegation.

The facility reported on the pre-audit questionnaire that it received zero allegations of sexual abuse from another confinement facility. The facility also reported on the pre-audit questionnaire that it received one allegation from a confined person being abused or harassed at another facility.

The allegation was reviewed. The facility completed a victim form and reported the information to the agency where the abuse was alleged to have occurred. The allegation was reported to the other agency within seventy-two hours and documented.

(c) The article requires that the notification be documented.

(d) Article #91 (page 9) requires a criminal, administrative, or both investigations to be completed for all allegations of sexual abuse or sexual harassment. The Sheriff and Jail Administrator confirmed that a report from another agency that a confined person was sexually abused or harassed at the Becker County Jail will be investigated.

The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page), notification to another agency, and interviews with the Sheriff and Jail Administrator.

<b>115.64 Staff first responder duties</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	(a) The facility reported on the pre-audit questionnaire receiving zero allegations that a confined person was sexually abused in the past twelve months.
<b>Article # 91 (page 7) Immediate Steps After Receiving Report of Incident:</b>	
<ul style="list-style-type: none"><li>• Separate the alleged victim and abuser.</li><li>• Preserve and protect the crime scene by securing the immediate area until evidence is collected by an investigator or deputy.</li><li>• If the abuse occurred within a time period that still allows for the collection of physical evidence - ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating.</li><li>• Security staff who receive a report of alleged sexual abuse will follow and complete a first responder Sexual Assault Response Checklist.</li><li>• The on-duty supervisor or designee will follow and complete an On Duty</li></ul>	

Supervisor or Designee Sexual Assault Response Checklist.

The first responder sexual assault response checklist includes a section for staff to request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating.

(b) Article #91 (page 7) states, "when the first responder is not a security staff member, they should request that the alleged victim not take any action that could destroy physical evidence, and then notify security staff."

During their interviews, the eleven staff members were asked to explain the steps they would follow as first responders. The majority were able to explain the steps; a few could explain some of the steps. The first responder checklist and supervisor checklist are available electronically and easily accessible to all staff members. The facility also has an abbreviated version of the coordinated response plan that focuses on the duties of the first responder, also readily available to staff.

The supervisor completes the supervisor response checklist to verify that all steps of the first responder coordinated response and notifications have been completed and documented.

The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page 7), the first-responder and supervisor checklists, the abbreviated version of the coordinated response plan, and interviews with jail staff.

<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	The agency has developed a comprehensive Coordinated Response Plan to coordinate actions taken in response to an incident of sexual abuse. The plan outlines the responsibilities of staff first responders, medical staff, investigators, community partners, and facility leadership. The facility has a Facility Coordinated Response to Sexual Abuse sheet for staff to follow, a first responder checklist, and a supervisor checklist to complete.

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
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	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	The Lieutenant confirmed that all union contracts that have been renewed include verbiage that the employer maintains the right to reassign or place an employee on paid administrative leave pending the outcome of an investigation.

<b>115.67</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) Article #91 (page 10) It is the policy of the Becker County Jail to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. The Assistant Jail Administrator is the designee responsible for monitoring for retaliation. A sergeant is the designee responsible for monitoring for retaliation.</p> <p>(b) As outlined in article #91 (page 10), the conduct and treatment of inmates or staff who reported the sexual abuse of a confined person and of confined persons who were reported to have suffered sexual abuse will be monitored to see if there are changes that may suggest possible retaliation. The Sheriff and Jail Administrator said that protective measures, including housing changes, transfers to another facility, and post-reassignment procedures for staff, would be considered. Emotional support would be offered.</p> <p>(c) As outlined in article #91 (page 10), for at least ninety days following a report of sexual abuse, the designated staff member will monitor for retaliation. The Sheriff and Jail Administrator said that monitoring would include reviewing disciplinary reports, changes to housing and program assignments for confined persons, and negative performance reviews or post-reassignments of staff members. Monitoring would continue beyond ninety days if the initial monitoring indicates a continuing need. The facility reported on the pre-audit questionnaire that no incidents of retaliation were known or suspected in the past twelve months.</p> <p>(d) In the case of confined persons, the assigned staff member responsible for monitoring would meet with the individual weekly.</p> <p>(e) The Jail Administrator confirmed that any individual who cooperates with an investigation and reports a fear of retaliation would be protected against retaliation.</p> <p>The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page 10), and interviews with the Sheriff and Jail Administrator. The facility did not have any current or historic files of monitoring for retaliation.</p>

<b>115.68 Post-allegation protective custody</b>	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>(a) Article #91 (page 4) states, "inmates at risk for sexual victimization shall not be placed in involuntary segregated housing unless the jail has assessed all available alternatives and has determined that there is no available alternative means of separation from likely abusers. If an assessment cannot be conducted immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment." The facility reported on the pre-audit questionnaire that there have been zero confined persons at risk of sexual victimization who were held in involuntary segregated housing in the past twelve months for one to twenty-four hours, awaiting completion of assessment.</p> <p>(b) Article #91 (page 4) states, "inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document.</p> <ul style="list-style-type: none"> <li>• The opportunities that have been limited;</li> <li>• The duration of the limitation;</li> <li>• The reasons for such limitations.</li> </ul> <p>The Minnesota Department of Corrections (DOC) 2911 administrative rules governing jails (2911.2800) require a facility to have a written policy and procedure stating that whenever an inmate in administrative segregation is deprived of any usually authorized item or activity, a report of action is made and forwarded to the facility administrator or designee. Becker County is a small facility without designated staff to monitor the segregated housing unit. The officer assigned to the segregated housing post is responsible for conducting well-being checks and interacting with the confined persons. Three staff members interviewed who have been assigned to the segregated housing unit post all reported that they have not experienced anyone housed in segregated housing for PREA-related reasons. All three officers also confirmed that they are required to write an incident report if any opportunities are limited, and to include the reasons for the limitation and its duration. The facility did not have any current or historic documentation to review on confined persons being placed in segregated housing for the risk of sexual victimization, or who allege to have suffered sexual abuse.</p> <p>(c) As outlined in article #91 (page 4), confined persons vulnerable to sexual abuse will be assigned involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such assignment shall not</p>

ordinarily exceed thirty days. The facility reported on the pre-audit questionnaire that there have been zero confined persons at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement. The Jail Administrator said that involuntary segregation has never been used to place a confined person vulnerable to sexual abuse. She confirmed that if involuntary segregated housing were used, Article #91 would be followed.

(d) Article #91 (page 4) states, "if an involuntary segregated housing assignment is made, the facility shall document the basis for the facility's concern for the inmate's safety and why no alternative means of separation can be arranged." The facility did not have any case files to review. The Jail Administrator confirmed that article #91 would be followed if involuntary housing was used.

(e) Article #91 (page 4) states, "the facility shall review the inmate every thirty days to determine whether there is a continuing need for separation from the general population." The Minnesota Department of Corrections (DOC) administrative rules governing jails (2911.2800) require that a confined person placed in involuntary segregated housing be reassessed every seven days. Two of the staff members who supervise confined persons in segregated housing said that a review would happen every seven days. One staff member wasn't sure. The Jail Administrator confirmed a review would be completed every seven days.

The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, Article #91, DOC 2911 rules, DOC facility inspection report, and an interview with the Jail Administrator and three officers who work in segregated housing. The facility did not have any case files to review.

<b>115.71 Criminal and administrative agency investigations</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	(a) (b) Article #91 (page 9) It is the Becker County Jail's policy to ensure that allegations of sexual abuse or sexual harassment are referred to the Becker County Sheriff's Office to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. Administrative allegations of sexual abuse and harassment will be conducted by the Becker County Jail, including third-party and anonymous reports, promptly, thoroughly, and objectively using investigators who have received special training outlined in standard 115.34. A licensed investigator from the Sheriff's Office was interviewed and explained that he or another investigator would be called in immediately to the jail to investigate. The facility did

not have any criminal allegation files to review. The investigator confirmed that a report will be completed for all investigations of sexual abuse or harassment.

(c) The investigator described the investigation process - collecting any physical evidence at the scene, documenting the scene (photographs), statements from the alleged victim(s), any witnesses, and the suspected perpetrator(s), collecting any video evidence, and jail staff incident reports. Writing the investigative report, documenting interviews, evidence, and other information gathered pertinent to the investigation. There were no criminal investigations to review in the past 12 months. The investigator reported that the Sheriff's Office policy for sexual assaults in the community would be used to investigate sexual assaults in the jail.

(d) The investigator said he would not consult with the County Attorney's Office before conducting compelled interviews, unless there were a question. There were no criminal investigations to review in the past twelve months.

(e) The investigator said the credibility of an alleged victim, perpetrator, or witness is determined by statements, corroboration, and where the evidence leads. The investigator would not ask a victim to submit to a polygraph test to proceed with an investigation. Minnesota State Statute 611.A.26.S.1 prohibits the use of polygraphs on victims of sexual abuse as part of a condition for proceeding with the investigation, charging, or prosecution.

(f) As outlined in article #91 (page 9), administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse and shall be documented in written reports, including describing the physical and testimonial evidence, the reason behind the credibility assessments, and investigative facts and findings. The investigator confirmed that administrative investigations include the required documentation outlined in this standard (f). The investigation files are securely stored in the Assistant Jail Administrator's (PREA Coordinator's) office in a locked cabinet. The administrative offices are located outside the jail's secure perimeter. Access to the offices is limited to staff. Electronic records are stored on a secure drive with access limited to the PREA Coordinator. The one reported allegation reviewed included the information required in administrative allegations.

(g) The investigator verified that all criminal investigations are documented and include a thorough description of all the evidence collected, witness statements, any photographs, and anything relevant to the investigation. There were no criminal investigations conducted in the past twelve months to review.

(h) The investigator said that all completed sexual assault cases are forwarded to the County Attorney's Office to review and make a decision on prosecuting the case.

(i) As outlined in article #91 (page 9), all written reports of administrative and criminal investigations are retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. Historic case files were reviewed, and one 2023 allegation was reviewed. A criminal investigation was conducted, and the allegation was found to be unfounded.

- (j) The investigator said the investigation would be completed. There would be an effort to find the alleged abuser before completing the investigation.
- (k) The Auditor is not required to audit this provision.
- (l) The Becker County Sheriff's Office investigates allegations of sexual abuse and sexual harassment. If the Sheriff determines to request that another agency conduct the investigation, the PREA Coordinator said he would be the point of contact. The investigator and Jail Administrator said they would not be the points of contact with the investigating agency.

The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page 9), one current and one historic investigation file, onsite observations, and interviews with the Jail Administrator, PREA Coordinator, and investigator.

<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) Article #91 (page 9) states, "A standard no higher than a preponderance of the evidence will be imposed in determining whether sexual abuse or harassment allegations are substantiated."</p> <p>The investigator confirmed that a standard no higher than the preponderance of the evidence is used to substantiate an allegation of sexual abuse or sexual harassment.</p> <p>The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page 9), the administrative investigation file, and the investigator's interview.</p>

<b>115.73</b>	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) Article #91 (pages 9-10) states, "following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless it is determined that the allegation is unfounded or following an inmate's allegation that another inmate has sexually abused him or her, the Jail Administrator or designee will inform the inmate whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded." The PREA Coordinator and investigator confirmed</p>

that the confined person would be notified of the final disposition of the investigation (substantiated, unsubstantiated, or unfounded). The facility reported receiving one allegation in the past twelve months. The administrative investigation file was reviewed and determined to be unfounded.

(b) The Becker County Sheriff's Office investigates allegations of sexual abuse and harassment. The facility has not had an outside agency complete any investigations.

(c) Article #91 (pages 9 - 10) states, following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless it is determined that the allegation is unfounded, the Jail Administrator or designee will inform the inmate whenever:

- The staff member is no longer posted within the inmates' unit;
- The staff member is no longer employed at the facility;
- The agency learn that the staff member has been indicted on a charge related to sexual abuse within the facility;
- The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

No substantiated or unsubstantiated final dispositions have been determined after investigating sexual abuse or harassment complaints. There were no confined persons in custody during the onsite review.

(d) Article #91 (pages 9-10) states, following an inmate's allegation that another inmate has committed sexual abuse against the inmate, unless it is determined that the allegation is unfounded, the Jail Administrator or designee will inform the inmate whenever:

- The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility;
- The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

No substantiated or unsubstantiated final dispositions have been determined after investigating sexual abuse or harassment complaints. There were no confined persons in custody during the onsite review.

(e) Article #91 (page 10) states, "all notifications to an inmate are documented." The facility did not have any current or historic notifications to review. The facility's response to the original grievance, which included the allegation, was determined to be unfounded. The investigator said that the County Attorney's Office would issue a determination letter regarding the charging decision, which would be given to the confined person.

(f) The auditor is not required to audit this provision.

The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (pages 9-10), grievance response, and interviews with the

	PREA Coordinator and investigator.
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>(a) Article #91 (page 11) states, "staff is subject to disciplinary actions up to and including termination for violating sexual abuse or harassment policies."</p> <p>(b) As outlined in article #91 (page 11), termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. The facility reported on the pre-audit questionnaire, and the PREA Coordinator confirmed that there have not been any staff members who have violated agency sexual abuse or sexual harassment policies in the past twelve months.</p> <p>(c) Article #91 (page 11) outlines that the progressive discipline of staff members for violations of sexual abuse and harassment policies (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. The facility reported on the pre-audit questionnaire, and the PREA Coordinator confirmed that no staff members have been disciplined, short of termination, for violations of agency sexual abuse or sexual harassment policies in the past twelve months.</p> <p>(d) As outlined in article #91 (page 11), all terminations for violating agency sexual abuse and harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was not criminal, and to any relevant licensing bodies. The facility reported on the pre-audit questionnaire and confirmed by the PREA Coordinator, that no staff members have been reported to law enforcement or licensing bodies in the past twelve months.</p> <p>The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page 11), and the interview with the PREA Coordinator. There were no investigation files to review.</p> <p>The PREA Coordinator assured that the agency will follow its policy to discipline up to termination if a staff member is found to have violated agency sexual abuse and harassment policies.</p>

<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard

<b>Auditor Discussion</b>	
<p>(a) Article #91 (page 11) states, "a contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies unless the activity was not criminal and to relevant licensing bodies." The facility reported on the pre-audit questionnaire, and the PREA Coordinator confirmed that there has not been a contractor or volunteer who violated the agency's sexual abuse and harassment policies.</p> <p>(b) Article #91 (page 11) states, "appropriate remedial measures are taken, and consideration of whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or harassment policies." The PREA Coordinator ensured that a contractor or volunteer would be immediately referred for criminal investigation and would be removed from all duties requiring contact with confined persons pending the outcome of the investigation.</p> <p>The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page 11), and the interview with the PREA Coordinator. The facility didn't have any current or historic files to review.</p>	

<b>115.78 Disciplinary sanctions for inmates</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
<b>Auditor Discussion</b>	
<p>(a) The facility reported on the pre-audit questionnaire that there were no confined persons disciplined for violating the agency's sexual abuse and harassment policies in the past twelve months. The facility has a disciplinary system for confined persons as outlined in Article #91 (page 11) and the handbook (page 12 - major rule violation #12). The disciplinary process is fair and systematic so that no person, staff, or inmate may plead ignorance of the rules or bias in procedure. The discipline plan separates minor and major violations and lists the corresponding sanctions that may be imposed for each level. The discipline plan offers the confined person the opportunity to appeal the violation to the hearing board or to agree to the violation and waive their right to appeal to the hearing board.</p> <p>(b) (c) The Jail Administrator confirmed that disciplinary decisions as outlined in article #91 (page 11) are based on the nature and circumstances of the rule violated, the person's disciplinary history, sanctions imposed on others for comparable offenses, and whether a confined person's mental disabilities or illness may have contributed to the behavior. The facility did not have any current or historic files to review.</p> <p>(d) The nurse reported that the facility does not offer therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. The facility provides mental health services once a week.</p>	

(e) As outlined in article #91 (page 11), a confined person may be disciplined for sexual contact with staff only upon a finding that the staff member did not consent to such an act. The facility did not have any current or historic files to review.

(f) As outlined in article #91 (page 11), disciplinary action is prohibited for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

(g) Article #91 (page 11) prohibits consensual sexual activities between confined persons. The violation is listed on page 12 of the handbook, major rule violation #13

The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page 11), handbook (page 12 - major rule violations #12 and #13, and the interview with the Jail Administrator. The facility did not have any current or historic data to review.

<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(c) Article #91 (page 3) states, "if the screening indicates that an inmate has experienced prior sexual victimization, whether in an institutional setting or the community, staff shall ensure that the inmate is offered a follow-up meeting with the nurse within fourteen days of the intake screening. The staff members interviewed using the risk screening interview protocol both reported that a confined person who reports previous victimization in the community or confinement facility is offered a follow-up referral to the nurse. The nurse did not have a medical file of a confined person who disclosed previous sexual victimization; however, a sample medical file was reviewed to determine that medical's secondary records are maintained in the person's medical file, which is secured in a locked file in the nurse's office.</p> <p>(d) Information related to sexual victimization that occurred in an institutional setting is limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments. The nurse confirmed that the medical files of the confined persons are securely maintained at the clinic. Medical records are securely stored in the nurse's office and separate from the general housing records.</p> <p>(e) The nurse interviewed stated that confined persons are informed of their duty to report and their limitations of confidentiality before starting the initial medical</p>

	<p>assessment. The nurse said she is a mandated reporter and would report any allegations from a person under the age of eighteen or a certified vulnerable adult. The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page 3), secondary medical documentation, and interviews with staff responsible for risk screening and the nurse. File storage was observed during the facility tour.</p>
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<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>(a) Victims of sexual abuse will be transported to Essential Health - St. Mary's Hospital in Detroit Lakes, Minnesota, or Sanford Medical Center in Fargo, North Dakota, for timely unimpeded access to emergency medical treatment, evidence collection, and crisis intervention services. The professional judgment of the SANE or emergency room provider will determine the nature and scope of services provided. Facility medical staff maintain any medical information, including authored or secondary medical information, securely in the nurse's office, separate from the general housing files. The nurse said the alleged victim would be transported to the emergency department as soon as transport can be arranged. The nurse said she would follow the recommendations from the community provider with the medical provider to develop a care plan for ongoing medical care in the facility, schedule follow-up appointments, and address any information requested by the victim. The nurse has not had a sexual abuse allegation in the facility; however, a sample medical file was reviewed to determine that medical's secondary records are maintained in the person's medical file, which is secured in a locked file in the nurse's office.</p> <p>(b) Article #91 (page 9) outlines the responsibilities of staff first responders. Nursing staff are not on duty twenty-four hours a day (Monday-Friday) or on weekends. Article #91 (page 9) states, "at the time a recent report of sexual abuse is made, the on-duty Supervisor or designee will offer the alleged victim transport to the hospital for treatment. If medical staff are not on duty, the on-duty supervisor or designee shall include the necessary information on the pass-on sheet. The PREA Coordinator explained that medical staff are not on-call twenty-four hours a day, so the process is for staff to document medical information on a medical pass-on form, which the nurse reviews at the start of her shift. The supervisor's facility response checklist includes a section for notifying medical staff.</p> <p>(c) The nurse said she would follow the recommendations outlined on the discharge paperwork. The nurse would meet with the victim to discuss the next steps in treatment, schedule additional appointments, and explain the available medical treatments. The facility has not had a sexual assault in the building.</p>

	<p>(d) Article #91 (page 8) as outlined in article #91 (page 8), treatment services shall be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident.</p> <p>The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (pages 8-9), and interviews with staff members, the PREA Coordinator, and the nurse.</p> <p>The agency has not had a sexual assault in the jail.</p>
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<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) The agency contracts with American Correctional Healthcare (ACH) <a href="https://www.americancorrectional.com/">https://www.americancorrectional.com/</a> to provide medical and mental health services, evaluations, and, as appropriate, treatment services to all confined persons who have been victims of sexual abuse in any prison, jail, lockup, or juvenile facility as outlined in article #91 (page 9).</p> <p>(b) As confirmed through the nurse's interview, the nurse will make sure that follow-up services, treatment plans, and referrals to specialty appointments are scheduled for the victim. The nurse is responsible for gathering information for continued care after the person is transferred to another facility or released from custody. The nurse said she would meet with the victim upon returning from the hospital.</p> <p>(c) The nurse said ACH provides treatment services that are consistent with the community level of care. Any specialty appointments are scheduled with community providers. Forensic medical examinations are conducted at a community hospital.</p> <p>(d) A victim of sexual abuse will be transported to a community for a forensic medical examination. If the victim was not given information during the medical examination, the nurse said she would discuss the option of a pregnancy test. Upon the request of the victim, a pregnancy test would be given as outlined in article #91 (page 8).</p> <p>(e) As outlined in article #91 (page 8), if pregnancy results, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. The nurse said that the victim would be given all lawful pregnancy-related materials and medical access when she meets with the victim upon returning from the hospital or upon request of the victim. The agency has not had a sexual assault in the facility.</p> <p>(f) As outlined in article #91 (page 8), inmate victims of sexual abuse, while incarcerated, shall be offered tests for sexually transmitted infections as medically</p>

appropriate. The nurse said she would discuss with the victim the option of testing for sexually transmitted diseases or review the testing the victim received during the forensic medical examination.

(g) Article #91 (page 8), as outlined in Article #91 (page 8), treatment services shall be provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident.

(h) Becker County operates a county jail.

The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page 8), and the interview with the nurse. No records were available for review. The facility reported on the pre-audit questionnaire that they have not had a sexual assault reported. The PREA Coordinator verified that there haven't been any sexual assaults reported.

<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) (b) Article #91 (page 10) states, "a sexual abuse incident review shall be conducted 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. The review shall ordinarily occur within 30 days of the conclusion of the investigation."</p> <p>(c) The PREA Coordinator listed the incident review team to include upper-level management, and allows for input from supervisors, investigators, and medical or mental health practitioners. Article #91 (page 10) outlines the requirements of this paragraph.</p> <p>(d) The PREA Coordinator said that the review team would consider items (1) and (3-5) outlined in this paragraph. He said the incident as a whole is being evaluated, including where it occurred, reviewing policy and procedures, determining whether remedial staff training is needed, reviewing the staffing plan, and monitoring systems. The review team would prepare a report of its findings, including any recommendations for improvement, and forward it to the Jail Administrator as outlined in Article #91 (page 10).</p> <p>(e) As outlined in article #91 (page 10), the jail Administrator would review the report and any recommendations for improvement or document why the recommendation will not be implemented. The agency has not had an alleged sexual assault in the facility.</p> <p>The auditor determined compliance with this standard by reviewing the pre-audit</p>

	questionnaire, article #91 (page 10), and interviews with the Jail Administrator and PREA Coordinator. The one allegation reported was examined; it was determined to be unfounded.
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<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) The PREA Coordinator collects accurate, uniform data for every allegation of sexual abuse and sexual harassment using the set of definitions outlined in the PREA standards. He maintains a spreadsheet listing every allegation, the dates, the names of the alleged victims and perpetrators, the type of allegation, and the final disposition as outlined in article #91 (page 12).</p> <p>(b) The PREA Coordinator confirmed that he aggregates the incident-based data annually. The spreadsheet and agency website were reviewed. The PREA Coordinator confirmed that the data is reviewed annually.</p> <p>(c) The spreadsheet tracks the data necessary to answer all the questions from the most recent DOJ Survey of Sexual Violence.</p> <p>(d) The PREA Coordinator maintains all incident-based documents, including reports, investigation files, and incident review documents. The jail management system (JMS) allows for PREA-related documents to be securely saved with rights granted to specific users.</p> <p>(e) This paragraph is not applicable; the facility does not have any contract with agencies for the confinement of their confined persons.</p> <p>(f) The Department of Justice did not request agency data for the 2023 calendar year.</p> <p>The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page 12), incident log, and interviewing the PREA Coordinator.</p>

<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) The PREA Coordinator reviews the aggregated data annually. The PREA</p>

	<p>Coordinator said that the data reviews are used to identify any trends in the facility that may need improvement. The Sheriff's designee said the incident-based data is used to identify problems in the facility and take corrective action.</p> <p>(b) The agency prepares a statistical report that includes a comparison of the current year's statistical data with the prior years' data. The annual report does include the facility remaining PREA compliant by going through an audit every three years.</p> <p>(c) The PREA Coordinator compiles the incident-based data, and the Sheriff approves the report before the report is made available to the public on the agency's website: <b>(chrome-extension://efaidnbmnnibpcajpcgkclefindmkaj/https://www.co.-becker.mn.us/dept/sheriff/PDFs/PREA_Policy_02122025.pdf)</b></p> <p>(d) The agency creates a statistical report that summarizes the number, type, and final disposition of reported incidents. The report does not include any personal identifying information. The PREA Coordinator reported that any clear and specific threat to the facility's safety and security would be redacted, and the type of material redacted would also be listed in the report.</p> <p>The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page 12), the annual statistical report, the website, the previous PREA audit, and interviews with the Sheriff's designee and PREA Coordinator.</p>
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<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(a) The PREA Coordinator explained that the Jail Management System (JMS) has fields to collect documents, save, and restrict access for PREA incidents, through customized reports generated from the JMS. The JMS is a rights-based system. Any hard-copy documents are maintained in the PREA Coordinator's (Assistant Jail Administrator's) office in jail administration, located outside the jail's secure perimeter. The door going into the jail administration is locked. The PREA Coordinator reviewed the JMS.</p> <p>(b) The Sheriff approves the agency's annual statistical report and makes it available through the agency's website.</p> <p>(c) The facility makes available an annual statistical report. The PREA Coordinator stated that redacted material would include any clear, specific threat to the facility's safety and security. The nature of the redacted material would be listed on the annual report.</p> <p>(d) As outlined in article #91 (page13), the Becker County Jail shall abide by all data retention, publication, and destruction mandates as directed by Federal, State, and</p>

	<p>local laws. Historic data was reviewed with the PREA Coordinator onsite.</p> <p>The auditor determined compliance with this standard by reviewing the pre-audit questionnaire, article #91 (page 13), agency website, historic data samples, and interviewing the PREA Coordinator.</p>
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<b>115.401</b>	<b>Frequency and scope of audits</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>(a) This is Becker County Jail's third audit since moving into the new facility in 2019. The PREA Coordinator ensures that an audit is scheduled every 3 years.</p> <p>(b) Becker County operates one adult county jail. The Minnesota Department of Corrections (DOC) has given the Becker County Jail a "Delinquent Juvenile Hold Approval", which allows Becker County to hold a juvenile for twenty-four hours, excluding weekends and holidays. On the dates of the onsite review, the facility was not holding any juvenile offenders.</p> <p>(h) During the onsite review, the auditor was granted full access to all areas of the facility.</p> <p>(i) The PREA Coordinator uploaded documentation into the pre-audit questionnaire and provided additional documentation as requested during the onsite review.</p> <p>(m) The facility allowed the auditor to use the library to conduct private interviews with confined persons.</p> <p>(n) The facility posted the PREA audit notices in all areas of the facility and the public lobby. The notice informed confined persons that they could send correspondence to the auditor confidentially. The confined person gives the officer the envelope, and the officer removes the paper from the envelope in front of the confined person. The officer checks the envelope for any contraband, reinserts the paper, and seals it in front of the confined person.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p>

Article #91 (page 13) states, "the Becker County Jail shall ensure that the auditor's final report is published on the website. The previous audit is posted on the agency's website: <https://co.becker.mn.us/dept/sheriff/chrome-extension://efaidnbmnnibpcajpcglclefindmkaj/https://co.becker.mn.us/dept/sheriff/PDFs/PREA%20Final%20Audit%20Report%202021.pdf>.

The contract states that the agency will post the final report within 90 days of receipt, and the email containing the final audit report will include a reminder to post the report within 90 days.

## Appendix: Provision Findings

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	no
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or	yes

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

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

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

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

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

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

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

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

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

	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between	yes

	inmates and these organizations and agencies, in as confidential a manner as possible?	
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	no
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	no
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a	yes

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

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

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

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

	including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	no
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

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

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

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

	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	no
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does	yes

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

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

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

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

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

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

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

	noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	
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