

# PREA Facility Audit Report: Final

**Name of Facility:** Auburn Correctional Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 05/23/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Alton Baskerville	<b>Date of Signature:</b> 05/23/ 2023

AUDITOR INFORMATION	
<b>Auditor name:</b>	Baskerville, Alton
<b>Email:</b>	alton.abm@preaauditors.com
<b>Start Date of On-Site Audit:</b>	04/24/2023
<b>End Date of On-Site Audit:</b>	04/26/2023

FACILITY INFORMATION	
<b>Facility name:</b>	Auburn Correctional Facility
<b>Facility physical address:</b>	135 State Street, Auburn, New York - 13024
<b>Facility mailing address:</b>	N/A,

<b>Primary Contact</b>	
<b>Name:</b>	Erin O'Brien
<b>Email Address:</b>	Erin.O'Brien@doccs.ny.gov
<b>Telephone Number:</b>	315-253-8401

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Joseph Corey
<b>Email Address:</b>	Joseph.Corey@doccs.ny.gov
<b>Telephone Number:</b>	315-253-8401

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	Erin O'Brien
<b>Email Address:</b>	Erin.O'Brien@doccs.ny.gov
<b>Telephone Number:</b>	
<b>Name:</b>	Martin Gilmore
<b>Email Address:</b>	martin.gilmore@doccs.ny.gov
<b>Telephone Number:</b>	

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Linda Bannister
<b>Email Address:</b>	Linda.Bannister@DOCCS.ny.gov
<b>Telephone Number:</b>	315-253-8401

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	1713
<b>Current population of facility:</b>	931

<b>Average daily population for the past 12 months:</b>	891
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Males
<b>Age range of population:</b>	19-80
<b>Facility security levels/inmate custody levels:</b>	Maximum
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	747
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	86
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	176

**AGENCY INFORMATION**

<b>Name of agency:</b>	New York Department of Corrections and Community Supervision
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	1220 Washington Avenue, Albany, New York - 12226
<b>Mailing Address:</b>	
<b>Telephone number:</b>	5184578126

**Agency Chief Executive Officer Information:**

<b>Name:</b>	Anthony J. Annucci
<b>Email Address:</b>	commissioner@dccs.ny.gov

<b>Telephone Number:</b>	518.457.8134
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<b>Agency-Wide PREA Coordinator Information</b>	
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<b>Name:</b>	Jason Effman	<b>Email Address:</b>	jason.effman@doccs.ny.gov
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<b>Facility AUDIT FINDINGS</b>
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<b>Summary of Audit Findings</b>
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The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

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

<b>Number of standards exceeded:</b>	
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8	<ul style="list-style-type: none"> <li>• 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</li> <li>• 115.22 - Policies to ensure referrals of allegations for investigations</li> <li>• 115.31 - Employee training</li> <li>• 115.34 - Specialized training: Investigations</li> <li>• 115.42 - Use of screening information</li> <li>• 115.53 - Inmate access to outside confidential support services</li> <li>• 115.65 - Coordinated response</li> <li>• 115.71 - Criminal and administrative agency investigations</li> </ul>
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<b>Number of standards met:</b>
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Number of standards not met:	
0	

## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-04-24
2. End date of the onsite portion of the audit:	2023-04-26

#### Outreach

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

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1713
15. Average daily population for the past 12 months:	891
16. Number of inmate/resident/detainee housing units:	8
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

<b>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	944
<b>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	3
<b>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	350
<b>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	34
<b>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>	17

<p><b>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>8</p>
<p><b>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>22</p>
<p><b>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>24</p>
<p><b>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b></p>	<p>There was a total of 387 inmates that were identified with the cognitive, physically disabled and Limited English Proficient as of the first day of the onsite portion of the audit.</p>
<p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>	
<p><b>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b></p>	<p>747</p>
<p><b>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>176</p>



<b>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	86
<b>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b>	have no additional comments to make concerning 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>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
<b>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	24
<b>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
<b>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b>	Inmates were randomly selected from each housing area, race, ethnicity and age group to insure a geographically sample to interview.
<b>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No

<b>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	There were no barriers.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	9
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<b>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	3
<b>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	0

<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>There were none during the onsite visit.</p>
<p><b>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>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>There were none during the onsite visit.</p>
<p><b>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>1</p>

<p><b>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>2</p>
<p><b>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>3</p>
<p><b>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>4</p>
<p><b>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>3</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>There were none during the onsite visit.</p>
<p><b>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></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>Department policy, information in the PAQ, interviews with staff and inmates support the practice of not placing inmates with risk of sexual victimization in segregated housing.</p>
<p><b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>There were no problems in interviewing the inmates.</p>
<p><b>Staff, Volunteer, and Contractor Interviews</b></p>	
<p><b>Random Staff Interviews</b></p>	
<p><b>71. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>18</p>
<p><b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input 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>I select to interview female officers; they were a small percentage of the security staff.</p>

<p><b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>I was able to interview a good cross section of the security staff. Staff from all three shifts were interviewed.</p>
<p><b>Specialized Staff, Volunteers, and Contractor Interviews</b></p>	
<p>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.</p>	
<p><b>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b></p>	<p>17</p>
<p><b>76. Were you able to interview the Agency Head?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>78. Were you able to interview the PREA Coordinator?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>79. Were you able to interview the PREA Compliance Manager?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

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

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

	<input checked="" type="checkbox"/> Other
<b>If "Other," provide additional specialized staff roles interviewed:</b>	The Commissioner was also interviewed.
<b>81. 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 checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	1
<b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other



<b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	Agency Medical Nurse
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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>84. Did you have access to all areas of the facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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**Was the site review an active, inquiring process that included the following:**

<b>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<b>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<b>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<p><b>88. Informal conversations with staff during the site review (encouraged, not required)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p><b>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b></p>	<p>Auditor was able to have informal conversations on the tour with staff and confined persons in their work/housing areas.</p>
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**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>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p><b>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b></p>	<p>I selected twelve random inmate record files and twelve random employee files to check for PREA compliance. The files were in good order, and documented PREA requirements.</p>
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**SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY**

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

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

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

	<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>	1	0	0	1
<b>Staff-on-inmate sexual abuse</b>	10	0	0	10
<b>Total</b>	11	0	0	11

**93. 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>	3	0	3	0
<b>Total</b>	3	0	3	0

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
<b>Inmate-on-inmate sexual abuse</b>	0	0	0	0	0
<b>Staff-on-inmate sexual abuse</b>	8	0	0	0	0
<b>Total</b>	8	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	0	0	1	0
<b>Staff-on-inmate sexual abuse</b>	7	0	3	0
<b>Total</b>	7	0	4	0

### Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	3	0	0	0
<b>Total</b>	3	0	0	0

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

**Sexual Abuse Investigation Files Selected for Review**

<b>98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:</b>	11
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<p><b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p><b>Inmate-on-inmate sexual abuse investigation files</b></p>	
<p><b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>1</p>
<p><b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>Staff-on-inmate sexual abuse investigation files</b></p>	
<p><b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>8</p>
<p><b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p><b>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p><b>Sexual Harassment Investigation Files Selected for Review</b></p>	
<p><b>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>3</p>
<p><b>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p><b>Inmate-on-inmate sexual harassment investigation files</b></p>	
<p><b>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p><b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<b>Staff-on-inmate sexual harassment investigation files</b>	
<b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	3
<b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	The auditor was able to review all investigative sexual abuse and sexual harassment files for the past twelve months.
<b>SUPPORT STAFF INFORMATION</b>	
<b>DOJ-certified PREA Auditors Support Staff</b>	
<b>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No



**Non-certified Support Staff**

<p><b>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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**AUDITING ARRANGEMENTS AND COMPENSATION**

<p><b>121. Who paid you to conduct this audit?</b></p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
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<p><b>Identify the name of the third-party auditing entity</b></p>	<p>American Correctional Association</p>
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<b>Standards</b>	
<b>Auditor Overall Determination Definitions</b>	
<ul style="list-style-type: none"> <li>• Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>• Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>• Does Not Meet Standard (requires corrective actions)</li> </ul>	
<b>Auditor Discussion Instructions</b>	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #4027 Sexual Victimization Prevention &amp; Response-07/21/22</li> <li>• Sexual Victimization Prevention Policy Manual (SVPPM) 02/15/22</li> <li>• Employees’ Manual</li> <li>• Memorandums/Emails</li> <li>• DOCCS Organizational Chart which indicates that the PREA Coordinator reports directly to the Commissioner</li> <li>• SAPEO Organizational Chart</li> <li>• Facility Organization Chart</li> <li>• Interview with the PREA Coordinator</li> <li>• Interview with the ADS PREA</li> <li>• Interview with the PREA Point Person</li> </ul> <p>Written Directive #4027, Sexual Victimization Prevention &amp; Response (DIR #4027), establishes and governs the New York State Department of Corrections and Community Supervision (DOCCS) mandated zero-tolerance toward all forms of sexual</p>

abuse and sexual harassment. DIR #4027 establishes the Sexual Victimization Prevention Policy Manual (SVPPM) as a supplement to this Directive, having the same force and effect as a Directive in setting forth the Department's policies for the prevention of sexual abuse, sexual harassment, unauthorized relationships, and retaliation related to such incidents or investigations, and provides detailed operating procedures implementing the National PREA Standards. Collectively, DIR #4027 and the SVPPM outline the agency's approach to preventing, detecting, and responding to sexual abuse, sexual harassment, and sexual threats, and further assert sexual abuse and sexual harassment violate agency rules and threaten security; and that all allegations of sexual abuse, sexual harassment, or retaliation for reporting such an incident of participating in an investigation will be thoroughly investigated; and establishes that perpetrators will be dealt with severely through discipline or prosecution to the fullest extent permitted by law and provide definitions consistent with those found in the Prison Rape Elimination Act of 2003, (PREA), 42 U.S.C. §15609. Under § 130.05 of New York State Penal Law, it is a crime for staff to engage in a sexual act with an incarcerated individual or releasee. Strategies for prevention and response include training, a duty to report, requirements and enforcement of discipline, and prosecution for those who offend.

The Associate Commissioner/PREA Coordinator is a dedicated position and through interview with Associate Commissioner Effman, it was confirmed that his time is almost exclusively devoted to overseeing the agency's efforts to develop, implement and oversee agency efforts to comply with PREA standards in all his facilities and he has sufficient time and authority to do so. He further manages this through regular and direct coordination with fifteen (15) Assistant Deputy Superintendent/ PREA Compliance Managers who are instrumental in PREA coordination and execution at the facility level. Acting Commissioner Anthony J. Annucci articulated complete support of efforts by Associate Commissioner Effman, the Zero Tolerance mandate throughout the agency, and a continued commitment for agency compliance. Associate Commissioner Effman also communicated to the auditor his actual and implied authority and his ability to carry out duties without impediment and receiving support from the agency head.

Per a memo dated December 13, 2021, Jacy Woodworth has been appointed Director of PREA Compliance from Assistant Deputy Superintendent at Wende Correctional Facility. The Director of PREA Compliance serves as the assistant agency-wide PREA Coordinator and is responsible for administering the PREA Audit program; provides direct oversight of agency-wide PREA implementation activities; and assists in the development and implementation of programs and policies in areas relating to compliance with PREA and the reduction of sexual abuse, sexual harassment, and unauthorized relationships within the Department.

Per a memo dated April 7, 2022, Erin O'Brien has been appointed to Assistant Deputy Superintendent PREA Compliance Manager at Five Points Correctional Facility from Supervising Offender Rehabilitation Coordinator at Elmira Correctional Facility. Assistant Deputy Superintendent O'Brien will also serve as PREA Compliance Manager for Auburn and Cayuga Correctional Facilities. Per a memo dated February 3, 2023, Captain Gilmore has been named PREA Point Person at Auburn Correctional Facility.

	<p>Based on auditor’s analysis of related policy, review of executive memorandums, review of agency and facility organization charts, and formal staff interviews it is determined that Auburn Correctional Facility satisfies all elements required of this standard. In addition, the designation of a PREA Point Person for every facility is above and beyond the minimum requirements, therefore, New York State Department of Corrections and Community Supervision and Auburn CF is found to exceed this standard. DOCCS goes above and beyond to alleviate Prison Rape. They have established several ways to report, who they can report to, victim services, prosecuting cases, establishing a sex crimes unit, etc. Therefore, this auditor finds they exceed this standard as they have taken a pro-active approach and have established a Sexual Abuse Prevention and Education Office.</p> <p><b>Conclusion:</b> DOCCS goes above and beyond to alleviate Prison Rape. They have established several ways to report, who they can report to, victim services, prosecuting cases, establishing a sex crimes unit, etc. Therefore, this auditor finds they exceed this standard as they have taken a pro-active approach and have established a Sexual Abuse Prevention and Education Office.</p>
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<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Request for Application for Community Based Residential Programs (CBRP)</li> <li>• Statement of compliance PREA Coordinator</li> <li>• NY CLS § Corrections 121</li> <li>• CBRP PREA Schedule</li> </ul> <p>New York State Department of Corrections and Community Supervision maintains no contracts for confinement of inmates. According to New York State Correction Law section 121, New York State Department of Corrections and Community Supervision is not permitted to enter into contracts for the confinement of inmates; therefore, no private prisons are operated on behalf of the Agency. However, New York State Department of Corrections and Community Supervision holds 14 contracts for confinement of Parolees in Community Based Residential Programs.</p> <p>In compliance with PREA requirements, these contracts permit monitoring and require the program to achieve and maintain PREA Compliance and to arrange for PREA Audits on a schedule set in consultation with the New York State Department of Corrections and Community Supervision PREA Coordinator.</p> <p><b>Conclusion:</b> Based on review of contracts and interview with PREA Manager Erin O’Brien, Auburn</p>

	Correctional Facility and New York State Department of Corrections and Community Supervision meets this standard.
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<b>115.13</b>	<b>Supervision and monitoring</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• DIR #4001 October 5, 2022, Facility Administrative Coverage &amp; Supervisory Rounds</li> <li>• SVPPM Section: Prevention Planning February 15, 2022</li> <li>• Staffing Plan/Annual Supervision and Monitoring Plan Review November 17, 2022/ December 15, 2022</li> <li>• Post Closure Key</li> <li>• Chart and Staff Review</li> <li>• Unannounced rounds/Weekly Activity Report</li> <li>• Daily Security Supervisor Report</li> <li>• Logbook entries</li> <li>• Employees' Manual</li> <li>• Interview with the Superintendent</li> <li>• Interview with the PREA Manager</li> <li>• Interviews with supervisors who conduct unannounced rounds</li> <li>• Interviews with random staff</li> </ul> <p><b>Directive #4001</b></p> <p>VII. Rounds</p> <p>The Superintendent or Acting Superintendent shall establish a schedule whereby the Superintendent or designee, Executive Team members, and designated Division Heads will (when practical) make rounds of the facility's living and activity areas, at least weekly to encourage informal contact with staff and incarcerated individuals, as well as observe living and working conditions. Each respective logbook will be signed in red ink and shall indicate that their round of the area was unannounced or announced after reviewing and signing the logbook. NOTE: This should not be interpreted as meaning that every individual is to conduct rounds of the entire facility. The Superintendent has the discretion to establish a schedule and select staff from the titles the titles mentioned is Section VI-A, so that all areas of the facility will be covered on a weekly basis.</p> <p>Executive Team Members and Designated Division Heads: Shall complete and forward Form #4001A to the Superintendent upon completion of their assigned rounds.</p> <p>Superintendents should ensure that Executive Team members make rounds in areas not necessarily under their direct responsibility. If facility policy allows for weekly rounds to be conducted by teams, a signal Weekly Administrative Action Report and Form #4001A must be submitted by the Executive Team.</p>

Security Supervisors: All Sergeants and Lieutenants who are assigned to an area within the facility (e.g., housing unit, program area, etc.) will complete and forward Form #4001B to their supervisor upon completion of their assigned rounds. The completed Form #4001B is to be turned in to the Watch Commander for review, then forwarded to DSS and maintained for a minimum of three years. Watch Commanders are required to completed Form #4001B and submit it directly to their supervisor upon completion of their assigned rounds.

Employees are prohibited from alerting other employees that supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.

### **SVPPM**

In accordance with PREA Standard 115.13/213, each facility will develop, document and comply with their staffing plan. This plan will provide for adequate levels of staffing, and where applicable, video monitoring, to protect incarcerated individuals against sexual abuse.

### **Staffing Plan**

New York State Department of Corrections and Community Supervision ensures that each facility has developed and documented a staffing plan that provides for adequate levels of staffing. A comprehensive and extensive staffing plan is developed and established through the New York State Department of Corrections and Community Supervision Security Information Staffing Unit. The Staffing memo dated December 15, 2022 indicated a formal review of the established Auburn Correctional Facility Staffing Plan. The staffing plan for Auburn Correctional Facility is predicated on 1713 inmates. The average daily number of inmates since the last PREA audit is 891.

The current plan calls for (610 security positions), Tour I has (1) lieutenants and (3) sergeants; Tour II has (5) lieutenants, (1 ) sergeants; and Tour III (2) lieutenants and (8) sergeants. The six most common reasons for deviating from the staffing plan are emergency trips, post closures, staffing shortage, non-participation in services (rec), overtime management and consolidation services. After review of the documentation provided, the auditor confirmed that Post Closure Reports are completed when a post is closed, explaining the reason. The example of this document was provided to the auditor for November 19, 2022 - December 2, 2022 demonstrating the process for having deviations documented.

As indicated in the referenced memorandum, the review included generally accepted guidelines and practices:

- Any judicial finding of inadequacy (none)
- Any findings of inadequacy from federal investigative agencies (none).
- Findings of inadequacy from internal or external oversight bodies: (a)All allegations of sexual abuse at Auburn Correctional Facility, reported or suspected, are forwarded to the Office of Special Investigations (OSI) in accordance with the Facility Coordinated Response to Reports of Sexual Victimization. The OSI investigations are focused on findings related to potential criminal misconduct or administrative rule

	<p>violations by incarcerated individuals or by staff. The investigations are documented in writing. (b) Each sexual abuse report, and other serious reports of related misconduct, results in a post-incident review that is submitted by the Incident Review Team to the Superintendent with a copy to the Associate Commissioner and PREA Coordinator for review. The review may or may not result in a recommendation for a change in staffing plans, or other related modifications pertaining to supervision or monitoring of a particular area.</p> <ul style="list-style-type: none"> <li>• All components of the facility’s physical plant (Including “blind spots” or areas where staff or incarcerated individuals may be isolated). a. The capacity of Auburn Correctional Facility is 1713.</li> </ul> <p>The average daily population is 891 incarcerated individuals. Auburn Correctional Facility utilizes direct and indirect supervision. Security rounds are made in housing areas a minimum of hourly during which every incarcerated individual is physically viewed by staff. Incarcerated individuals are forbidden to create any obstruction, or otherwise inhibit any line of sight, except when changing in their cell, cube or room, or when using in cell toilet facilities. The Rounds Tracker system is also utilized in the special housing unit to enhance tracking of regular and unannounced rounds.</p> <ul style="list-style-type: none"> <li>• The composition of the incarcerated individual population. a. Auburn Correctional Facility is a medium security general population facility with a special housing unit. All staff are trained to properly supervise this population. The population is representative of the demographics of the jurisdictions that we serve.</li> </ul> <p><b>Employee Manual</b></p> <p>Employee Manual 2.44 Employees are prohibited from alerting other employees that supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.</p> <p><b>Conclusion</b></p> <p>In conclusion, Auburn Correctional Facility is committed to operating in compliance with Department policy and the Prison Rape Elimination Act. Staffing, the use of monitoring technology and the resources available to meet the facility staffing plan will be reviewed on a regular basis to ensure the facility continues to comply with all standards and requirements.</p>
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<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• DIR #0045 Auburn Correctional Facility 01/24/2023</li> <li>• NYS CLS Correc §80</li> <li>• Interviews Acting Superintendent, PREA Coordinator, and Compliance Manager.</li> </ul> <p><b>NYS CLS Correc §80</b></p>

	<p>The department and the office of children and family services shall jointly establish a transition plan and protocol to be used in transferring custody of all adolescent offenders and individuals under the age of eighteen from the custody of the department to the custody of the office of children and family services on or before October first, two thousand twenty. The plan and protocol shall be completed on or before July first, two thousand twenty.</p> <p><b>Conclusion</b> Interview with the Superintendent confirmed that there are no incarcerated individuals under the age of 18 at this facility. Based on these documents and the law, as well as observations made during the tour, the auditor finds this standard does not apply to this facility and therefore is deemed to be compliant.</p>
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<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #2230 Guidelines for Assignment of Male and Female Correction Officers 2/21/2019</li> <li>• Directive #4910 Control and Search for Contraband 08/02/2022</li> <li>• Directive #4001 Facility Administrative Coverage &amp; Supervisory Rounds 10/05/2022</li> <li>• Employee Manual 2019</li> <li>• HSPM 1.37 Body Cavity Search 9/23/2021</li> <li>• HSPM 1.19 Health Appraisal 09/03/2021</li> <li>• Form #1140 Report of Strip Search or Strip Frisk- 06/2021</li> <li>• Form #1140C Report of Cross Gender Pat Frisk-Female Inmate - 06/2021</li> <li>• Auburn RTF Contraband Frisk</li> <li>• Training Academy Contraband and Frisk 01/31/2023</li> <li>• Interviews</li> </ul> <p><b>Directive #2230 Guidelines for Assignment of Male and Female Correction Officers 2/21/2019</b> addresses which duties cannot be performed by opposite gender staff which includes strip searches, viewing showers, videos of strip searches, special watch, monitoring of incarcerated individual bathrooms via Closed-Circuit television (CCTV), and urine specimen collection.</p> <p><b>Directive #4910 Control and Search for Contraband 08/02/2022</b> supports that strip searches shall be conducted by an officer or employee of the same sex as the incarcerated individual being searched. It additionally states that any incarcerated individual who has Gender Dysphoria, is intersex, or transgender with a permit to wear gender affirming/transgender clothing may request that a Correction Officer of the incarcerated individual’s preferred gender conduct the pat frisk, when the request can be honored.</p>



**Directive #4001 Facility Administrative Coverage & Supervisory Rounds 10/05/2022** states that staff of the opposite gender shall verbally announce their arrival on a housing unit to avoid unnecessarily invading the privacy of incarcerated individual of the opposite gender. It clarifies when the announcement is to be made (i.e. when gender supervision changes) and that it is to be logged in the housing unit logbook.

**Directive #2230 Guidelines for Assignment of Male and Female Correction Officers 2/21/2019** states that staff of the opposite gender shall verbally announce their arrival on a housing unit to avoid unnecessary invasion of privacy. It emphasizes the incarcerated individuals' privacy will be protected to the extent the Department is able to do so. It requires the use of and directions for the use of department-approved shower curtains. The Employees' Manual reinforces these two directives.

Most incarcerated individual interviews and staff interviews confirmed that incarcerated individuals are able to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing the breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Some incarcerated individuals expressed concern regarding a recent change to the glazing of the window into the showers. The auditor viewed all shower and toilet areas and found there was sufficient protection to provide privacy yet not impede the ability of security staff to maintain security in those areas. All of the incarcerated individual interviews confirm that opposite gender staff are announcing when entering the unit. All random staff interviews confirmed that this is occurring. During the tour, the auditor and escort team was announced prior to entering the unit; this did not appear to be odd based on the observations of the incarcerated individuals in the unit at the time.

During the tour, the auditor observed the area where strip searches are conducted in Intake/Visiting Room. It provided appropriate privacy for the incarcerated individual during this process.

**HSPM 1.19 Health Appraisal 9/03/2021** supports that a facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined during conversations with the inmate or by reviewing medical records. A medical practitioner may conduct a full physical examination of an inmate, including a transgender inmate, when relevant to the treatment of the patient. Such an exam is to be conducted in private and with the patient's consent. Findings are to be recorded in the Ambulatory Health Record.

**HSPM 1.37 Body Cavity Searches** by DOCCS primary care providers (PCP) (i.e., physicians, nurse practitioners, physician assistants, dentists) may be authorized only by the Superintendent, Acting Superintendent or Facility Officer of the Day upon receiving approval from the Deputy Commissioner/Chief Medical Officer, or designee, when there is imminent danger to an incarcerated individual's health or facility safety. The body cavity search will only be considered for authorization if there is the ability to see inside the cavity. Rectal cavity searches will not be authorized. A correction officer the same sex as the incarcerated individual will be present during the exam.

	<p>Documentation of the body cavity search is done in the incarcerated individual's Ambulatory Health Record Progress Note Form 3105. The PCP must document the authorization from the Deputy Commissioner/Chief Medical Officer, or designee, the length of time of the search, the individuals present during the search and the outcome of the search.</p> <p>Staff is prohibited, and the facility always refrains from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status. Should a determination be necessary it is obtained through communications with the inmate, a review of medical records, or as part of a broader medical examination conducted in private by a medical practitioner. The facility indicates zero (0) searches of this nature have occurred in the past 12 months.</p> <p>One Hundred percent (100%) of all security staff receive training on transgender pat down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs. Course is given at the Training Academy. Presently all security staff assigned to Auburn CF have taken this course. Therefore, no security staff would be listed on the Auburn KHRT report for the audit time frame.</p> <p><b>Employee Manual -11.12</b> Staff of the opposite gender shall verbally announce their arrival on a housing unit at a minimum upon each change of shift and when the gender supervision on a housing unit changes from exclusively same gender to mixed or cross gender supervision to avoid unnecessarily invading the privacy of incarcerated individuals of the opposite gender, unless emergency circumstances dictate otherwise. The announcement(s) by staff must be accomplished in a manner that is easily heard and/or understood by all incarcerated individuals on the unit. This announcement shall be recorded in the unit logbook.</p> <p><b>Conclusion</b> Based on these documents and the law, as well as observations made during the tour, the auditor finds this standard does not apply to this facility and therefore is deemed to be compliant.</p>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #2612 Inmates with Sensorial Disabilities -10/1/2020</li> <li>• Directive #4490 Cultural and Language Access Services 07/29/2022</li> <li>• SVPPM 115.33 Incarcerated Individual Education 07/11/2022</li> <li>• Language Line Services, INC.</li> </ul>

- Memorandum
- New York DOCCS Facilitators Guide
- Inmate Education Facilitator Training NY DOCCS
- Prevention of Sexual Victimization in Prisons (English, Spanish, Bengali, Chinese, Haitian Creole, Korean, Arabic, Italian, Polish, Yiddish, and Russian)
- Form 4021A - 04-2022
- Interviews

**Directive #2612 Inmates with Sensorial Disabilities 10/1/2020** references the Americans with Disabilities Act, noting that programs and services provided cannot discriminate against individuals with a disability who are qualified to receive them. It further states, "Qualified Sign Language Interpreting Services: A sign language interpreter certified by the National Registry of Interpreters for the Deaf or other National or New York State credentialing authority, or a sign language interpreter who is able to interpret effectively, accurately, and impartially both receptively and expressively, using any necessary specialized vocabulary. The qualifications of an interpreter are determined by the actual ability of the interpreter in a particular interpreting context to facilitate effective communication. Except as otherwise indicated below, qualified interpreters may include inmates and correctional staff, including Correction Officers and volunteers, when their skills meet the above definition and factors such as emotional or personal involvement and considerations of confidentiality will not adversely affect their ability to interpret effectively, accurately, and impartially; or jeopardize the safety and security of the inmate."

**Directive #4490 Cultural and Language Access Services 07/29/2022** ensures inmates with limited English skills will have meaningful access to programs, services and benefits. Auditor observed Zero Tolerance Posters visible in both English and Spanish in the housing units and other common areas accessed by inmates. PREA Education Film "Ending Sexual Abuse Behind the Walls: An Orientation" is provided in DVD format appropriate to the gender classification of facility and with tracks and captioning in English, Spanish, Bengali, Chinese, Haitian Creole, Korean, Arabic, Italian, Polish, Yiddish, and Russian. The PREA Sexual Abuse Brochures are available in each of these languages. Upon arrival at each facility, it is documented on the Draft Receipt which language an inmate receives the brochure.

The agency refrains from use of inmate interpreters, inmate readers, or inmate assistance barring exigent circumstances such as when a delay could compromise an inmate's safety, performance of first-response duties, or the investigation of the inmate's allegation. In the past 12 months, there were (0) number of instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations.

### **Conclusion**

Auditor's analysis of documented interpretive services, contracts, interviews with staff and inmates concludes Auburn Correctional Facility meets provisions of this standard. In addition, the Agency's efforts to have readily available the PREA education video in twelve (12) languages (audio & captions) beyond English and

	Spanish is sufficient in this auditor’s evaluation to meet requirements of this standard.
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<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #2216, Fingerprinting/Criminal History Inquiry - New Employees and Contractors - 11/01/2018</li> <li>• Directive #2216 11/1/2018-Attachment A</li> <li>• Directive #2232 Non-Competitive and Labor Class Appointments 11/5/20</li> <li>• Directive #2112 Report of Criminal Charges 01/03/2023</li> <li>• Personnel Procedure Manual #407, Civilian Promotions</li> <li>• Personnel Procedure Manual #407A, Security Promotions</li> <li>• Personnel Procedure Manual #406A, Recruitment Process</li> <li>• DIR #2012, Release of Employee Personnel and Payroll Information 10/07/2019</li> <li>• Fair Chance Hiring Application Form</li> <li>• Memo from John Czajka, Deputy Commissioner and Counsel dated August 18, 2015</li> <li>• 9 NYCRR§6051.1 Security, privacy, and limitations on access</li> <li>• NY CLS Exec § 835.Definitions</li> <li>• Interviews</li> </ul> <p><b>Personnel Procedure Manual #407, Civilian Promotions and #407A, Security Promotions</b>, direct that candidates for employment and contractors will be bypassed and not considered for hiring or promotion if they have engaged in any activity delineated in the five subsections of element (a) of this standard, thereby prohibiting the enlistment of services of any candidate who meets the criteria. New York State Civil Service regulates hiring procedures for all state agencies. Security positions are hired from the Civil Service registry and processed through a structured, centralized protocol by the Department’s Employee Investigation Unit (EIU).</p> <p>Any incidents of sexual harassment will be considered in determining whether to hire an individual or to enlist the services of a contractor who may have contact with offenders as directed by Personnel Procedures Manual #407, Civilian Promotions and #407A, Security Promotions. The Director of Personnel will review requests to promote a candidate who have engaged in an incident of sexual harassment and subsequently determine if it is in the best interest of the Department to promote the candidate.</p> <p><b>Personnel Procedure Manual #406A, Recruitment Process</b> establishes policy for contacting the former institutional employer for candidates who have been previously employed by a prison, jail, lockup, community confinement facility or juvenile facility. Each facility is required to complete a Recruitment Process Checklist</p>

(406A1) upon recommending a vacant position be filled and thereby attesting to have contacted all prior institutional employers regarding substantiated allegations of sexual abuse or resignations during a pending investigation of an allegation of sexual abuse and to have sent emails to ODM, Office of Special Investigations and Labor Relations for inquiries on current employees considered for promotion. Interview with Human Resources Manager and review of local personnel files indicates this checklist is completed on all civilian employee hires. Applications cannot be submitted for onboarding without documentation that prior institutional employers have been contacted.

In the past 12 months, there were 101 (9 new hires and 92 transferred in staff) number of persons hired who may have contact with inmates who have had criminal background record checks. In the past 12 months, there were (86) number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates.

**DIR# 2216, Fingerprinting/Criminal History Inquiry - New Employees and Contractors** establishes the policy that all employees and contractors of the New York State Department of Corrections and Community Supervision will be subjected to a criminal history inquiry in order to obtain background information pertinent to the security of operations, to verify data on employment applications, and to receive notification when Department employees are arrested. Criminal history inquiries are conducted by the Department's Employee Investigation Unit (EIU) and must be completed prior to the first date of employment. Criminal background records checks are not conducted after an employee's initial hire as the Agency has a system in place to capture this information on an ongoing basis.

**DIR #2112, Report of Criminal Charges** creates policy to require employees to report when they are charged with the commission of a felony or misdemeanor. Each employee is required to complete a Personal History Questionnaire, Form EIU23. This questionnaire requires yes/no responses to the following questions: 1) "Have you ever been the subject of disciplinary action in connection with any employment? This would include, but is not limited to: suspension, termination, written warning, verbal warning, or formal counseling."; 2) Have you ever been named in any allegations of sexual abuse (i.e., engaging in or attempting to engage in any form of sexual activity with a person by force, overt or implied threats of force, or coercion; without the person's consent, or when the victim was unable to consent) or sexual harassment?"; 3) Have you ever been asked to resign from any employment in lieu of termination or resigned during a pending investigation?"; 4) Have you ever been convicted of a crime where you engaged in or attempted 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 if the victim was unable to consent?"; 5) Have you ever been civilly or administratively adjudicated to have engaged in or attempted 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 if the victim was unable to consent?"; 6) Have you ever engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. DIR# 2112, Report of Criminal Charges, imposes upon employees a continuing affirmative

duty to disclose any of the above misconduct.

Personal History Questionnaire, Form EIU23, informs every applicant for employment that material omissions regarding misconduct or the provision of materially false information are grounds for rejection for appointment and termination.

**Agency policy #2012**, Release of Employee Personnel and Payroll citing that information about a former employee’s reason for leaving employment may be provided to State agencies without authorization from the employee but shall not be provided to parties other than State agencies without written authorization of the employee. This policy is in accordance with the Personal Privacy Protection Law.

Per the memo dated August 15, 2015, “Please also be advised that, for background checks conducted pursuant to statute, the Division will notify DOCCS of subsequent arrests of the subject individual, unless the Division is prohibited by State statute to do so (see, 9 NYCRR §6051.1 [a][S]).”

**9 NYCRR§6051.1 Security, Privacy, and Limitations** on access: For background checks conducted pursuant to statute, DCJS may, unless otherwise precluded by state statute, notify the print contributor of subsequent arrests of the subject individual.

**Conclusion**  
Interviews conducted with the Superintendent and Human Resources Manager combined with the review of sixteen (16) random employees files validate the protocols identified in above narrative are followed at Auburn Correctional Facility finding compliance with this standard.

<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #3053, Alterations and Construction Request 4/22/2019</li> <li>• Example Form 1612</li> <li>• Interviews</li> <li>• Observations</li> </ul> <p>Directive #3053, Alterations and Construction Request 4/22/2019 specifically notes that prior to submitting a request to alter or construct a building, the ability to protect inmates form sexual abuse must be reviewed. In addition, it states, when designing or acquiring any new facility or planned any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such</p>

	<p>technology may enhance the agency’s ability to protect inmates from sexual abuse. Form 1612 Part IV addresses these requirements, specifically requiring that the ability to enhance safety and protect the inmate from sexual abuse is addressed prior to approval of the plans. Auburn Correctional Facility has converted 5 SHU cells ( H-Tank) to a hardened I Contraband watch cell, install a secured welded feed up hatch and make 5 locking toilet seat covers , Attica Correctional will be producing the hatches as well as the toilet seat covers for the cells, located at Auburn correctional in Bldg. #3 D-Block 5th Floor SHU.</p> <p>Auburn Correctional Facility has updated video monitoring system since their last PREA audit. However, DIR #3053, Alterations/Construction Request establishes policy that requires consideration of how such technology may enhance the agency’s ability to protect inmates from sexual abuse when installing or updating electronic monitoring technology. Review of the Staffing Plan indicates of use of electronic surveillance is a consideration when the annual reviews are conducted.</p> <p><b>Conclusion</b></p> <p>Compliance with this standard was determined based on policy review and interviews with Acting Commissioner, Superintendent, and PREA Compliance Manager. No new construction has been conducted since the last PREA audit. Auburn Correctional Facility meets provisions of this standard.</p>
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<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #4027 Sexual Victimization Prevention &amp; Response (07/21/22)</li> <li>• Directive #0700 Office of Special Investigations (OSI) 9/20/2022</li> <li>• SVPPM 115.65-Title: Coordinated Response (02/15/2022)</li> <li>• Facility Operations Manual Title Coordinated Response to Reports of Sexual Victimization PREA #1 (01/20/2023)</li> <li>• New York State DOCCS Division of Health Services Policy #1.60 (07/22/2022)</li> <li>• New York State Sexual Assault Victim Bill of Rights</li> <li>• Notice to Auditor</li> <li>• Interviews</li> </ul> <p>In accordance with <b>DIR #4027, Sexual Abuse Prevention &amp; Response: V. Procedure A. Policies to Ensure Referrals of Allegations for Investigations (PREA Standard 115.22/222):</b> An administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment, and unauthorized relationships. Pursuant to Directive #700, “Office of Special Investigations (OSI),” the Commissioner has designated OSI to conduct these investigations.</p> <p><b>Directive #0700 Office of Special Investigations (OSI) 9/20/2022</b> addresses</p>

the role of the Office of Special Investigations (OSI) Sex Crimes Division (SCD) who conduct investigations involving sexual misconduct.

**SVPPM 115.65-Title: Coordinated Response**

**D. EVIDENCE COLLECTION AND PRESERVATION** (Incarcerated Individual-ON-Incarcerated individual SEXUAL ABUSE) In most cases where physical evidence may exist, evidence collection and preservation will be conducted by the Office of Special Investigations or the State Police. If, however, the State Police or the Office of Special Investigations is unable to respond promptly, it may be necessary for facility staff to collect evidence required from the victim and the suspected perpetrator as directed by the Superintendent or designee and only after consultation with the Office of Special Investigations. The procedures for evidence collection and preservation may apply for reported or known victims of sexual abuse and are only to be used by facility staff in connection with an incarcerated individual-on-incarcerated individual sexual abuse investigation and only with proper authorization from the Office of Special Investigations. The Superintendent or designee shall ensure that trained, uniformed personnel are designated to perform as Facility Evidence Collectors in the rare event that facility personnel are required to perform such duties. A current list of the Facility Evidence Collectors will be maintained in the Facility's RED Book.

Note: Approved evidence collection procedures will be used as a guideline for staff collecting evidence in an Incarcerated Individual on Incarcerated Individual sexual abuse investigation. All evidence collected will be stored and secured in accordance with Directives #4931, "Aggravated Harassment of an Employee by an Incarcerated Individual" and #4910A, "Contraband/Evidence-Handling, Storage, and Disposition."

1. Sexual Abuse Evidence Bag and Recovery Kit: The Deputy Superintendent for Security shall ensure that a "Sexual Abuse Evidence Bag and Recovery Kit" is assembled and stored in the Watch Commander's Office. The Sexual Abuse Evidence Bag and Recovery Kit contains the necessary items with which to collect and preserve evidence from a sexual abuse crime victim and incarcerated individual perpetrator.
  - a. The Sexual Abuse Evidence Bag and Recovery Kit shall be sealed and utilized only when an incarcerated individual is being transported to an outside hospital for a SAFE/SANE examination, upon establishment of a crime scene in connection with a sexual abuse report, or upon consultation with the Office of Special Investigations.
  - b. After any use, the kit will be inventoried. Any item which has been removed will be replenished prior to the end of the Watch Commander's shift and the seal replaced. If replenishment is not possible by the end of the shift, the Deputy Superintendent for Security shall be contacted for direction. That direction shall be documented in the Watch Commander's logbook. The Deputy Superintendent for Security shall establish a procedure for securing and conducting an annual inventory of the Sexual Abuse Evidence Bag and Recovery Kit.
  - c. The supervisor should check the chain of custody on all pieces of evidence, check that the evidence bags are proper sealed (taped, signed and dated properly), and that paperwork is completely filled out."
  - d. The Sexual Abuse Evidence Bag and Recovery Kit Shall Contain the Following Items: 1 - Laminated "Inventory Card" Copy of this Manual Copy of the Facility's Response to Reports of Sexual Victimization FOM 3-Photography Roll Cards 1 -



Clipboard 6 - Disposable pens 18 Large- Brown paper evidence bags 3 - Disposable face shields 3 - Pairs of shoe protection 1 - Roll of 3"x3" red "Bio-Hazard" decals 12 - Chain of custody forms 2 - Marking pen, "Sharpie™" permanent, black ink 2 - Rolls of 1 ½ inch evidence tape 3 - Surgisafe absorbent pads (available from Central Pharmacy)

Note: Prior to collecting any evidence, the Watch Commander will ensure two complete sets of the incarcerated individual victim's State issued clothing (Pants, Shirts, undergarments and socks) are brought to the evidence collection site. If the incarcerated individual victim's living quarters is deemed a crime scene, State clothing will be issued from either the State Shop, SHU, or any other area in the Facility that stocks State clothing. One set of State clothing will be issued to the incarcerated individual victim at the Facility evidence collection site, by the Evidence Collector and the other set will be brought with the Trip Officers to the SAFE/SANE Hospital for clothing exchange during the SAFE/SANE examination. The incarcerated individual perpetrator will be issued one set of replacement clothing as outlined in the procedure above.

New York State Department of Corrections and Community Supervision Division of Health Services Policy #1.60 directs that all inmate allegations of sexual assault be addressed consistent with community standards for handling allegations of sexual assault and outlines specific procedures to be followed and that are in accordance with the National PREA Standards 115.21 and 115.82. All victims of sexual abuse shall be afforded access to forensic medical examinations at an outside facility, without financial cost, where evidentially or medically appropriate. Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. No incident occurred at Auburn Correctional Facility in the last 12 months as verified in interviews with the Deputy Superintendent for Health and Sex Crimes Division Investigators.

SAFE/SANE examinations will be provided at University Hospital SUNY Health Science Center in Syracuse, NY which is the nearest hospital providing these services. St. Joseph's Hospital Health Center in Syracuse, NY, would be a secondary location for use if SUNY could not provide. Strong Memorial Hospital 601 Elmwood Ave, Rochester, NY 14642 is also an alternate location for these services. The New York Public Health Law section 2807-c states that no general hospital shall refuse to provide hospital services to a person presented or proposed to be presented for admission to such general hospital by a representative of a correctional facility based solely on the grounds such person is an inmate of such correctional facility. No general hospital may demand or request any charge for hospital services provided to such person in addition to the charges or rates authorized in accordance with this article, except for charges for identifiable additional hospital costs associated with or reasonable additional charges associated with security arrangements for such person.

New York State Department of Corrections and Community Supervision, Division of Health Services, Policy #1.60, Sexual Assault, Section: Health Care Services, directs all victims of sexual abuse shall be afforded access to forensic medical examinations

at an outside facility, without financial cost, where evidentially or medically appropriate. Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. Expeditious transportation will be coordinated with the Watch Commander to take the inmate victim to an outside hospital emergency department staffed with a certified Sexual Assault Forensic Examiner (SAFE) or certified Sexual Assault Nurse Examiner (SANE) List of SAFE/SANE Hospitals or any other hospital upon confirmation that a SANE/SAFE and a Victim Advocate are available to provide services. Interviews with the Facility Nurse Administrator, Facility Investigators, and PREA Facility Point Person confirmed inmates would quickly be provided victim's advocate and/or rape crisis center services.

There were (0) number of forensic medical exams conducted during the past 12 months; (0) number of exams performed by SANEs/SAFEs during the past 12 months; (0) number of exams performed by a qualified medical practitioner during the past 12 months.

**Conclusion**

Policy supports the requirements of the provisions. Processes are in place to ensure an incarcerated individual is sent to a hospital for a SANE exam when allegations are made to support a referral. State law and policy support that a qualified advocate is available through the hospital. Several of the agency trained investigators have become certified for evidence collection and photographing of crime scenes, above and beyond the specialized training required of investigators (certificates provided to the auditor) therefore ensuring a uniform accurate evidence protocol is followed. For this reason, the auditor finds that the facility meets the standard.

<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #4027 Sexual Victimization Prevention &amp; Response (07/21/22)</li> <li>• Directive #0700 Office of Special Investigations 9/10/20</li> <li>• SV Summary Monthly Report</li> <li>• Observations</li> <li>• Interviews</li> </ul> <p>In accordance with <b>DIR #4027, Sexual Abuse Prevention &amp; Response: V.</b> Procedure A. Policies to Ensure Referrals of Allegations for Investigations (PREA Standard 115.22/222): An administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment, and unauthorized relationships. Pursuant to Directive #700, "Office of Special Investigations (OSI)," the</p>

	<p>Commissioner has designated OSI to conduct these investigations.</p> <p><b>DIR #0700</b> authorizes and designates the Office of Special Investigations as the official investigative body for all administrative and criminal investigations for the New York State Department of Corrections and Community Supervision under Section 112 of the Correction Law. The Office of Special Investigations is further charged with ensuring that substantiated allegations are referred to the appropriate person(s) for administrative, disciplinary, and/or prosecutorial action. All complaints and information received by Office of Special Investigations relative to possible investigations are documented, reviewed, and processed. Office of Special Investigation Sex Crime Unit has the authority to refer them to New York BCI Bureau of Criminal Investigations and would work in conjunction with the local District Attorney's Office. Interviews with the Senior Investigator of the Sex Crimes Division confirmed procedures are well established and followed.</p> <p>In the past 12 months, there were thirteen (13) number of allegations of sexual abuse and sexual harassment received. In the past 12 months, there was fourteen (14) number of allegations resulting in an administrative investigation. In the past 12 months, there were eleven (11) number of allegations referred for criminal investigation. During the time of this audit there were ten (10) investigations are ongoing.</p> <p><b>Conclusion</b></p> <p>DOCCS has a collaborative working relationship among, the Bureau of Labor Relations, Counsel's Office and District Attorney's Offices across the state with jurisdiction over a correctional facility, so that the strongest possible evidentiary case presented can hold individuals accountable for any sexual misconduct that might be committed. In a recently updated refresher training for staff, a District Attorney participated in the message sent to staff. She noted the DOCCS's commitment to end sexual victimization in prison and OSI's integrity in each investigation. My interaction with the OSI investigators demonstrated their professionalism and thoroughness in investigating all complaints they received. The investigative files I reviewed were exceptional in content and organization. Auditor's analysis of policy review, investigative file review, interviews with Acting Commissioner, Superintendent, PREA Point Person and OSI Investigators, and personal observations indicate Auburn Correctional Facility exceeds this standard.</p>
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<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Training Manual Section: 0.100 - Frequency Training Chart and Training Bulletins - 04/15/2022</li> </ul>

- Training Manual Subject 8.300A – Recruit Training Catalog of Courses-04/15/2022
- Sexual Abuse Prevention and Response Training (code 35029)
- Training Manual Subject #7.000 – Initial Employee Training/40-hour Orientation 08/19/2022
- Training Manual Section #7.100 Employee Familiarization In-Service Training Program 02/28/2022
- Memo – Deputy Commissioner/Associate Commissioner (PREA Coordinator) 08/19/2022 RE: Sexual Abuse Prevention and Response Training
- Sexual Abuse Prevention and Response Introduction – Transfer Lesson Plan 17093 – 01/13/2020
- Annual Training Bulletin 07/20/2022
- Memo – Commissioner 07/06/2022 RE: Policies and Standards Generally Applicable to all Employees
- Sexual Abuse Prevention and Response Refresher Training Lesson Plan – 03/09/2022
- Report of Training Form (17093): Sexual Abuse Prevention and Response Introduction – Transfer (PREA) RTF – PREA 02/2022
- KHRT Report Course and Completion #17078 and #35029
- Observations
- Interviews

**Training Manual Section: 0.100** - Frequency Training Chart and Training Bulletins confirms that PREA Training is provided every two years, and a module on Professional Boundaries provided annually. Training Manual Section #7.000, 40 Hour Orientation/Initial Employee Training confirms that all civilian new employees receive mandatory training which includes 3-hour module on Sexual Abuse Prevention and Response. Recruit Training Program ensures that sexual abuse prevention and response training is addressed in recruit training. It is a 3-hour training. Training Bulletin ensures that PREA refresher is addressed at line-up training annually for uniformed line staff, and as a written refresher for non-uniformed and supervisory staff. It includes the following topics: zero tolerance for sexual abuse and sexual harassment; definitions of sexual abuse and sexual harassment; all staff have a duty to report including third party allegations, staff neglect and misconduct and anonymous allegations; how to report and investigation of all allegations, supervision and monitoring, employee training and limits to cross gender viewing.

The auditor reviewed Sexual Abuse Prevention and Response Refresher Training Lesson Plan. It demonstrates that training covers the following topics: Definitions, Zero Tolerance Policy, Inmate/Parolee right to be free from sexual abuse and sexual harassment, inmates have the right to be free from retaliation for reporting sexual abuse or harassment, dynamics of sexual abuse and sexual harassment in confinement for male inmates and female inmates, common reactions of victims, communicating effectively with lesbian, gay, bisexual, transgender and intersex, or gender nonconforming inmates, how to avoid inappropriate relationships, employee responsibilities of prevention, detection, reporting and response and mandatory reporting. Subject 7.000 40-Hour Orientation/Initial Employee Training confirms that PREA training is provided to all new employees, a 3-hour course. An interview with the trainer at a previous facility confirmed that new staff do not have incarcerated

individual contact before receiving training on PREA which supports clarification provided in the FAQ. A report demonstrating that staff have been trained for course 35029, Preventing Sexual Abuse, and 17078 PREA Refresher was provided to the auditor. All random staff interviews confirmed that staff are trained regularly and training includes the topics required in the provision.

**Training Manual Section #7.100 Facility Familiarization In-Service Training Program** specifies that all transfer staff receive familiarization on compliance with PREA and the Department's Sexual Abuse Prevention and Response procedures. It further states that the training will be tailored to the gender of the incarcerated individuals at the facility, including gender dynamics, for staff who are transferring from a facility that houses only male incarcerated individuals to a facility that houses only female incarcerated individuals, or vice versa. The training at this facility provides dynamics of abuse between male incarcerated individuals. The PREA Introduction/Transfer Training for male classified facilities reinforces key terms, zero tolerance, communicating effectively and professionally with LGBTIQ+ and GNC incarcerated individuals, and five actions an employee takes as a first responder and three categories of sexual abuse and misconduct all employees have a duty to report. Although it was reported that no staff had transferred from a female facility to this facility, personnel files were reviewed which confirmed orientation training received upon arrival at this facility (as required by NYSDOCCS), which did include PREA refresher training.

As stated, **Training Manual Subject: 0.100 - Frequency Training Chart and Training Bulletins** - confirms that PREA Training is provided every two years, and a module on Professional Boundaries provided annually. Documents were requested and received that confirmed that staff have received PREA Refresher training. All random and formal interviews with staff confirmed to the auditor that staff have been trained as required by this standard. The training form signed by staff after completion of training states, "By signing below you confirm that you participated in the Prevention of Sexual Abuse - PREA training program and that you understand the training that you have received." One example of this form was provided with the pre-audit documentation. Additional examples were randomly requested and received during the on-site audit.

### **Conclusion**

The training curriculum supports that all ten topics required by the standard are thoughtfully and thoroughly addressed in the curriculum. The training provides information specific to working with male incarcerated individuals. Training occurs every two years with a refresher training annually. Documentation of training records for courses 35029 PREA and 17078 Refresher were provided to further support that the facility is compliant. It demonstrated that all staff have been trained. Focus groups of staff and incarcerated individuals were conducted on the Department level to provide greater insight into why some staff and incarcerated individuals commit sexual abuse offenses. PREA Assistant Deputy Superintendents (ADS)s have been trained in Forensic Experiential Trauma Interview (FETI). FETI presents a science and practice-based, trauma informed approach to interviews. In addition, the PREA ADSs and OSI are hands on with training staff in the facilities. They provide direct training

	<p>to medical and mental health staff on specialized training; security supervisors on coordinated response; and guidance/counseling staff on risk screening. All staff interviews support that staff have received the training and staff were knowledgeable regarding the various aspects required by the standard. After review and analysis of the documentation, interviews with staff, the auditor concludes that the standard exceeds the standard requirements.</p>
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<b>115.32</b>	<b>Volunteer and contractor training</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #4027 Sexual Abuse Prevention &amp; Response (07/21/22)</li> <li>• Directive #4750 Volunteer Services Program (7/21/20)</li> <li>• Directive # 4071 Guidelines for Construction Projects (03/23/2021) Section III D 3</li> <li>• Training Manual #7.150 Orientation Program for Per Diem and Non-Departmental Employees (08/19/2022)</li> <li>• Guidelines for Construction Projects FORM #4071A 01/2021</li> <li>• Standards of Conduct for Volunteers 12/2018</li> <li>• Application for Volunteer Status 06/20 Form MFVS 3080</li> <li>• Review volunteer/contractor training records</li> <li>• Interviews</li> </ul> <p><b>DIR #4027</b> designates that all contractors and contract employees, volunteers, and interns shall receive orientation and periodic in-service training consistent with their level of incarcerated individual contact relating to the prevention, detection, and response to sexual abuse and sexual harassment.</p> <p><b>DIR #4750</b> directs that during orientation, volunteers must be cautioned regarding the seriousness of personal/emotional involvement with incarcerated individuals, including visiting, corresponding, and accepting phone calls and that volunteers are prohibited from having any sexual contact or engaging in any sexual conduct with an incarcerated individual.</p> <p>For purposes of applicability, Penal Law section 130.05 states an employee also includes any person, including a volunteer, providing direct services to individuals in a state correctional facility pursuant to a contractual arrangement or written agreement with the Agency, thereby inclusive of volunteers providing services to individuals. Based on the Application for Volunteer Status Acknowledgement of Orientation, all volunteers are provided with the training and a copy of the policy DIR #4027 and The Commissioner's Prevention of Sexual Abuse Memorandum.</p> <p><b>Per DIR #4750</b>, all volunteer applicants must read the most updated version of the Policy on the Prevention of Sexual Abuse and acknowledge receipt of the policy in writing and acknowledge they understand that they will be held accountable for and</p>

	<p>act in accordance with the policy and the law. The job-specific training for volunteers will be delivered by the volunteer's staff supervisor, who will ensure the volunteer acknowledges that they understand the Department's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report such incidents by signing Form #MFVS3087.</p> <p><b>DIR #4071</b> includes procedures for required contractor training on PREA and directs each contract worker to be issued a copy of Form #4071A which is a handout that includes the zero-tolerance, definition of sexual abuse, definition of sexual harassment, the duty to report, confidentiality, and a requirement to sign the acknowledgment form. The Acknowledgement Statement includes the signature of both the contractor and the DOCCS employee who reviewed the procedures with the contractor.</p> <p><b>Conclusion</b></p> <p>There were (176) number of volunteers and (86) contractors, who may have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. After review of the related policies, observations during the tour, formal and informal interviews with contract employees and volunteers, and observation of the training records and training curriculum, this auditor finds Auburn Correctional Facility meets the requirements of this standard.</p>
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<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #4021 Inmate Reception/Classification dated 01/23/2019</li> <li>• Directive #4490 Cultural and Language Access Services 07/29/2022</li> <li>• Directive #2612 Incarcerated Individuals with Sensorial Disabilities 10/01/2020</li> <li>• SVPPM 115.33-Incarcerated Individual Education/Training and Education (7/11/22)</li> <li>• Auburn Orientation Manual Updated 11/2022</li> <li>• Memo Deputy Commissioner/Associate Commissioner 06/18/2015 RE: PREA Inmate Orientation Film Implementation</li> <li>• Memo Associate Commissioner - 05/05/2022 RE: New and Updated PREA Materials</li> <li>• Inmate Orientation Outline</li> <li>• Form 115.33L Report of Inmate Training Participation</li> <li>• Memo Deputy Commissioner 3/25/16 RE: Revised Transitional Services Phase I</li> <li>• Transitional Services Phase I Manual - Male Facilities Introduction and PREA Module 2021</li> <li>• Brochure Language Guide Poster -06-2020</li> <li>• Prevention of Sexual Victimization in Prison (English and Spanish) 05/2020</li> <li>• Memo Associate Commissioner - 10/26/2015 RE: Ending Sexual Abuse Behind the</li> </ul>

## Walls: An Orientation Memo Associate

DIR #4021 establishes that upon arrival at an Intake Center, each incarcerated individual receives a gender specific pamphlet "The Prevention of Sexual Abuse in Prison; What Inmates Need to Know," Form #DC055/#DC053, according to the facility classification and distribution is to be documented on Form #4021A. This pamphlet explains the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and addresses prevention, self-protection (situation avoidance), reporting sexual abuse and sexual harassment, and the availability of treatment and counseling. This information is provided in formats accessible to all incarcerated individuals.

DIR #4021 further requires for Intake/Reception/Classification Centers, each individual views the Orientation Video and the gender-specific version of the film "Ending Sexual Abuse Behind the Walls; An Orientation" during the reception and classification process. Viewing of the film is to be documented on Form #115.33, Report of Inmate Training Participation, and filed in the individual's guidance file. The film, brochures, and handbooks are available in English, Spanish, Haitian-Creole, Russian, Polish, Italian, Chinese, and Korean. The SAPEO has published a PREA - Sexual Abuse Prevention Inmate Orientation Outline that is to be used to guide staff in the delivery of the sexual abuse prevention program during orientation. Step-by-step instructions are given to assist staff in covering the required information and provides prompts for engaging the incarcerated individuals during the education and includes showing of the film "Ending Sexual Abuse Behind the Walls; An Orientation." The outline includes for the presenter: 1) Introduction and history, and explains the role and duties of the PREA Coordinator, the role and duties of the ADS/PCM, and explains multiple ways to make a report; 2) defines PREA; 3) defines the DOCCS's zero-tolerance policy; 4) explains the right of every incarcerated individual to be free from sexual abuse and sexual harassment and what that means; 5) explains behavior expectations and defines sexual abuse and sexual harassment; 6) explains what to do if abused; 7) explains how and to whom to report, including third-party and anonymous reports; 8) covers the consequences of a false report; 9) explains the availability of Victim Services; 9) explains the difference between an authorized Pat Frisk and sexual abuse; 10) covers confidentiality; 11) explains the requirement of opposite gender staff to announce presence on housing unit and why it is done; 12) provides guidance for question/answer period. This program provides a comprehensive delivery of the educational material required by this standard. Any individuals who were admitted to the DOCCS prior to August 20, 2012, were provided the comprehensive PREA education between July 13-31, 2015. The video "Ending Sexual Abuse Behind the Walls" was shown throughout the DOCCS at all facilities during that week. The facility provided an example of training documentation for one individual who arrived at Fishkill CF before the PREA implementation.

DIR #4490 establishes policies and procedures to ensure that all individuals with LEP have meaningful access to programs, services, and benefits. The directive further requires that LEP individuals will have access to vital documents, which include PREA complaint documents and procedures. The agency maintains a contract for interpreting services through Language Line Services, Inc., which was provided for



the auditor's review. Additionally, designated bilingual staff interpreters are available to assist individuals with interpretation. The PREA Education Film "Ending Sexual Abuse Behind the Walls: An Orientation" is provided in DVD format appropriate to the gender classification of the facility and with tracks and captioning in English, Haitian Creole, Italian, Korean, Mandarin Chinese, Polish, Russian, and Spanish. A sample of the video transcript was provided to the auditor for review. Interviews with the draft sergeant at Collins CF confirmed that the facility provides each individual coming into the facility with The Prevention of Sexual Victimization in Prison, What You Need to Know brochure. Delivery of this brochure to the individual is documented on the Draft Receipt, form #4021A, with the appropriate language circled if issued in other than English. This pamphlet has been translated into and is printed in English, Bengali, Chinese, Korean, Russian, Spanish, Haitian/Creole, Polish, Yiddish, Arabic, and Italian. The auditor also observed these pamphlets in various common areas of the facility, including the intake area, library, and resource areas. Additionally, the PREA video "Ending Sexual Abuse Behind the Walls: An Orientation" is available in English, Spanish, Haitian Creole, Russian, Polish, Italian, Chinese, Korean, and closed caption and is gender specific. Interviews with the AC/PREA Coordinator, PCM, healthcare staff, security staff, and counseling staff indicated appropriate assistance is provided to individuals when needed to ensure meaningful communication. When interviewing staff, all employees indicated their knowledge of the Language Assistance Line. The auditor selected three incarcerated individuals who were listed as LEP to interview. The facility has designated staff interpreters who are bilingual in addition to the Language Line Services contract. When speaking with individuals who are LEP, they informed the auditor that their inability to speak English fluently had not affected their ability to participate in any facility-based services, including the Department's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The auditor reviewed three files for LEP individuals, and the documentation indicated they had received the PREA education material in a language they understood. Interviews with the AC/PREA, ADS/PCM, ORCs, healthcare staff, and security staff indicated appropriate assistance is provided to individuals when needed to ensure meaningful communication. Additionally, when interviewing random staff, all employees indicated their knowledge of the Language Assistance Line. A monthly report is generated on Form #4490C, Language Access Monthly Report, to track the use of interpreters for LEP individuals. The auditor was provided with a copy of the Language Line Usage report, which confirms that language interpreter services are used regularly at the facility.

DIR #2612 establishes policy to ensure compliance with Title II (Subtitle A) of the Americans with Disabilities Act (ADA), Section 504 of the Rehabilitation Act, and the New York State Human Rights Laws prohibiting state and local entities from discriminating against any qualified individual with a disability in their programs, services, and activities, and utilizing methods of program administration that have the effect of subjecting individuals with disabilities to discrimination. Programs and services provided to incarcerated individuals by DOCCS must ensure accessibility and usability by qualified individuals in the most integrated setting. The facility provided the Inmate Education & Orientation Film Facilitator Guide and the DOCCS Inmate Orientation Films Facilitator Training for review. Both provide that the agency provides

individuals with education in formats accessible to all persons, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, and those with limited reading skills. If an individual has difficulty understanding the written material due to a disability or limited reading skills, appropriate staff shall assist. Four facilities within the DOCCS have been identified to provide comprehensive accommodations to individuals with serious sensory, physical, hearing, visual, and cognitive impairments. Auburn CF can accommodate some disabilities but is not one of the four designated facilities for serious impairments.

DIR #2612 ensures for individuals who are deaf or hard of hearing, who primarily communicate in sign language, a sign language interpreter certified by the National Registry of Interpreters for the Deaf or other National or New York State credentialing authority, or a sign language interpreter who can interpret effectively, accurately, and impartially both receptively and expressively, using any necessary specialized vocabulary will be provided.

Auditor's review of (17) selected inmate files from the interview list indicated each of them had received the initial comprehensive education at the appropriate facility within the designated time frame as evidenced by documentation in the inmate's file. PREA training delivered at Auburn Correctional Facility is documented through signatures of the inmates on the Report of Inmate PREA Training Participation Form 115.33.

All inmates transferred to Auburn Correctional Facility receive a PREA pamphlet in preferred language upon arrival, explaining the agency's and facility's zero-tolerance policy regarding sexual abuse and sexual harassment and explaining how to report incidents or suspicions of sexual abuse or sexual harassment. The PREA Pamphlet is offered during the interview with the Draft Sergeant who covers the Zero Tolerance policy verbally and tells the inmate how to make a report. This process was observed by auditor during the site visit and further validated through inmate interviews, and review of Draft Receipts for 3 randomly selected inmate records.

All incoming transfers also receive PREA orientation which includes viewing the PREA video "Ending Sexual Abuse Behind the Walls: An Orientation", facilitated by staff, and are educated on policies and procedures specific to Auburn Correctional Facility within 10 days. Auburn Correctional Facility PREA-Sexual Abuse Prevention A video checkout log is maintained to record the date and to whom the video was checked out and when returned. Inmate Orientation Outline provides detailed background information to staff presenting the Sexual Abuse Prevention Inmate Orientation to ensure comprehensive orientation for every newly received offender. This education is delivered in a classroom setting and is documented through signatures of the inmates on the Report of Inmate PREA Training Participation Form 115.33. Auditor's review of the documented training indicates the orientation takes place generally within five days, but at least within one week of arrival. New arrival processing and an orientation session was attended by the lead auditor. Inmate training records selected from the interview list and an additional selected inmate training records were reviewed indicating all have received orientation according to procedures stated above.

There are (4024) inmates at Auburn Correctional Facility who were admitted to the facility during the past 12 months and were provided the comprehensive PREA education. There were (999) inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake. Random inmates interviewed and during discussion on the facility tour all acknowledged they have received PREA information upon arrival at the facility and that it is reinforced and readily available through staff interaction and information posted in the housing areas. They were able to explain how to report an incident and were aware of the zero-tolerance policy. Auditors observed a variety of culturally diverse, informative PREA posters posted in English and Spanish throughout the facility. Some of these posters address the zero tolerance, other indicate how to access victim advocacy services and a third poster specifically for reporting includes: "Report Sexual Abuse" in large lettering with a paragraph about reporting on the left in English and the right in Spanish and "Report Sexual Abuse" translated in Mandarin Chinese, Haitian-Creole, Italian, Korean, Polish, and Russian across the bottom.

In addition to providing the above discussed education, the agency ensures that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats as directed through DIR #4027. Offenders are provided an Inmate Handbook containing PREA information and provided instructions on reporting methods, and what to do if an offender feels threats to his/her safety. Handbooks are available in English and Spanish. Zero-Tolerance Policy posters (English and Spanish) are placed throughout the living units, employee break rooms, offender and employee dining areas, law library, general library, offender housing areas, offender work and educational areas, and multi-purpose areas and visitation. Inmate Handbook in both English and Spanish is available in the Law Library. Auditor observed a thorough display of posters and accessibility of the Inmate Handbook.

Inmates were well versed on the zero-tolerance policy and knew how to access help. Inmates were able to explain their right to be free from sexual abuse and sexual harassment, and their right to be free from retaliation for making a report. Inmates were aware they could make a report on behalf of another offender and were aware that a report could be made on their behalf by a 3rd party. Some inmates referenced being able to look in the handbook or get information from the posters displayed throughout the facility. All offenders said they would be able to talk directly to staff if they needed to tell someone. The inmates interviewed expressed feeling safe at Auburn Correctional and denied being aware of any sexual activity at the facility. More than half of the inmates interviewed said they knew about the outside advocacy services, but most said they really hadn't paid attention to it because they haven't had a need.

### **Conclusion**

New York State Department of Corrections and Community Supervision provides a comprehensive inmate PREA education to the inmate population beginning at

	<p>reception into the agency. The facility is only required by standards to provide education to new inmates related to facility specific information; however, Auburn Correctional Facility provides the same comprehensive education that is provided at reception facilities and in a variety of formats. Based on personal observations, facility tour, documentation review, training records review, review of handbook and pamphlets, inmate education curriculum review, inmate interviews, and interviews with Prison staff, Auburn Correctional Facility meets requirements of this standard.</p>
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<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Specialized Training Investigations 08/24/2022</li> <li>• PREA Specialized Training Investigations</li> <li>• Investigating Physical and Sexual Abuse in an Institutional Setting 11-14-2016</li> <li>• NIC Investigating Sexual Abuse in Confinement Overview</li> <li>• RTF Investigating Physical and Sexual Abuse</li> <li>• KHRT for Course 17072 OSI Investigators Trained</li> <li>• RTF Investigating Physical and Sexual Abuse</li> <li>• Information Obtained from Interviews</li> <li>• Notice to Auditor</li> </ul> <p>In accordance with Office of Special Investigations Policy Manual Chapter 5, Section III.2., in addition to the general training provided to all employees and discussed in 115.31, the agency ensures its investigators receive training in conducting sexual abuse investigations in confinement settings. Office of Special Investigations Sex Crimes Division investigators receive specialized training. All new Office of Special Investigations Sex Crimes Division Investigators attend Basic Office of Special Investigations Investigator School which includes the following curricula: New York State Department of Corrections and Community Supervision Office of Special Investigations Overview Training, NIC PREA course “Investigating Sexual Abuse in a Confinement Setting” initial and advanced, and Communicating Effectively and Professionally with LGBTI Offenders. Office of Special Investigations specific training is documented utilizing the RTF-PREA submitted to and maintained by the Office of Special Investigations Training Coordinator. This demonstrates the investigators have completed the specialized training.</p> <p>Auditor’s review of the specialized training curricula discussed in section (a) above reveals instruction for 1) conducting sexual abuse investigations in confinement settings; 2) techniques for interviewing sexual abuse victims; 3) proper use of Miranda and Garrity warnings; 4) sexual abuse evidence collection in confinement settings; 5) criteria and evidence required to substantiate a case for administrative action or prosecution referral. consistent with requirements of this standard.</p>

	<p>New York State Department of Corrections and Community Supervision maintains documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations through participation rosters and hours entered into the training database upon completion. Training records are maintained by the Office of Special Investigations Training Coordinator. There are (28) investigators employed by the agency and/or facility who are responsible for conducting criminal investigations into allegations of sexual abuse or sexual harassment. There are (28) investigators employed by agency and/or facility who are responsible for conducting administrative investigations into allegations of sexual abuse or sexual harassment.</p> <p><b>Conclusion</b></p> <p>Policy, training curriculum, interview with two investigators, and training certificates provide sufficient evidence that the facility is compliant with the provisions of the standard. Review of the documentation shows that the investigation unit has significant experience in the unit, received the required training, and has received additional above and beyond training. Therefore, the auditor finds that the facility exceeds the standards.</p>
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<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Training Manual Subject - 7.000, 40 Hour Orientation/Initial Employee Training - 08/19/2022</li> <li>• Training Manual Subject - 7.150, Orientation Program for Per Diem and Non-Departmental Employees - 08/19/2022</li> <li>• Inmate Sexual Assault Post Exposure Protocol/PREA (317083)</li> <li>• Office of Mental Health Memorandum of Understanding - 9/14/2016</li> <li>• Report of Training Form</li> <li>• Observations</li> <li>• Interviews Medical Staff and Mental Health Staff</li> </ul> <p>According to the MOU between the New York State Office of Mental Health (OMH) and the New York State Department of Corrections and Community Supervision dated 9-14-16, New York State Department of Corrections and Community Supervision provides a standardized orientation to all new OMH employees working in correctional facilities. All full and part time OMH employees working in any New York State Department of Corrections and Community Supervision facility participate in this training as required by the Prison Rape Elimination Act (PREA). Additionally, all full and part time mental health care practitioners (a mental health professional who, by virtue of education, credentials, and experience is permitted by law to evaluate and</p>

care for patients within the scope of his or her professional practice) shall participate in specialized training provided by New York State Department of Corrections and Community Supervision as required by PREA, 28 C.F.R. § 115.35.

Medical and mental health providers receive Inmate Sexual Assault Post Exposure Protocol/PREA (317083) which includes: (1) How to detect and access signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. This specialized training curriculum was reviewed by auditor, finding it inclusive of all stated objectives above and consistent with 115.35 requirements. In addition, this lesson covers related agency medical and investigative policy and procedures and encourages a collaborative, victim centered approach to assessing sexual abuse incidents. This program is designed to increase the employee's knowledge of this protocol so that he/she can adopt work practices which will maintain a high level of care for the inmate population.

Facility medical staff does not perform forensic examination, offenders are taken to nearest hospital for this service, as supported by agency policy and interviews with Facility Nurse Administrator and Superintendent.

This auditor reviewed New York State Department of Corrections and Community Supervision Course Completion for Class 17083 PREA Training for Medical and Mental Health Providers for 52 staff. All full and part time medical and mental health staff (100%) received required training.

Training Manual, Subject: 7.000, 40 Hour Orientation/Initial Employee Training, dated 8-13-2018, dictates all full and part-time medical and mental health employees are required to attend the civilian (non-peace officer) training. This training consists of the Initial Employee Training Program (code 27018) including the following classes: 35029 Sexual Abuse Prevention and Response (3 Hours) Job Specific - Immediate Supervisor: Policy on the Prevention of Sexual Abuse of Offenders (August 19, 2022). All employees receive training on DOCCS Zero Tolerance Policy for sexual abuse and harassment, and how you can fulfill your responsibilities under our policies. Refresher training is provided every other year and each year refresher information training is provided via training bulletin #7 and the Commissioner's policy statement on the Prevention of Sexual Abuse of Incarcerated Individuals and Parolees.

### **Conclusion**

This auditor interviewed medical and mental health supervisors in Auburn Correctional Facility as well as informal conversations with employees scheduled to work in those areas. All staff in these areas were knowledgeable about the training received and they all confirmed having received the general and specialized training upon hire and then annually at in-service. A review of their training documentation provides evidence the training has been delivered and the participants understand the training and requirements of PREA. Based on interviews, training and personnel documentation, curricula and policy review, Auburn Correctional Facility meets requirements of this standard.

<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• SVPPM 115.41-Screening for Risk of Sexual Victimization and Abusiveness, (01/23/2023)</li> <li>• Directive #4021 Inmate Reception/Classification (1/23/2019)</li> <li>• Form 4021A Draft Receipt (rev. 05-15-20)</li> <li>• Facility Operations Manual (FOM) PREA Risk Screening #2 (01/18/2023)</li> <li>• 115.41M PREA Risk Screening Form Male (04/2022)</li> <li>• 115.41 Gender Identity Form (06/2020)</li> <li>• Interviews Specialized Staff</li> <li>• Observations</li> </ul> <p>SVPPM 115.41, Screening for Risk of Sexual Victimization Abusiveness outlines all incarcerated individuals will be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other incarcerated individuals or sexually abusive towards other incarcerated individuals. Each Facility shall assess each incarcerated individual for their risk of being sexually abused by other incarcerated individuals or sexually abusive towards other incarcerated individuals in accordance with a procedure outlined in the Facility Operation Manual item entitled "PREA Risk Screening." This policy shall delineate facility-specific procedures to assess an incarcerated individual's risk.</p> <p>Each Facility PREA Risk Screening policy shall be derived from the approved Risk Screening FOM Template. Consistent with recommendations from the U.S. Department of Justice, the PREA Risk Screening shall address the following risk factors utilizing an objective screening instrument, Form 115.41M for male classified facilities and Form 115.41F for female classified facilities.</p> <p>It is the policy of Auburn Correctional Facility, that all incarcerated individuals received into Auburn Correctional Facility shall be screened by a Sergeant or above, within 24- hours of arrival at the facility, and reassessed by an assigned Offender Rehabilitation Coordinator (ORC) ordinarily within 14-days of arrival at the facility. The Assistant Deputy Superintendent PREA Compliance Manager shall make a final risk assessment determination ordinarily within 30 days of the incarcerated individual's arrival at the facility. When the Assistant Deputy Superintendent PREA Compliance Manager is absent from the facility, the PREA Point Person shall act in their place with respect to implementation of PREA Risk Screening procedures. Incarcerated individuals shall not be disciplined for refusing to answer or for not disclosing complete information in response to questions asked pursuant to the PREA Risk Screening process.</p> <p>All incarcerated individuals shall be assessed for their risk of being sexually abused by other incarcerated individuals or sexually abusive toward other incarcerated individuals upon arrival at the facility. This includes all incarcerated individuals being</p>

received into Auburn Correctional Facility from any other DOCCS facility, local correctional facility (County Jail), or from any other agency (e.g., OMH). 2. The Draft Sergeant/Assigned Area Sergeant will screen the incarcerated individual upon transfer within 24-hours after arrival using the PREA Risk Screening Form #115.41[M].

The New York State Department of Corrections and Community Supervision PREA Risk Screening Form #115.41M is a comprehensive, fact-finding and objective instrument. The instrument allows for recording the responses of the inmate. Auditor’s analysis of the questions asked to the inmate, and the information collected on this instrument, it is determined to be a factual based instrument.

The New York State Department of Corrections and Community Supervision PREA Risk Screening Form #115.41M includes questions for all criteria found in 1-9 of the elements stated in this provision of the standard to be considered during screening. Element 10 is not assessed because New York State Department of Corrections and Community Supervision does not hold inmates solely for civil immigration purposes, although this is captured on each risk screening instrument.

**Conclusion**

The number of inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility: (2369). The number of inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more and who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake: (999).

During observation of the intake process, this Auditor observed incarcerated individuals being interviewed by a nurse in a hallway in close proximity to other confined individuals being processed by intake staff. This action violated the confidentiality of the PREA Risk Screening process mandated by standard 115.41(I). After bringing this concern to the Superintendent, on April 25, 2023, a written memo to all staff was sent out with instructions to place the incarcerated individual in the Sargeant's office where the nurse will perform the assessment in private. With this change in procedure and practice, personal observations, review of inmate files, and staff interviews Auburn Correctional Facility meets all provisions of this standard.

<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<b>Policy, Materials, Interviews and Other Evidence Reviewed</b>



- SVPPM 115.42 Use of Screening Information: Screening for Risk of Sexual Victimization and Abusiveness (02/15/2022)
- Directive #4021 Inmate Reception/Classification (01/23/2019)
- Form 115.42 Notification Form Report of Risk Screening Results (04/2022)
- Report of PREA Screening Results (09/30/2022)
- PREA Risk Tracking Sheet (11/2022)
- Directive #4401 Guidance & Counseling Services 8/21/20
- Directive #4009 Minimum Provisions for Health and Morale, (07/21/2022)
- Directive #4017 Incarcerated Individual Transfer Procedure (06/06/2022)
- Form -115.41GI Gender Identity Interview 6/20/2020
- Notification to Confined Person re: Transgender Placement Review
- Interviews

**SVPPM 115.42** states “When an incarcerated individual has been determined to be high risk of sexual victimization and/or abusiveness pursuant to the procedures set forth in SVPPM 115.41, the Assistant Deputy Superintendent PREA Compliance Manager or PREA Point Person (if the ADS PREA Compliance Manager is away from the facility) shall complete Form 115.42, “Report of Risk Screening Results,” to notify appropriate staff of an incarcerated individual’s assessment as potentially being at “high risk of sexual victimization” or “high risk of being sexual abusive” with the goals of keeping separate those incarcerated individuals at high risk of being sexual victimized from those at high risk of being sexually abusive.” The Assistant Deputy Superintendent/PREA Compliance Manager completes Form 115.42 to notify appropriate staff of an inmate’s assessment as potentially being at high risk for victimization or abusiveness and provides a copy to: a) Movement and Control Officer to inform housing and bed assignments; b) Housing Unit Sergeant; and c) Program Committee Chairperson to inform work, education, and program assignments.

**Directive #4021** establishes that a transgender or intersex individual's own views with respect to his or her own safety shall be given serious consideration.

**Directive #4401** Guidance & Counseling Services states, a transgender or intersex inmate’s own view with respect to his or her own safety shall be given serious consideration. The process describes in subpart C further confirmed the written authority for compliance with this standard. Incarcerated individual interviews confirmed this during the audit. This policy also states, all inmates are reviewed on a quarterly basis to assess programs, personal goals, goals for the next quarter in addition to four questions specific to sexual abuse and sexual harassment safety. Incarcerated individual interviews confirmed this during the audit. The auditor was provided documentation to demonstrated this occurred; it was noted in the chronological section of the incarcerated individual’s file.

Guidance & Counseling Services directs the procedure for a transgender or intersex inmate to make a request for consideration of placement in a facility for male or female inmates by advising their Offender Rehabilitation Counselor of their desire for such placement and providing any information that will assist the Agency in assessing the request. This request is made by completion of Gender Identity Interview Form #115.41GI by the inmate’s counselor and will be evaluated by a multidisciplinary

Central Office Transgender/Intersex Inmate Placement Review Committee. This Committee will consider the inmate's own views with respect to safety, the inmate's gender identity, the inmate's security level, criminal and disciplinary history, current gender expression, medical and mental health information, vulnerability to sexual victimization, and likelihood of perpetrating abuse.

**DIR# 4009**, Minimum Provisions for Health and Morale, directs authorization statewide for transgender and intersex inmates to be given opportunity to shower separately from other inmates. A memo to security staff has been authored by the superintendent authorizing separate shower times for transgender/intersex incarcerated individuals. Interviews with (2) transgender/intersex incarcerated individuals confirmed that the shower arrangements are acceptable. Interviews with staff indicate widespread knowledge of this practice. Auburn Correctional Facility is equipped with individual shower stalls that contain opaque shower curtains covering full body and providing adequate privacy for all inmates to shower.

Documentation supporting this process was provided to the auditor with the review of the randomly requested documentation. The interview with the Captain Gilmore confirmed this process. A PREA binder/procedure, observed by the auditor, outlines where to house individuals who are at risk for victimization or those who are potential abusers at this facility.

Based on interviews with the Associate Commissioner/PREA Coordinator and the Assistant Deputy Superintendent/PREA Compliance Manager at Auburn has the authority to recommend individualized determinations about ensuring the safety of all inmates. Inmates determined to be at high risk for victimization are interviewed followed by periodic spot checks by the Assistant Deputy Superintendent/PREA Compliance Manager and the inmate's own views of safety are given serious consideration. Bed and/or housing moves, adjustments to programming/work/education assignments may be recommended in order to ensure safety of the individual. Interviews with the Assistant Deputy Superintendent/PREA Compliance Manager, Captain/ Point Person, and inmates determined to be at high risk confirmed this practice is well established.

The interview with Jason D. Effman, Associate Commissioner/ PREA Coordinator confirmed the following: "The New York State Department of Corrections and Community Supervision does not have any facilities, units or wings dedicated to lesbian, gay, bisexual, transgender or intersex incarcerated individuals. When a transgender or intersex incarcerated individual requests a facility assignment based upon their gender identity, an individualized assessment is conducted, and such placements are made when warranted.

Review of the policy and other documentation which included an example of a risk assessment screen for a transgender incarcerated individual in addition to Form 115.42, comments noted in response to 115.41M and processes in place that communicate risk needs to staff support a finding of compliance. One completed risk assessment was reviewed during the pre-audit. Additional notifications to the program staff regarding incarcerated individuals requiring attention were also

provided for the auditor to review the process. As stated, at this facility, all incarcerated individuals are reassessed quarterly, and asked questions again related to sexual abuse/sexual harassment safety. This was confirmed by staff interviews and incarcerated individual interviews. Documentation showing that a transgender incarcerated individual's own views are given serious consideration was provided to the auditor upon request. The (2) transgender/intersex incarcerated individuals confirmed they have no issues with showers and confirmed that their views on safety are given serious consideration. Additionally, the facility does not currently have an organization for gender non-conforming individuals which helps identify and address any concerns that arise with this population.

DOCCS provided documentation confirming that a transgender woman was transferred from Auburn Correctional Facility to Bedford Hills Correctional Facility, DOCCS female reception center, on April 8, 2022. It is clear that DOCCS has fully embraced the requirements of 115.42 and, in keeping with the FAQs interpreting placement requirements, the agency "is conducting truly individualized, case-by-case assessments for each transgender or intersex inmate." DOCCS policy and practice clearly demonstrate that housing by gender identity is approved when appropriate.

**Conclusion**

Based upon this analysis of written authority, completed documentation, interviews with, staff and incarcerated individuals all provide sound evidence for the auditor to find the facility exceeds compliance with this standard.

<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #4948 Protective Custody Status 06/02/2022</li> <li>• Forms #2168A, #2170A and #4948A</li> <li>• Observations: During the tour of Restricted Housing</li> <li>• Interview Staff</li> <li>• Interviews Confined Persons</li> </ul> <p>DIR #4948, Protective Custody Status sets forth minimum conditions of confinement for inmates in Protective Custody Status within the Department and directs that an inmate's confinement to Sexual Victimization Involuntary Protective Custody solely because he/she is at high risk for sexual victimization or following a report that the inmate was the victim of sexual abuse, must be done only after an assessment of all available alternatives has been made and determined that there is no available alternative means of separation from likely abusers. If the facility cannot conduct the assessment immediately, the facility may hold the inmate in Involuntary Protective</p>

Custody for less than 24 hours while completing the assessment using Form #2168A. The Assistant Deputy Superintendent/PREA Compliance Manager must be notified of these assignments not later than next business day, who will then notify the Associate Commissioner/PREA Coordinator, in writing, of the date and time Form #2168A was completed and the date and time of the inmate's removal from this status, if removed.

In accordance with DIR #4948, Protective Custody Status, inmates in this status will be afforded access to recreation, telephone calls, visiting, programs, exercise, religious counseling, counseling services, law library services, legal services, general library services, education, commissary/packages, Family Reunion Program, grievance program, laundry services, and personal property. To the extent possible, access to these services is the same as afforded to general population. Any restrictions and reason for limitations to access is documented. Administrative Segregation Plan, Attachment A, indicates offenders are allowed group recreation, television, commissary, property, programming, in-cell correspondence course materials. Any restrictions to an inmate's access to programs, privileges, education, or work opportunities must be documented on Form #4948A, Restriction of Inmate's Program-Participation which includes: 1) the opportunities that have been limited; 2) the duration of limitation; and 3) the reasons for such limitation.

In accordance with DIR #4948, Protective Custody Status, the facility assigns inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged. Form #2168A includes the basis for the facility's concerns for the inmate's safety and documentation of what alternatives were considered and assessed to be unavailable. An assignment should ordinarily not exceed a period of 30 days. If this status extends beyond the 30 days, the status will be reviewed every seven (7) days for the first two months, and at least every 30 days thereafter, by a three-member committee consisting of a representative of the facility Executive Staff, a Security Supervisor, and a member of the Guidance and Counseling staff.

In accordance with DIR #4948, Protective Custody Status, Form #2168A must be clearly documented with the facility's concerns for the inmate's safety and explanation of what alternatives were considered and assessed to be unavailable when inmate was placed on Involuntary Protective Custody for high risk of victimization.

In accordance with DIR# 4948, Protective Custody Status, an assignment should ordinarily not exceed a period of 30 days. If this status extends beyond the 30 days, the status will be reviewed every seven (7) days for the first two months, and at least every 30 days thereafter, by a three-member committee consisting of a representative of the facility Executive Staff, a Security Supervisor, and a member of the Guidance and Counseling staff.

### **Conclusion**

The facility reports no inmates were assigned to involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment and that

	<p>no inmates were placed on Sexual Victimization Involuntary Protective Custody status for the past 12 months. Auditor confirmed through interviews with staff and Correctional Officers who work segregated housing unit that facility staff are aware of the required protocols yet do not use Sexual Victimization Involuntary Protective Custody status as a viable practice. Auburn Correctional Facility meets every element of this standard.</p>
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<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #4027 Sexual Abuse Prevention &amp; Response (7/21/22)</li> <li>• Sexual Abuse Prevention and Response (SAPR) Lesson Plan</li> <li>• OSI 444 Poster for Internal Reporting</li> <li>• Letter The New York State Commission of Correction (SCOC) Inmate and Resident reporting</li> <li>• Prevention of Sexual Victimization in Prison: What You Need to Know brochure</li> <li>• Employee Manual</li> <li>• Notice to Auditor</li> <li>• PREA Pocket Card</li> <li>• Interviews Confined Persons</li> <li>• Interviews Staff</li> <li>• Review of investigations</li> </ul> <p>DIR #4027 establishes that the Department provides multiple internal ways for incarcerated individuals and releases to privately report sexual abuse and sexual harassment, retaliation by other incarcerated individuals, releases, or staff for reporting sexual abuse and sexual harassment, unauthorized relationships, and staff neglect or violation of responsibilities that may contribute to such incidents. Incarcerated individuals and releases may report to OSI. Reports may be made by writing to the DOCCS Office of Special Investigations, 1220 Washington Ave., Building 4, Albany, NY 122262050. Reports can also be made to the OSI Reporting Line by dialing 444 on the incarcerated individual telephone system during regular business hours. Calls to 444 are not monitored by facility staff. Releasees and family members may also contact the OSI reporting line at 1-844-OSI-4NYS, via email to <a href="mailto:OSIComplaint@doccs.ny.gov">OSIComplaint@doccs.ny.gov</a>, or by submitting an online complaint at <a href="https://doccs.ny.gov/doccs-office-special-investigations-osi">https://doccs.ny.gov/doccs-office-special-investigations-osi</a>. Reports can be made directly to the facility's designated PCM or PREA Point Person, or any SORC or their ORC, Chaplain, security staff person, medical staff, or any other employee. The interviews with incarcerated individuals, both targeted and random, confirmed widespread awareness of the multiple options to report any incident or concern regarding PREA. Most of the individuals mentioned the availability of posters throughout the facility being easily accessible and provided the contact information</p>

for making a report. The auditor's review of the four cases that were closed during the audit period found that one was made directly to OSI using the 444-reporting line, and the others were reported directly to staff. The Captain/PPP performs weekly PREA Phone Line Checks for deficiencies and sends the report to ASD/PCM.

DIR #4027 establishes that incarcerated individuals and releases may also report to the State Commission of Correction (SCOC), a separate State office that is not part of the Department, by writing to State Commission of Correction, Alfred E. Smith State Office Building, 80 South Swan Street, 12th Floor, Albany, New York 12210.

Incarcerated individuals may use privileged correspondence for this purpose. The SCOC will receive and immediately forward reports of sexual abuse, sexual harassment, and unauthorized relationships to OSI. An incarcerated individual or release may request that the SCOC allow them to remain anonymous, and the SCOC will not include their name in the report. This method is further confirmed by the Letter of Agreement from SCOC Chairman Beileinm to Acting Commissioner Annucci, dated May 24, 2017, provided for the auditor's review.

DIR #4027 and Employees' Manual, Section 2.20 require staff to accept reports of sexual abuse, sexual harassment, and unauthorized relationships made verbally, in writing, anonymously, and from third parties. Any verbal reports are to be promptly documented and forwarded for investigation. This information is also covered in the Sexual Abuse Prevention and Response Training that is mandated for all staff prior to assuming any duties for the DOCCS. The auditor reviewed one case file where the allegation was made by a third party through the OSI reporting option on the DOCCS website; the other three reviewed were reported at the facility either in writing or verbally. All reports received by staff were handled promptly and put in writing to the Watch Commander for further response.

Staff may report sexual abuse or sexual harassment privately to the Office of Special Investigations by calling their number directly or sending an email directly to them. This is reinforced in the PREA training and on individually issued pocket size PREA Response cards for staff. All staff interviews supported that they are aware they have a private mechanism for reporting. Most commented that they could contact OSI directly, noting the number on the Response Card for this. Auditor confirmed with the PREA Point Person at Auburn that he is immediately notified of all allegations received through the grievance process and that process was verified in the onsite visit.

### **Conclusion**

During interviews, residents stated that they could talk to any of the staff if they had any issue. Several expressed that they felt safe and knew of the PREA safety postings on the bulletin boards in the housing units, dining hall, and other common areas. According to the Civil Immigration Memo, the agency does not house offenders for immigration purposes.

This Auditor finds Auburn Correctional Facility to be in compliance with this standard based upon interviews of staff and residents, observations during the tour, and review of relevant policies and procedures.

<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The agency is exempt in accordance with DIR #4040 Inmate Grievance Program and #702.2(i) Correction Law, section 139.9, 9 NYCRR Part 7695.</p> <p>A grievance filed is deemed exhausted upon filing with regards to the Prison Litigation Reform Act. The agency policy, #4040, The Inmate Grievance Program states that the Inmate Grievance Program Supervisor shall refer any grievance of an emergency nature directly to the appropriate response level having authority to issue an immediate or expeditious and meaningful response.</p> <p>During the audit, the Inmate Grievance Program Supervisor was interviewed regarding the grievance process. If a sexual abuse or sexual harassment allegation is received through a grievance, it is removed from the grievance process and submitted to the PREA Point Person, Watch Commander or Superintendent to investigate as a PREA occurrence immediately.</p> <p>This process was also confirmed through staff interviews. There are codes for grievance to identify complaints of sexual abuse or harassment, though these complaints are not investigated by the grievance office. During this audit period, no allegations were tracked through the grievance procedure. Auburn Correctional Facility meets this standard by non-applicability with all elements.</p>

<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• SVPPM 115.53 incarcerated Individual Access to Outside Confidential Support Services (02/15/2022)</li> <li>• Directive #4423 Inmate Individual Telephone Calls 5/21/2015</li> <li>• Directive #4421, Privileged Correspondence 6/02/2016</li> <li>• Directive #4404 Inmate Legal Visits 9/18/19</li> <li>• Auburn Orientation Manual (11/2022)</li> <li>• Memo, Associate Commissioner RE: Implementation of A PREA Statewide Rape Crisis Hotline 12/8/2019</li> <li>• Incarcerated Individual Orientation Handbook (11/2021)</li> <li>• Contract NYSCASA with OVS 04/01/2021 - 09/30/2022</li> <li>• OVS-OPDV MOU 10/1/2018</li> <li>• Unity House Hotline Contract (10/01/2021 - 09/30/2024)</li> <li>• NEHF - SPCVS Contract - FY 04/01/2021 - 09/30/2022</li> </ul>

- Poster PREA brochures, “Help for Victims of Sexual Abuse in Prison”
- Poster Sexual Abuse Hotline 777 Program (English and Spanish)
- Interviews-Offenders
- Interview-Mailroom Supervisor

A memo from Jason D. Effman, Associate Commissioner indicates the following: A PREA Statewide Rape Crisis Hotline went into effect January 8, 2019. Starting January 8, 2019, calls placed on the 777 hotline will route to Crisis Services, Inc., in Buffalo. Crisis Services’ Hotline Counselors will provide crisis counseling services and, as requested, a referral to a Rape Crisis Program for follow-up services. As requested by the caller, they will also make referrals or reports to DOCCS via OSI, the facility Assistant Deputy Superintendent PREA Compliance Manager, the designated facility PREA Point Person, or me.

In an immediate emergency (e.g., a report of a sexual assault that occurred within the prior 120 hours, suicidal ideation, or imminent threat to harm staff or another person), Crisis Services supervisors will immediately notify the facility Watch Commander by telephone with a follow-up e-mail to the ADS PREA Compliance Manager, PREA Point Person, OSI and myself. This expansion to a statewide hotline was made possible through cooperation with the State Office of Victim Services (OVS) and State Office for the Prevention of Domestic Violence (OPDV). Funding is through Federal VOCA funds that have been designated for this purpose by OVS and transferred to OPDV. OPDV has amended their existing contract for the NYS Domestic and Sexual Violence Hotline to add the parallel hotline specifically to provide services to incarcerated individuals under PREA. Ongoing emotional support and victim advocacy services will continue to be provided via legal calls and, in some locations, via legal visits. Services will primarily be provided through our network of community-based rape crisis programs (“PREA Centers”).

These programs are: Crisis Services, Inc., Crime Victims Treatment Center (CVTC), RESTORE Sexual Assault Services, Safe Harbors of the Finger Lakes, Sexual Assault & Crime Victims Assistance Program at Samaritan Hospital, and Victims Assistance Services WestCOP, Inc. Again, OVS has increased the VOCA Grants to these programs to pay for services under PREA.

DIR #4421 defines Privileged Correspondence as correspondence addressed by an inmate to any of the following persons or entities at their official business address, or, except as noted in Section II-B below, received from such persons or entities: Rape Crisis Program: Any local, State, or National organization authorized to provide rape crisis services, victim advocacy services, and emotional support services, including but not limited to, organizations approved to provide such services in New York State by the Department of Health pursuant to Public Health Law §206(15).

New York State Department of Corrections and Community Supervision Help for Victims of Sexual Abuse in Prison poster posted at all telephones throughout Auburn Correctional Facility in English and Spanish reads as follows: DOCCS PREA program provides a Rape Crisis Hotline and enhanced victim services to incarcerated victims of sexual abuse. You can contact the statewide hotline for rape crisis counseling and for



referral to a partner program for victim advocacy and emotional support services by dialing 777 from any inmate phone.

Posters announcing the service were visible throughout the facility. On the poster, it indicates that the calls are confidential and are not monitored by the facility but that they are recorded in the event of misuse. It also provides the agency's address should an incarcerated individual wish to correspond instead of talk on the phone. It further educates the incarcerated individual population that the counselors are only allowed to report information back to the Department with the permission of the incarcerated individual. PREA brochures, "Help for Victims of Sexual Victimization in Prison" are widely available to incarcerated individuals.

In addition this pamphlet provides victim support information on how to report abuse, and outlining the PREA Statewide Rape Crisis Hotline, and it provides contact information regarding the community-based Rape Crisis Program (RCP) for rape crisis counseling victim advocacy and emotional support services (Crisis Services, Inc., Crime Victims Treatment Center, Family Services Center for Victim Safety & Support, RESTORE Sexual Assault Services, Safe Harbors of the Finger Lakes, Sexual Assault Resource Center of Planned Parenthood of Greater NY, St. Peter's Crime

Victim Services at Samaritan Hospital, Victim Advocacy Services of Planned Parenthood of Greater NY, Victims Assistance Center of Jefferson County, Victims Assistance Services of WestCOP, and Vera House, Inc. It too reinforces those calls are confidential, will not be monitored but are recorded. It further informs the incarcerated individuals that they do not have to have 777 on their approved telephone list. Telephone numbers to a specific Rape Crisis Program can be added at any time to their approved telephone list. The facility provided examples of ongoing counseling via telephone for numerous incarcerated individuals during the audit period.

The following policy directives support this process: Directive #4423 5/21/2015, Inmate Telephone Calls, an inmate may add an attorney, or Department of Health approved Rape Crisis Program to their telephone list. Directive #4404 Inmate Legal Visits 9/18/2019, there is an area designated for confidential visits and as stated, Directive #4421, Privileged Correspondence 06/02/2016, Rape Crisis Programs- inmates can send and receive privileged correspondence. The interview with the Mailroom staff confirmed this process and additionally provided the auditor with documentation from the Privileged Correspondence log.

DIR #4404, Inmate Legal Visits, provides guidance on visits between an inmate and a representative, including an employee or registered volunteer, or a rape crisis program and directs the Superintendent shall designate an area for these visits. Area designated should ensure the confidentiality of all communications during the visit.

New York State Department of Corrections and Community Supervision is the beneficiary of an agreement with New York State Coalition Against Sexual Assault through the NYS Office of Victim Services with the overarching goal to address the needs of sexual assault victims who are incarcerated in New York State prisons county jails and other facilities.

New York State Department of Corrections and Community Supervision is a recipient of benefits of the MOA between NYS Office of Victim Services and NYS Office for the Prevention of Domestic Violence (OPDV) for the OPDV PREA Hotline Expansion Project Dated October 1, 2018 and terminating September 30, 2020. This MOA includes the provision to provide services for incarcerated individuals according to the Prison Rape Elimination Act (PREA) as administered by the New York State Department of Corrections and Community Supervision and NYS Office of Victim Services (OVS). This includes administration of the Hotline for calls received through the 777 speed-dial number, with operation hours between the hours of 8:00 AM and 11:00 PM. Calls will be responded to and/or referred per New York State Department of Corrections and Community Supervision and OVS protocols. A report of total number of PREA calls and additional information is provided to OVS quarterly, by the 15th of the month. Hotline staff will attend PREA related trainings as prescribed by New York State Department of Corrections and Community Supervision and OVS and report date of training, name of training, trainer's name/affiliation, topic.

New York State Department of Corrections and Community Supervision is a recipient of benefits of the contract between NYSCASA and Sexual Assault and Crime Victims Assistance Program at Samaritan Hospital. Contract is dated April 1, 2021 - September 30, 2022. This contract provides inmate victims of sexual abuse with rape crisis counseling, advocacy, and emotional support services; follow-up with inmates who made direct contact seeking rape crisis services via telephone or mail, or as requested by New York State Department of Corrections and Community Supervision; maintain active confidential communication with New York State Department of Corrections and Community Supervision staff in order to facilitate treatment for inmate victims' rights to confidentiality; complete; and participate in training provided by NYSCASA.

Auditor reviewed copies of all contracts mentioned above to ensure services are available for emotional and mental professional assistance at any time through contact with the facility health services; emotional support can also be accessed through the Chaplain, their case manager, or the Offender Rehabilitation Coordinator. Offenders are notified of these services in the offender training and at orientation; it is provided in the offender brochures and in the offender handbook.

**Conclusion**

Based on policy review, interviews with inmates, interviews with the PREA Manager, and the PREA Facility Point Person, review of correspondence between Auburn Correctional Facility and community rape crisis centers, and hotline call tracking reports provided, Auburn Correctional Facility exceeds the requirements of this standard.

	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Observations</li> <li>• DOCCS website</li> <li>• Example of 3rd party report from website</li> </ul> <p>The auditor reviewed the NYSDOCCS website which has a link to PREA which provides all information about PREA to the public including policy, history of combating sexual assault, PREA education, Reporting Sexual Abuse and how third-party reports on behalf of an incarcerated individual can be made. There is a website-initiated complaint form which allows for confidentiality and anonymity. Previous interviews with the agency investigators confirmed that they have received complaints through this process.</p> <p><b>Conclusion</b></p> <p>An example was reviewed by the auditor when conducting an audit at another facility in this agency. Additionally, the auditor tested the system and received an email confirming receipt of the test complaint in less than 24 hours. Therefore, the auditor finds this standard to be deemed compliant.</p>

<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #4027 Sexual Abuse Prevention &amp; Response 07/21/22</li> <li>• Directive #0700 Office of Special Investigations (OSI)</li> <li>• Employees' Manual</li> <li>• Office of Mental Health MOU</li> <li>• Notice to Auditor – Vulnerable Persons Central Register</li> <li>• HSPM 1.01 Inmate Orientation to Health Care Services – 8/21/20 Form 3102 Health Services Orientation 8/21/20</li> <li>• Coordinated Response Plan – Facility specific</li> <li>• Watch Commander Quick Reference Chart for Sexual Abuse/Sexual Harassment related complaints</li> <li>• Watch Commander Sexual Abuse Response Checklist</li> <li>• Interviews - Staff</li> <li>• Interviews Medical &amp; Mental Health staff</li> <li>• Interview PREA Coordinator</li> </ul>

- Observations

DIR #4027 establishes that all staff shall report to a supervisor immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not the facility is part of the DOCCS and any unauthorized relationship. This duty to report includes any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment of a release, whether in a community-based residential program or while under Community Supervision or any unauthorized relationship with a releasee. Additionally, staff must report any acts of retaliation against an incarcerated individual, release, or staff for reporting such an incident or for participating in an investigation of an incident of sexual abuse, sexual harassment or an unauthorized relationship; or any staff neglect or violation of responsibility that may have contributed to an incident of retaliation. The duty to report includes verbal, written, third-party, and anonymous reports, regardless of whether staff personally believe the information to be true or reliable.

In accordance with DIR #4027, apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse or sexual harassment report to anyone other than to the extent necessary, as specified in DOCCS policy including but not limited to SVPPM 115.61, to make treatment, investigation, and other security and management decisions. This is further reinforced by DOCCS's Employee Manual, Rule 2.20 prohibiting the release of information outside those needed to make treatment, investigation, and other security and management decisions. Random staff interviews and interviews with the executive management team indicated everyone had a thorough knowledge of the expectations outlined in the employee standards of conduct, as well as the importance of enforcement.

The MOU between DOCCS and OMH acknowledges that medical and mental health practitioners unless otherwise precluded by Federal, State, or local law, are required to report sexual abuse or sexual harassment that occurs in any facility, whether or not that facility is part of DOCCS. Disclosures of sexual abuse or sexual harassment will be reported and referred for an investigation under agency policy and the limitations of confidentiality at the initiation of services. The consent of an incarcerated patient is not required in these cases. HSPM #1.01 establishes that at the time of admission/intake, health staff at each correctional facility provides all incarcerated individuals with a written and oral orientation to the health services available at the facility, the procedure for requesting such services, and the method by which complaints regarding services can be made; this orientation is documented through signature on Form 3102. This information is available to incarcerated individuals with limited English proficiency in a language they can understand.

In accordance with New York Consolidated Laws, Social Services Law - SOS § 488.492, Vulnerable persons' central register, DOCCS is exempt from the vulnerable persons' central register requirements to receive reportable incidents involving covered persons. Auburn Correctional Facility houses no individuals under the age of 18.

	<p>DIR #0700 directs the authority to investigate allegations with the OSI/SCD. In accordance with DIR #4027 and pursuant to DIR #0700 and DIR#2111, under no circumstances shall a facility or Community Supervision bureau investigation involving sexual abuse, sexual harassment, or an unauthorized relationship be initiated unless and until OSI has been consulted. All allegations of sexual abuse, sexual harassment, or retaliation against staff, an incarcerated individual, or a releasee for reporting such an incident or participating in an investigation shall be immediately reported to the OSI, who will assign to the appropriate investigator and ensure the allegation is thoroughly investigated. DIR #0700, Office of Special Investigations, establishes and grants authority to the OSI/SCD to conduct these investigations.</p> <p><b>Conclusion</b></p> <p>A review of agency policy, review of case files, review of Auburn Correctional Facility Coordinated Response Plan and interviews auditors conclude Auburn Correctional Facility meets every provision of this standard.</p>
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<b>115.62</b>	<b>Agency protection duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #4948 - Protective Custody Status - 06/02/2022</li> <li>• Form #2168A Sexual Victimization - Involuntary Protective Custody</li> </ul> <p>Recommendation</p> <ul style="list-style-type: none"> <li>• Interviews A/Commissioner</li> <li>• Interview Superintendent</li> <li>• Interview Random staff</li> <li>• Observations</li> </ul> <p>In accordance with DIR #4948, Protective Custody Status, New York State Department of Corrections and Community Supervision maximizes the safety and security of the inmates who are subject to a substantial risk of imminent sexual abuse. Inmates may be placed in one of three Protective Custody Statuses: 1) Voluntary, Involuntary, and Sexual Victimization Involuntary. The facility reports zero (0) time the facility determined that an inmate was subject to a substantial risk of imminent sexual abuse in the last twelve months.</p> <p><b>Conclusion</b></p> <p>The interview with the Superintendent confirmed that an incarcerated individual at imminent risk of sexual abuse or any imminent risk of harm shall have immediate</p>

	<p>action taken to ensure their safety. All staff interviews confirmed to the auditor that they would take immediate action if they believed an incarcerated individual was at imminent risk of sexual abuse. Incarcerated individual interviews illustrated to the auditor that staff are approachable. Corrections Officers and supervisors confirmed that this request would be supported, and action would be taken to protect the incarcerated individual before the believed event occurred. Based on this and overall observations during the audit, the auditor found this standard is compliant.</p>
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<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• SVPPM 115.63-Reporting to Other Confinement Facilities 02/15/2022</li> <li>• Observations</li> <li>• Interview with A/Commissioner</li> <li>• Interview Superintendent</li> <li>• Memo: Associate Commissioner RE: PREA Standard 115.63</li> <li>• Form 115.63</li> <li>• Jail Administrators contact information</li> <li>• Documentation of notifications within 72 hours both sent and received for the previous twelve months</li> </ul> <p>In accordance with PREA Standard 115.63/263, upon receiving an allegation that an incarcerated individual was sexually abused while confined at another facility, the head of the facility that received the allegation must notify the head of the facility or appropriate office of the agency or facility where the sexual abuse is alleged to have occurred by receipt via electronic mail. This notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.</p> <p>In the past 12 months, there were twenty-four (24) number of allegations the facility received that an inmate was abused while confined at another facility. Upon receipt of an allegation of sexual abuse while confined at another facility, the facility will 1) obtain key information regarding the incident and whether or not it was previously reported, 2) offer mental health and medical referrals as appropriate based on the information provided, 3) refer the information to the ADS PREA and PPP to facilitate appropriate notifications, 4) verify information on prior reporting for matters involving another DOCCS facility, and 5) ensure the Superintendent notifies the head of the incident facility and, where appropriate either OSI or the other agency's investigations unit. Additional follow-up with the incident facility or investigations unit is made as appropriate based on the totality of the circumstances.</p> <p>In the past 12 months, there were eight (8) number of allegations of sexual abuse the</p>

	<p>facility received from other facilities.</p> <p>Office of Special Investigations/Sex Crimes Division ensures that an investigation is conducted or verifies that one has been conducted when notified of an allegation of sexual abuse reported to have occurred in a New York State Department of Corrections and Community Supervision facility. Office of Special Investigations/Sex Crimes Division will advise the facility Superintendent where the sexual abuse is alleged to have occurred, as to the action to be taken. Auditor reviewed documentation for this report and found that an investigation was initiated with Office of Special Investigations within 24 hours after being notified by the other facility.</p> <p><b>Conclusion</b></p> <p>Auditor’s review of policy, documentation noted in narrative above, and interviews with Acting Commissioner, Superintendent, Security/PREA Point Person, Auburn Correctional Facility meets all provisions of this standard.</p>
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<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #4027 Sexual Abuse Prevention &amp; Response 07/21/22</li> <li>• SVPPM 115.65 Coordinated Response</li> <li>• Sexual Abuse Prevention and Response (SAPR) Lesson Plan</li> <li>• Watch Commander’s Sexual Abuse Response Sheet</li> <li>• PREA Pocket Card</li> <li>• Interview with a staff who has acted as a first responder</li> <li>• FOM 100 Coordinated Response to Reports of Sexual Victimization</li> <li>• Observations</li> <li>• Random staff</li> </ul> <p>DIR #4027, Sexual Abuse Prevention &amp; Response establishes the facility Coordinated Response Plan will be followed as protocol for staff first responder duties. First Party/ Victim Report of Observed Inmate Sexual Activity Procedures provides the following instructions to Staff, regardless of title, when an inmate reports that he/she is the victim of sexual abuse or when two or more inmates are observed engaging in sexual activity: 1) direct the participants to cease act, separate and remain in the area; 2) assess situation and contact medical if immediate onsite medical care be necessary; 3) notify immediate supervisor who shall immediately notify the Watch Commander (Watch Commander may be notified directly by staff should immediate supervisor not be available); 4) instruct the participants not to take any actions that could destroy physical evidence; 5) report the specific details, in writing, to the Watch Commander as soon as possible, and no later than the end of the shift. The Security Staff first responder shall: 1) ensure that the participants and any witness(es) are removed</p>

from the area of incident, separated and isolated; 2) ensure all reported participants do not take any action to destroy physical evidence including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating; 3) ensure that the potential crime scene is secure; 4) notify and report the specific details, in writing, to the Watch Commander as soon as possible, and no later than end of the shift.

All staff receive 1st Responder Training and steps identified in above paragraph as addressed in Agency policy is a part of the curriculum for Sexual Abuse Prevention and Response, Objective 4: Actions of a 1st Responder. Auditor observed PREA First Responder Pocket Cards in the possession of numerous employees during formal interviews and while on tour during informal interviews. Interviews with security and non-security staff indicated a solid awareness and knowledge of First Responder duties. In the past 12 months there were eleven (11) allegations that an inmate was sexually abused. Of these allegations of sexual abuse in the past 12 months, there were eleven (11) number of times the first security staff member to respond to the report separated the alleged victim and abuser.

In the past 12 months, there was one (1) number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence.

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there was one (1) number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence.

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there was one (1) number of times the first security staff member to respond to the report requested 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.

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there was one (1) number of times the first security staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

The interview with the staff that has acted as a first responder confirmed the process in policy. This situation occurred prior to the twelve-month review period. Both first responder staff and non-first responder staff attend training as required in 115.31; these requirements are reinforced at that time. Also, staff carry a Pocket Card to review in the event of a situation. Of those allegations responded to first by a non-security staff member, ten times that staff member notified security staff.

### **Conclusion**

All staff interviews demonstrated knowledge of the process. For these reasons noted,



	the auditor finds the facility in compliance with the requirements of this standard.
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<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• SVPPM 115.65 Coordinated Response (2/15/22)</li> <li>• FOM 100 Coordinated Response to Reports of Sexual Victimization (02/07/2022)</li> <li>• HSPM #1.60-Division of Health Services-Sexual Assault (7/22/22)</li> <li>• Random staff interviews</li> <li>• Observations</li> <li>• Interview Superintendent</li> <li>• Interview with Watch Commander</li> </ul> <p>Through DIR #4027 and SVPPM #115.65, each facility must maintain a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, agency investigators, and facility leadership. The facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. The Auburn Correctional Facility Coordinated Response Plan, FOM #100, was reviewed by the auditor and found to be thorough and comprehensive; and based on the guidance provided by the DOCCS SAPEO template directive. This local directive provides steps required of first responders and responding supervisors and steps to take upon receipt of a third-party and anonymous report. The plan outlines specific duties of the Watch Commander, including a Watch Commander Quick Reference Chart. OSI must be notified on Form 4027RC for allegations of staff on incarcerated individual sexual abuse, unauthorized relationship, and incarcerated individual on incarcerated individual sexual abuse prior to initiating any investigative steps beyond assessment interviews; and in these cases, Form 4027WC, Watch Commander’s Sexual Abuse Response Sheet is to be completed. If the incident is deemed sexual abuse or a sexual assault and has occurred within a time period that still allows for the collection of physical evidence (within 120 hours), the Health Services Staff or the on-duty Physician shall initiate the proper procedures as outlined in HSPM #1.60. This medical evaluation will assist in determining if referral to an outside hospital emergency department is medically indicated on the basis of evidence collection or physical trauma. If an outside medical trip is required, the incarcerated individual will be transported to one of the following SAFE/SANE hospitals unless medical staff determines the incarcerated individual’s priority medical needs require transportation to a more appropriate hospital emergency department or medical staff determines that another hospital is more appropriate and upon Health Services confirmation that a SANE/SAFE and a Victim Advocate are available to provide services:1)</p>

	<p>1. University Hospital SUNY Health Science Center 750 E. Adams St., Syracuse, NY 13210 (ER 315-464-5611)</p> <p>2. St. Joseph’s Hospital Health Center 302 Prospect Ave., Syracuse, NY 13210 (ER 315-448-5105)</p> <p>3. Strong Memorial Hospital 601 Elmwood Ave, Rochester, NY 14642 (ER 585-275-2100)</p> <p>The Office of Special Investigations shall be contacted prior to initiating any outside medical trip for a SANE/SAFE examination in order to ensure the appropriate investigative response. FOM #100 includes names, phone numbers, and email addresses for the points of contact at each of these hospitals.</p> <p><b>Conclusion</b></p> <p>The interview with the Watch Commander confirmed he receives all notifications regarding PREA allegations. All staff interviewed had the PREA Response Card on their possession. Based on the feedback in all interviews, the review of the plan, and review of completed investigations, the auditor finds there is ample evidence to support a finding of exceeds compliance.</p>
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<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #2110 Employee Discipline-Suspension from Duty During the Continuation of Disciplinary Proceedings 3.24.21</li> <li>• Directive #2114 Functions of the Bureau of Labor Relations 7.10.19</li> <li>• Union Contracts continuation after expiration Taylor Law Triborough Amendment</li> <li>• NYS Governors Office of Employee Relations (GOER)</li> <li>• 2009-2016/2016-2023 Security Supervisors Unit</li> <li>• 2019-2023-Professional Scientific Technical Unit</li> <li>• 2016-2021-Operatiional Services Unit</li> <li>• 2016-2021-Administrative Services Unit</li> <li>• 2016-2021-Institutional Services Unit</li> </ul> <p>DIR #2110 allows for employees to be suspended from duty pending the outcome of sexual abuse or sexual harassment investigation; When OSI receives a report of staff sexual misconduct, they shall evaluate the facts and circumstances of the report together with any other available information and consult with the appropriate Bureau of Labor Relations representative regarding appropriate action, including</p>

removal of the employee from contact with any incarcerated individual pending the outcome of the investigation.

The interviews with OSI/SCD Investigators and the Superintendent identified various methods that may be used to separate staff from alleged victims during the investigation, including suspension when appropriate. The process of suspending or separating an employee from employment as a function of a negative sexual abuse or sexual harassment investigation was explained. The agency has a proven record of terminating employees for engaging in sexual abuse and unauthorized relationships. DIR #2114 establishes that employees of the DOCCS are subject to administrative discipline consistent with Section 75 of the New York Civil Service Law or through procedures established in collective bargaining agreements; employees may be suspended from duty consistent with this law or the agreements. The auditor was provided labor contracts with the DOCCS for review; all contracts permit the DOCCS to take appropriate action when warranted to remove alleged staff sexual abusers from contact with any incarcerated individual pending the outcome of an investigation or a final determination of whether and to what extent discipline is warranted. The contracts permit the agency to suspend an employee without pay or temporarily reassign an employee when a determination is made that there is probable cause that such employee's continued presence on the job represents a potential danger to persons or property or would severely interfere with operations.

Based on an interview with the AC/PREA Coordinator/Commissioner's Designee, both the agency as well as any other governmental entity responsible for collective bargaining on the agency's behalf are prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any incarcerated individuals pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

### **Conclusion**

The interview with the Superintendent further solidified that the facility has a Coordinated Response Plan in which staff are knowledgeable regarding it, reports are directed to the Watch Commander who ensures notifications and appropriate actions are made. The interview with the Watch Commander confirmed he receives all notifications regarding PREA allegations. All staff interviewed had the PREA Response Card on their possession. Based on the feedback in all interviews, the review of the plan, and review of completed investigations, the auditor finds there is ample evidence to support a finding of compliance.

<b>115.67</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

**Policy, Materials, Interviews and Other Evidence Reviewed**

- SVPPM 115.67- Agency Protection Against Retaliation 08/24/2022
- Protection against Retaliation Tracking Sheet Inmates and Staff
- Retaliation Monitoring Form Inmate
- Retaliation Monitoring Form Staff
- Interviews A/Commissioner
- Interview Superintendent
- Interview with designated staff members charged with monitoring for retaliation (ADS - PREA and PREA Point Person)
- Interviews with Incarcerated Individuals who reported a sexual abuse
- Observations

SVPPM-Agency Protection Against Retaliation; 08/24/2022 directs protection of inmates, parolees 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 facility’s Assistant Deputy Superintendent PREA Compliance Manager will coordinate monitoring to prevent retaliation. The designated PREA Point Person will assist and serve as the backup for monitoring, which shall include seeing monitored inmates and staff on rounds and reporting any complaints of retaliatory conduct. If the ADS PREA Compliance Manager is out of the facility for an extended period, the designated PREA Point Person shall coordinate the monitoring process and ensure that all required steps are taken.

Per SVPPM-Agency Protection Against Retaliation; if any other individual who cooperates with an investigation expresses a fear of retaliation, the facility and agency shall take appropriate measures to protect that individual against retaliation.

After review/investigation by Office of Special Investigations, and subsequent consultation, the facility shall act promptly to take necessary action to remedy any retaliation complaint including, when necessary, housing or bed moves, post assignments or facility assignments for staff. Decisions on protective measures are made on a case-by-case basis. General counseling services will be provided by the inmate’s Offender Rehabilitation Coordinator and if a mental health referral is deemed necessary, any staff member may initiate.

No staff, (0), monitoring for retaliation was necessary over the last 12 months as reported by the facility. Inmates who were reported to have suffered sexual abuse or harassment, inmates who reported the sexual abuse, staff who reported sexual abuse, or any person who participates with a subsequent investigation will be monitored for retaliation for at least 90 days following a report. Monitoring includes periodic in-person status checks approximately every 30 days. Areas monitored include inmate disciplinary reports, housing or program changes, or any negative performance reviews or reassignments of staff. If indicated, the monitoring may continue beyond the initial 90-day period.

**Conclusion**

	<p>Based on review of the retaliation monitoring log, review of monitoring documents and related policy, combined with interviews with staff, this auditor concludes the retaliation monitoring process is well established at Auburn and every element of this standard is met.</p>
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #4948 Protective Custody Status 06/02/2022</li> <li>• Form 2168A</li> <li>• Interviews Superintendent</li> <li>• Interview Staff who supervise restrictive housing</li> </ul> <p>DIR #4948, Protective Custody Status sets forth the minimum conditions of confinement for inmates in Protective Custody Status. Use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse is subject to the same requirement of 115.43. The referenced policy clearly outlines requirements that are compliant with this standard. No inmates have been placed in segregated housing in the past 12 months for allegedly having suffered sexual abuse. For additional narrative, reference 115.43 of this report.</p> <p><b>Conclusion</b></p> <p>Policy reviews and staff interviews with Acting Commissioner, Associate Commissioner/PREA Coordinator, Superintendent, Captain, PREA Point of Contact, Lieutenant, Supervisor of Segregated Housing, Assistant Deputy Superintendent/PREA Compliance Manager, and Correctional Officers who work segregated housing unit that facility staff are aware of the required protocols yet do not use Sexual Victimization Involuntary Protective Custody status as a viable practice. Auburn Correctional Facility meets every element of this standard.</p>

<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #0700 Office of Special Investigations (OSI) 09/20/2022</li> </ul>

- Directive #4027 Sexual Abuse Reporting & Response 07/21/2022
- Notice to Auditor-Criminal and Administrative Agency Investigations 05/11/2021
- Letter to the New York State Police Superintendent (May 2, 2014)
- New York Criminal Procedure Law §160.45
- Interviews Investigative staff
- Interview with the Superintendent
- Observations

Through the power granted under Section 112 of the Correction Law, the DOCCS Commissioner has designated the OSI and its members to assist with the implementation of statutory authority to prevent, detect, identify, expose, and eliminate criminal activity, misconduct, fraud, waste, abuse, corruption, and other improper behavior within the Department. DIR #0700 outlines the general functions of OSI and establishes five major Divisions, one of which is Sex Crimes (SCD). The SCD conducts investigations involving unauthorized relationships and sexual misconduct between incarcerated individuals or releasees and Departmental staff, as well as incarcerated individual-on-incarcerated individual sexual abuse. The SCD coordinates with outside law enforcement and prosecutors in the development of these cases for criminal prosecution and collaborates with others within the Department to ensure compliance with the PREA. Within the OSI Policy and Procedure Manual reviewed by the auditor, all reports of sexual abuse, sexual harassment, and retaliation against an incarcerated individual or staff member for reporting or taking part in an investigation of possible sexual abuse or harassment will be thoroughly investigated. All investigations into allegations of sexual abuse and sexual harassment shall be completed promptly, thoroughly, and objectively, including investigations of third-party and anonymous reports. The auditor interviewed two OSI/SCD Investigators who are assigned to Auburn CF. The investigators explained the steps to initiate an investigation and stated that the nature of the allegation would dictate the response time, although all reports are investigated promptly; they explained the investigative steps, which were aligned with policy requirements and training received; and the procedure for collection of circumstantial and direct evidence protocols. Both were experienced and knowledgeable in protocols for investigating sexual abuse in correctional settings.

In accordance with OSI Policy Manual and DIR #0700, the DOCCS uses Investigators who have been specially trained in sexual abuse investigations to conduct all allegations of sexual abuse as detailed in the 115.34 narrative of this audit report. The auditor's review of case files indicated all were investigated by trained investigators.

Based on the auditor's interviews with the OSI/SCD Investigators, review of investigative case files, and requirements of DIR #0700 and the OSI Policy Manual, there is a standard practice for Investigators to gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; to interview alleged victims, suspected perpetrators, and witnesses; and to review prior complaints and reports of sexual abuse involving the suspected perpetrator.

In accordance with the OSI Policy Manual, when the quality of the evidence appears to support a criminal prosecution, the agency shall conduct compelled interviews as set forth in DIR #0102 only after consulting with the Deputy Chief Investigator or Assistant Deputy Chief Investigator and prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. This was procedure was confirmed as practice during interviews with the OSI Investigators and in the review of the investigative case files.

The OSI Policy Manual requires the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as incarcerated individual or staff. The credibility of an incarcerated individual or staff is based on an assessment of the individual's history of institutional behavior, prior allegations, any disciplinary history, and any other factors relevant to the investigation according to the interviews conducted. New York State Criminal Procedure Law, Section 160.45, Polygraph tests, prohibits the DOCCS or any law enforcement agency from requesting or requiring a victim of a sexual assault crime to submit to any polygraph test or psychological stress evaluator examination. The auditor's review of the two ongoing investigations and one closed investigation indicated no truth-telling device was used during the investigation. Interviews with the OSI/SCD Investigators confirmed that credibility assessments are based solely on the individual and not on their status as incarcerated individuals/releasees or staff.

The OSI Policy Manual indicates the OSI Investigator will include information in the investigative report regarding staff action or inaction that may have contributed to the alleged abuse. An evaluation is also made at the facility level as part of the Administrative Review conducted by the Superintendent or designee. The auditor's review of related investigative policies requires a written report which includes the investigative findings for every allegation reported for both criminal and administrative investigations, is required. The report is required to contain the name of the person involved, a thorough summary of the incident, a description of physical evidence and testimonial evidence collected, the reasoning behind credibility assessments, and investigative facts and findings. OSI investigative reports are also entered and tracked in the OSI's electronic case tracking system. Copies of all investigative evidence, where available, are attached in both written and electronic files.

There were zero (0) number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012, or since the last PREA audit, whichever is later.

OSI completes thorough investigations on every allegation they receive, as the auditor saw from reviewing investigations at the facility. They utilize an extensive review process that includes numerous checks and balances. The department utilizes progressive investigative steps that the interviews report have proven to be successful for prosecutions and upholding zero tolerance policies towards inappropriate behavior. When an investigation is closed, it has a two-step supervisory review process, ensuring nothing was missed. OSI applies its cutting edge and trauma informed investigative techniques to all investigations. The records management

	<p>system is thorough and impressive and they were able to rapidly respond to all questions and review requests of the auditor. As with 115.34, the DOCCS investigative system and process exceeds beyond expected standards.</p> <p><b>Conclusion</b></p> <p>Auditor conducted a review of the agency’s investigation policies and find they meet provisions in this standard. Based on this and the above narrative, to include noted interviews, interview with Superintendent, the Investigative Staff and document reviews, Auburn Correctional Facility exceeds requirements of this standard.</p>
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<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Notice to Auditor 115.72 Evidentiary standards 5.11.21</li> <li>• Office of Special Investigation Policy Manual (confidential)</li> <li>• Interviews Investigative staff</li> </ul> <p>Office of Special Investigations Policy Manual, Chapter 5, Section II.4. governs evidentiary standards for substantiating an allegation of sexual abuse or sexual harassment. the evidentiary standard for substantiating an allegation of sexual abuse or sexual harassment shall be a preponderance of the evidence. A review of the specialized training indicates investigators are trained to use preponderance of the evidence for substantiating a sexual abuse or sexual harassment case. The policy and practice is further supported through interviews with the PREA Manager and the Office of Special Investigations Investigator.</p> <p><b>Conclusion</b></p> <p>Based on policy review, investigative file review, and interviews noted above, Auburn Correctional Facility meets requirements of this standard</p>

<b>115.73</b>	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Notification of Investigative Determination</li> <li>• Notice to Auditor 115.73 Evidentiary standards for administrative investigations.</li> </ul>



- Interview Superintendent
- Interviews with investigative staff
- Interview with the mailroom staff

According to Office of Special Investigations Policy Manual, Chapter 5, following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The Sex Crimes Division Deputy Chief Investigator (DCI) or Assistant Deputy Chief Investigator (ADCI) will assign an investigator to provide this notification when the case is ready to be closed upon the conclusion of the case who will notify the inmate in person of the result of the case when substantiated. If there were multiple allegations with mixed outcomes, the inmate should be advised what allegations were substantiated, what allegations were unsubstantiated, and what allegations were unfounded. In cases where the outcome is unsubstantiated or unfounded, notification is made by mail by the facility Superintendent. Case files reviewed indicated inmates were notified by Sex Crimes Division of the dispositions following the investigations by Sex Crimes Division. This information is contained within the case chronology. Interviews with PREA Point Person and review of his files demonstrated consistent notification to inmates of all allegations of sexual abuse. Additional interviews with the Superintendent, Compliance Manager and PREA Coordinator confirms knowledge of this requirement.

This subparagraph to this standard is not applicable to Auburn Correctional Facility as all cases of sexual abuse would be investigated by Office of Special Investigations Sex Crimes Division so this agency would have all relevant information needed to inform the inmate.

According to Office of Special Investigations Policy Manual, Chapter 5, following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the inmate is notified when the staff is no longer posted within the unit, no longer employed at the facility, indicted or convicted on a sexual abuse charge related to that that incident. Investigation updates in criminal cases are provided in writing by the Sex Crimes Division Investigator or in direction communication from the DCI or ADCI to the inmate.

There were six (6) criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months. Of the alleged sexual abuse investigations that were completed in the past 12 months, three (3) inmates were notified verbally or in writing, of the results of the investigation. There were five (5) notifications to inmates that were provided pursuant to this standard. Of those notification made in the past 12 months five (5) were documented.

### **Conclusion**

Interviews with the Superintendent, PREA Manager, PREA Facility Point Person, and Sex Crimes Division Investigators and documentation of notifications viewed by

	auditor provides evidence Auburn Correctional Facility meets requirements of this standard.
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #2110 - Employee Discipline - Suspension from Duty During the Continuation of Disciplinary Proceedings</li> <li>• Directive #2111- Report of Employee Misconduct - 01/11/2023</li> <li>• Directive #4027 - Sexual Victimization Prevention &amp; Response 07/21/2022</li> <li>• Employees' Manual 2019</li> <li>• Presumptive Disciplinary Sanction for Staff Sexual misconduct 02/05/2016</li> <li>• Interviews</li> <li>• Observations</li> </ul> <p>Directive #2110 - Employee Discipline - Suspension from Duty During the Continuation of Disciplinary Proceedings -4/17/2020, states, When the OSI receives a report of staff sexual misconduct, they shall evaluate the facts and circumstances of the report together with any other available information and consult with the appropriate Bureau of Labor Relations representative regarding appropriate action, including removal of the employee from contact with any incarcerated individuals pending the outcome of an investigation.</p> <p>DIR #4027 establishes that any perpetrator of sexual abuse or sexual harassment, any unauthorized relationship, or retaliation related to such an incident or investigation will be dealt with severely through discipline or prosecution to the fullest extent permitted by law. Supporting directives include DIR#2110, and DIR #2111, both indicating that OSI will evaluate the facts and circumstances of a report of staff sexual misconduct and consult with the appropriate Bureau of Labor Relations representative regarding appropriate action, including removal of the employee from contact with any incarcerated individuals pending the outcome of an investigation. In addition, each employee receives and signs for the DOCCS Employee Manual, which includes the same language, consistent with elements of this standard.</p> <p>Employees' Manual - Rev. 2019 specially reinforces that any perpetrator of a sexual abuse incident, sexual harassment or act of staff voyeurism will be dealt with severely. It emphasizes the duty to report sexual abuse and sexual harassment.</p> <p>Memo: Daniel F. Martuscello III, Deputy Commissioner for Administrative Services - 2/5/16 RE: Prison Rape Elimination Act / Presumptive Disciplinary Sanction for Staff Sexual misconduct confirms that termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse of an incarcerated individual. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual</p>

harassment (other than actually engaging in sexual abuse) shall continue to 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.”

In the past 12 months, there were zero (0) number of staff from the facility who have violated agency sexual abuse or sexual harassment policies. In the past 12 months, there were zero (0) number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies. In the past 12 months, there were zero (0) number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse). In the past 12 months, there were zero (0) number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.

**Conclusion**

Dialogue with the Superintendent, Investigative Staff, and PREA Manager support that all allegations against staff for sexual abuse, sexual harassment, retaliation or neglect are investigated and disciplinary action would be commensurate with the circumstances up to termination for sexual abuse. Therefore, this standard is deemed compliant.

115.77	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #4750, Volunteer Services Program 07/21/2020</li> <li>• Standards of Conduct for Volunteers Within The New York State Department of Corrections and Community</li> <li>• Acknowledgements of Standards of Conduct for Volunteers and All Applicable Policies</li> <li>• Memo Commissioner -08/19/2022: Policy on the Prevention of Sexual Abuse and Sexual Harassment of Incarcerated Individuals and Parolees (revised)</li> <li>• Interviews</li> </ul> <p>The Pre-Audit Questionnaire notes that no contractor or volunteer has been involved in an investigation regarding sexual abuse or sexual harassment towards an incarcerated individual. The auditor found no evidence to dispute this statement during the audit process.</p> <p>Directive #4750, Volunteer Services Program, updated 7/21/2020, requires that</p>

volunteers be notified of DOCCS zero tolerance policy and that they can be criminally liable for their behavior under the definition sexual conduct with an incarcerated individual. It states, DOCCS has a zero-tolerance policy for sexual abuse. It is a crime for any employee to engage in sexual conduct or sexual contact with an inmate. For purposes of Penal Law §130.05, an employee also includes any person providing direct services to inmates in a State Correctional Facility pursuant to a contractual arrangement with the Department or, in the case of a volunteer, a written agreement with the Department. Additionally, it stipulates the following: During volunteer orientation, volunteers must be informed that a formal suspension/dismissal procedure exists and what constitutes grounds for suspension and/or dismissal. Grounds for suspension/dismissal of volunteers are usually based on a violation of the Standard of Conduct for Volunteers.

Standards of Conduct for Volunteers Within The New York State Department of Corrections and Community Supervision Relationship with Inmates states, “sexual abuse and sexual harassment violate Department rules and threaten security. All allegations of sexual abuse, sexual harassment, or retaliation for reporting such an incident or participating in an investigation will be thoroughly investigated. It is a crime for a volunteer or intern who provides direct services to inmates in a State Correctional Facility to engage in a sexual act with an inmate or parolee assigned to that facility, even if the inmate or parolee ‘willingly’ participates in the act. Furthermore, any perpetrator of a sexual abuse or sexual harassment incident will be dealt with severely through discipline or prosecution to the fullest extent permitted by law and will be reported to any relevant licensing bodies.”

Examples of volunteers were provided with the pre-audit documentation demonstrating compliance. In addition, the auditor randomly reviewed four volunteer folders and observed the signed acknowledgement. This acknowledgement is re-issued when the volunteer received refresher orientation.

**Conclusion**

The interview with the Superintendent confirmed that he is able and willing to temporarily suspend volunteers and contractual staff from entering the facility if there is a suspicion of misbehavior. See comments to 115.32. Additionally, he confirmed that he has the authority to terminate the agreement and, if the incident appeared criminal, it would be referred for prosecution. After analysis of this documentation, policy, and interview, the auditor finds the standard to be compliance.

<b>115.78</b>	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<b>Policy, Materials, Interviews and Other Evidence Reviewed</b>

- Directive #4932 – Chapter V, Standards Behavior & Allowances – 10/2/2018
- Hearing Officer Sanction Guidelines
- Directive #4401 Guidance and Counseling, 08/21/2020
- Directive #4027, Sexual Abuse Prevention & Response 7/21/22
- Observations
- Interviews

DIR #4932, Chapter V, Standards Behavior & Allowances outlines the procedures and standards for all disciplinary inmate hearings. Hearing Officer Reference Book, Hearing Officer Guidance Standards for Inmate Behavior for incidents occurring on or after 4/1/2017, is utilized to guide the Hearing Officer on the imposition of appropriate discipline for misbehavior and emphasizes the importance of fairness and consistency in disciplinary dispositions imposed. Agency philosophy on inmate discipline includes that when imposed properly, disciplinary sanctions keep staff and inmates safe, correctional facilities secure and may assist in the Departmental mission by returning inmates to the community less likely to engage in negative behaviors. Disciplinary charge 101.10 covers sex acts or attempts at sex acts perpetrated by an inmate toward another inmate.

Hearing Officer Reference Book sets forth in attached Appendix B, aggravating and mitigating factors that should be considered in reaching a just and fair disposition. The absence or presence of these factors should be viewed within the context of the totality of the evidence presented when the Hearing Officer is considering sanctions. A substantial list of factors to consider are delineated in the Reference Book to ensure a fair sanction. A table grid with recommended graduated sanctions is utilized by the Hearing Officer after review of the entire situation and circumstances of the case and consideration of mitigating factors of the inmate, such as past behavior. This table includes a checklist for Tier III Disciplinary Sanctions, labeled Appendix C. These guidelines clearly support fair and objective considerations in all disciplinary cases.

In the past 12 months, the number of administrative findings of inmate-on-inmate sexual abuse that occurred at the facility is zero and the number of criminal findings is zero.

Hearing Officer Sanctioned Guidelines addresses that a review of mentally ill inmates should be considered before imposing confinement sanctions that includes the following: referral to programming or counseling, non-confinement sanction would be most likely to correct negative behavior, if non-confinement sanctions have been tried in the past, and any other special consideration.

New York State Department of Corrections and Community Supervision operates one of the largest counseling and treatment programs for sex offenders in the nation. Sex Offender and Treatment Program (SOCTP) Guidelines, dated April 2018 provides guidance for administration of this program. The SOCTP is offered at maximum and medium security correctional facilities in the state prison system and provides comprehensive sex offender treatment for convicted sex offenders, inmates convicted of sexually motivated offenses, and inmates whose histories (including behavior while incarcerated), indicate that they are likely to benefit from sex offender counseling and treatment.

	<p>The main goal of the SOCTP is to reduce the likelihood of reoffending by assisting participants to control their chain of behaviors that lead to sexual offending. This is accomplished by helping participants advance through the following program stages through education, counseling, and treatment. Participants in the SOCTP should be able to demonstrate to SOCTP staff that they have progressed through these stages and met their treatment plan goals. Based on the Department’s zero tolerance policy for inmate on inmate sexual abuse as outlined in DIR #4027 and in accordance with the Prison Rape Elimination Act (PREA), inmates who are found guilty of a Tier disposition per the Standard of Inmate Behavior for a sex offense, threats to commit a sex offense, penal law offense of a sexual nature, or attempt thereof while incarcerated will be referred to Office of Guidance and Counseling SOCTP staff per criteria #6 and may be required to participate in the SOCTP. If the inmate has an established sex offender counseling need that pre-dates the inmate-on-inmate sexual abuse, a non-sex offender referral will not be necessary.</p> <p><b>Conclusion</b></p> <p>Auburn Correctional Facility had zero administrative findings of inmate-on-inmate sexual abuse that occurred in the past 12 months. Based on policy review and interviews with Disciplinary Hearing Staff, Superintendent, and PREA Point Person, Auburn Correctional Facility meets requirements of this standard.</p>
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• Directive #4301 - Mental Health Satellite Services and Commitments to CNYPC - 08/03/2022</li> <li>• HSPM 1.44 Health Screening of Incarcerated Individuals 8-9-21 Section I</li> <li>• FOM 1.09 PREA Risk Screening 01/18/2023</li> <li>• Form 3278, PREA Screening 06/2022 (completed by an RN)</li> <li>• Mental Health Referral Form #3150 (06/2021)</li> <li>• Interviews</li> </ul> <p>Directive #4301 - Mental Health Satellite Services - directed that referrals received will be addressed within 14 days. The Facility Operations Manual for Upstate Correctional Facility, PREA Risk Screening both describe the specific steps needed to ensure a referral is made at this facility.</p> <p>Division of Health Services Policy No.1.44 Health Screening of Inmates states guides mental procedures and direct that upon arrival at a New York State Department of Corrections and Community Supervision facility, every newly received or transferred inmate, including inmates being moved from an owning correctional facility to the same correctional facility Special Housing Unit (SHU), separate keep-lock unit or</p>

Juvenile Separation Unit, will receive a health screening by a Registered Nurse (RN). This screening will include an inquiry into the inmate's current and past health, mental health, and PREA history and immediate referral of any inmate to a health provider if indicated. In accordance with the National Prison Rape Elimination Act (PREA) Standards, 28 C.F.R. § 115.81, any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. Medical and mental health practitioners shall obtain informed consent (HIPAA release) 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. As above, informed consent/HIPAA release is not required for a referral to the Office of Mental Health.

HSPM 1.12B - Incarcerated individuals who experience a significant exposure to bloodborne pathogens (BBP) [i.e., human immunodeficiency virus (HIV), hepatitis B virus (HBV) and hepatitis C virus (HCV)] will receive appropriate medical care and treatment.

In the past 12 months, 100% of inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner. In the past 12 months, the 100% of inmates who have previously perpetrated sexual abuse, as indicated during the screening, who were offered a follow-up meeting with a mental health practitioner.

Form 3278 includes a brief review again of whether the incarcerated individual has been sexually abused or victimized. It is completed by health care staff upon arrival. It affords a place to obtain consent for those who report abuse that occurred outside the prison to obtain consent. It is specified that it is for inmates over the age of eighteen. It provides a referral for mental health and notification to the Watch Commander if the information triggers a concern, demonstrating that the information is only provided to staff to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments. Auditor reviewed forms which verified all follow-up meetings with medical or mental health were within 14 days of the intake screening. Procedure is well implemented. The 3278TR form provided in the folders was completed; one inmate refused to speak and answer the PREA questions about being sexually abused or victimized while incarcerated.

### **Conclusion**

Review of the randomly reviewed risk assessments supported that the procedure as established by this Agency is being followed. Policy, written authority, interviews with mental health staff and intake staff in addition to evidence of compliance provided with the preaudit documentation supports a finding of compliance with this standard.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

**Policy, Materials, Interviews and Other Evidence Reviewed**

- HSPM 1.60 - Sexual Assault - 07/22/2022
- HSPM 1.12B - Incarcerated Individual Bloodborne Pathogens Exposure Protocol 12/03/2021
- SAFE/SANE Hospitals List
- FOM Facility Coordinated Response to Reports of Sexual Victimization 01/20/2023
- Form 3178 Progress Notes
- Form 3150 DCCS Mental Health Referral 06/2021
- New York Public Health Law § 2807-c General Hospital Inpatient Reimbursement
- Observations
- Interviews Medical and Mental Health Staff

The Facility Coordinated Response Plan FOM, HSPM 1.60 Sexual Assault and the New York Public Health Law support that inmates will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. First responders will ensure medical and mental health staff are notified. These documents support that incarcerated individual victims of sexual abuse are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis and treatment services will be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation. The MOU with OMH supports that mental health staff will evaluate and treat victims. The interview with the Agency Doctor, Nurses and Mental Health Staff confirmed that incarcerated individuals would 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.

Medical staff are available twenty-four hours a day, seven days a week (24/7). Mental health staff are available seven days a week, sixteen hours and crisis intervention is available 24/7. This occurs through a video evaluation or transport to the nearest facility for services. Interviews with medical staff, the Superintendent and ADS PREA Manager support that victims will receive immediate unimpeded access to emergency medical care in accordance with professionally accepted standards of care. Post Exposure prophylactic needs will be immediately evaluated prior to sending the victim to the hospital, in accordance with the HSPM 1.12B Inmate Bloodborne Pathogens Significant Exposure Protocol.

A List of SANE/SAFE hospitals is maintained with Health Services and the Watch Commander. Policy and interviews with medical and mental health staff support the requirement of the standard. Evidence was presented by the facility which demonstrated that medical emergency treatment would be provided, including prophylactic medication.



	<p><b>Conclusion</b></p> <p>All staff are very knowledgeable of policy and able to articulate the procedures and protocols. Auditor’s review of policies, interviews, and Coordinated Response Plan provide evidence Auburn Correctional Facility meets provisions of this standard.</p>
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<p><b>115.83</b></p>	<p><b>Ongoing medical and mental health care for sexual abuse victims and abusers</b></p>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• HSPM 1.60 - Sexual Assault – 07/22/2022</li> <li>• OMH MOU 09/14/2016</li> <li>• HSPM 1.12B Inmate Bloodborne Pathogens Significant Exposure Protocol – 12/03/2021</li> <li>• Directive #4401 Guidance and Counseling 08/21/2020</li> <li>• Directive #4301, Mental Health Satellite Services and Commitments to CNYPC</li> <li>• Interviews Medical and mental health staff</li> <li>• Interviews Security staff First Responders</li> </ul> <p>Division of Health Services Policy #1.60, Health Care Services, Sexual Assault, states all allegations of sexual assault will be evaluated immediately by the facility health staff. The inmate victim of an alleged sexual assault will be medically evaluated regardless of whether or not the allegation has been independently verified prior to the victim’s presentation for treatment.</p> <p>Directive#4301, Mental Health Satellite Services and Commitments to CNYPC provides guidelines related to services provided to under custody inmates. The New York State Office of Mental Health (OMH) through its Division of Forensic Services provides services to the Department of Corrections and Community Supervision under custody inmate population. These services are provided as follows: At designated New York State Department of Corrections and Community Supervision facilities by OMH Personnel, at “Satellite Units” operated by OMH located at certain New York State Department of Corrections and Community Supervision facilities, and/or At OMH’s Central New York Psychiatric Center (CNYPC).</p> <p>By mutual agreement between New York State Department of Corrections and Community Supervision and OMH, this directive provides guidelines for determining the appropriate facility or unit for providing OMH services, outlines procedures to be followed when it is necessary to transport inmates from one facility or unit to another to receive mental health services, and assigns responsibility to appropriate New York State Department of Corrections and Community Supervision and OMH personnel for taking necessary action to ensure delivery of appropriate services. This policy states</p>

	<p>regular mental health referrals are addressed within a timeframe that is consistent with the nature of the referral and within 14 days.</p> <p>New York State Department of Corrections and Community Supervision Mental Health Referral Form 3150 (6/2021) includes a place to identify in a regular referral that the inmate is a possible victim of sexual abuse. OMH further acknowledges that, in accordance with 28 C.F.R. § 115.83, mental health evaluation and treatment, as appropriate, shall be offered to all inmates who have been identified as victims of sexual abuse in any prison, jail, lockup, or juvenile facility and are willing to undergo such evaluation and/or treatment.</p> <p>Directive #4401 Guidance and Counseling addresses treatment services available for inmates at NYSDOCCS. HSPM 1.60 - Sexual Assault - 07/22/2022 confirms that a mental health evaluation of all known inmate-on-inmate abusers will be conducted within sixty (60) days. They will be referred to the Sex Offender Counseling and Treatment Program per the guideline. In accordance with the SOCTP Guidelines, inmates referred to the program receive an evaluation by specialized staff upon referral to the program.</p> <p><b>Conclusion</b></p> <p>Auditor’s review of related policy noted in above narrative and interviews with health care staff and Superintendent provide evidence Auburn Correctional Facility meets requirements of this standard.</p>
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<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• SVPPM 115.86 Sexual Abuse Incident Reviews 8/24/22</li> <li>• Sexual Abuse Incident Review Checklist - 11/22/2021</li> <li>• Memo RE PREA Procedural Enhancements 5.9.14</li> <li>• Completed Sexual Abuse Incident Reviews</li> <li>• Interviews</li> </ul> <p>SVPPM #115.86 together establish policy and procedures for the requirement of each facility to conduct a sexual abuse incident review within 30 days of the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated unless the allegation has been determined to be unfounded. In furtherance of that mandate, OSI will develop the necessary investigative documentation to facilitate the completion of those incident reviews. After any PREA reportable substantiated or unsubstantiated investigation, OSI will submit the Sexual Abuse Incident Review Information (SAIRI) to SAPEO. SAPEO will forward an incident review packet to the Superintendent, ADS/PCM, and the designated PPP with</p>

instructions to conduct the incident review and report back to SAPEO with any findings and recommendations. Additionally, the review team is required by SVPPM #115.86 to conduct reviews of Unauthorized Relationships, which are not required by federal standards but considered paramount by the SAPEO to the DOCCS zero-tolerance culture.

Protocols include the review to be conducted within 30 days of the conclusion of the investigation, unless the allegation is determined to be unfounded. Four investigations were closed during the audit period and auditor reviewed each Sexual Abuse Incident Review Checklist finding the reviews were conducted within 30 days from the conclusion of the investigation.

SVPPM #115.86 requires the review team to include upper-level facility management officials, with input from the OSI/SCD Investigator, the area sergeant, the Crisis Intervention Unit, Health Services, OMH, and others deemed appropriate by the review team. The review team will be chaired by the ADS/PCM, the PPP will be the security representative, and the third member of the multi-disciplinary review team, salary grade 22 or equivalent or higher, shall be designated by the Superintendent for each review.

SVPPM #115.86 directs the use of the PREA Standard 115.86/286 Sexual Abuse Incident Review Checklist by the review team when conducting a review. This robust and comprehensive 6-page form includes an extensive review of each incident and captures information such as circumstances of the incident; events leading up to and following the incident; consideration of whether actions taken were consistent with policies and procedures; whether alternative means of managing the situation were available; identification of actions that could be taken to avoid future incidents of a similar nature and identification of training needs; determination of whether Incident Command System levels or response levels were used during the incident; whether employee action or inaction was a factor in the incident; and any corrective action taken. The Administrative Review Form includes consideration as to whether the incident was motivated by race or ethnicity; gender identity; LGBTI status; gang affiliation; or other group dynamics at the facility and whether an indication of a need to change policy or practice to better prevent, detect, or respond to sexual abuse is present. Additional information captured includes if the victim had any disabilities or was LEP and whether the victim or perpetrator had been previously identified as being at high risk for either sexual victimization or being sexually abusive. An examination of the area where the incident occurred to assess any physical barriers that enable abuse will be conducted, and an assessment of the adequacy of staffing levels during different shifts will be made. Consideration is given as to whether monitoring technology should be deployed or augmented to supplement supervision by staff. A written report is prepared of these findings with recommendations for improvements, where indicated. Using the Incident Review Checklist required by SVPPM #115.86, the facility completes a comprehensive review that includes all necessary elements outlined in provision (d) of this standard which goes beyond these minimum requirements.

### **Conclusion**

	<p>In the past 12 months, there were five (5) number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents. In the past 12 months, there five (5) number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents.</p> <p>Auditor's review of the documents referenced above combined with interviews conducted as discussed in the above narrative found the procedures outlined in Agency policy directives are well established at Auburn Correctional Facility and meeting all elements of this standard. Additionally, auditor finds the 6-page, extensively thorough Sexual Abuse Incident Review Checklist to include substantially more depth of a review that required by this standard; It is clear based on interviews and review of completed documents that the Review Committee conducts a timely, meaningful, and substantial review for all incidents and meets the provisions of 115.86.</p>
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<b>115.87</b>	<b>Data collection</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• SVPPM # 115.87- Data Collection, Review, 02/12/2022</li> <li>• DOCCS Public Website</li> <li>• Interview with the PREA Coordinator</li> </ul> <p>SVPPM #115.87 outlines the basic procedures for data collection, review, storage, and reporting of sexual abuse data. In accordance with this standard, the DOCCS collects uniform confidential incident-based data for all allegations of sexual abuse. The Office of Program Planning Research and Evaluation, in cooperation with the OSI, reviews allegations reported to the SCD in order to collect uniform data for every allegation of sexual abuse. The PREA Analyst conducts a preliminary review of allegations reported to OSI/SCD on a weekly basis and disaggregates these data into five categories of sexual victimizations. The Analyst utilizes the definition of "sexual abuse" or "sexual harassment" as provided by 28 C.F.R. § 115.6 in the National Standards to Prevent, Detect, and Respond to Prison Rape. In coordination with the OSI/SCD and SAPEO, these data are reviewed and amended throughout the year to reflect a complete and comprehensive classification of PREA allegations and to identify individuals associated with each case.</p> <p>Confidential incident-based data includes all information necessary to answer all questions from the most recent version of the Survey of Sexual Victimization (SSV) conducted by the Bureau of Justice Statistics. This data includes OSI/SCD data, sexual abuse incident review information, unusual incidents, personnel records, confidential</p>

	<p>security information, incarcerated individual records, disciplinary data, and the incarcerated individual locator system.</p> <p>The DOCCS does not contract for the confinement of incarcerated individuals (reference standard 115.12 of this audit report). On an annual basis, upon request by the U.S. Department of Justice (DOJ), DOCCS shall provide all data requested from the previous calendar year in the proscribed format and by the deadline specified by the DOJ.</p> <p><b>Conclusion</b></p> <p>Analysis of policies and reports identified in the above narrative, and interviews with Commissioner, Associate Commissioner/PREA Coordinator, and PREA Point of Contact conclude Auburn Correctional Facility meets provisions of this standard.</p>
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<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• SVPPM- 115.88 Data Collection and Review 07/11/2022</li> <li>• DOCCS Website Link 01/16/2020</li> <li>• Annual Report on Sexual Victimization 2015 to 2019</li> <li>• Interviews</li> </ul> <p>Agency Directive through Office of Program Planning Research and Evaluation, PREA Data Collection, Review, Retention and Publication Manual directs the PREA Analyst to prepare and aggregate data collected in coordination with the Sexual Abuse Prevention &amp; Education Office and the Office of Special Investigations Sex Crimes Division in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices and training throughout the year. An annual report is prepared which includes identification of problem areas, and corrective action for each facility and the agency as a whole.</p> <p>Agency Directive through Office of Program Planning Research and Evaluation, PREA Data Collection, Review, Retention and Publication Manual directs the annual report include a comparison of the current year’s data and corrective actions with those from prior years and provides an assessment of progress in addressing sexual abuse.</p> <p>Agency Directive through Office of Program Planning Research and Evaluation, PREA Data Collection, Review, Retention and Publication Manual directs approval of the Associate Commissioner/PREA Coordinator and the Commissioner. The report is made available to the public through the Agency website. The latest annual report was published for the period of 2015-2019.</p> <p>Only personal identifiers are redacted from the information and the Annual Report is</p>

	<p>designed for public release therefore no information is redacted.</p> <p><b>Conclusion</b></p> <p>Based on review of the related documents noted above, review of the annual report published to the public website, and interviews with the Associate Commissioner/ PREA Coordinator and Acting Commissioner, Auburn Correctional Facility meets all provisions of this standard.</p>
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<b>115.89</b>	<b>Data storage, publication, and destruction</b>
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	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p><b>Policy, Materials, Interviews and Other Evidence Reviewed</b></p> <ul style="list-style-type: none"> <li>• SVPPM- 115.89 Data Storage, Publication and Destruction 07/11/2022</li> </ul> <p>Agency Directive through Office of Program Planning Research and Evaluation, PREA Data Collection, Review, Retention and Publication Manual dictates data collected to be securely retained by the Office of Special Investigations and the PREA Analyst.</p> <p>Agency Directive through Office of Program Planning Research and Evaluation, PREA Data Collection, Review, Retention and Publication Manual dictates aggregated sexual abuse data is made readily available to the public through its website. Auditor viewed the Annual Report on Sexual Victimization analyzing sexual abuse and sexual harassment data for 2015-2019 from the Agency website.</p> <p>Agency Directive from Office of Program Planning Research and Evaluation, a review of published reports containing aggregated sexual abuse data, and interview with Associate Commissioner/PREA Coordinator indicates personal identifiers are removed prior to making public.</p> <p>Agency Directive through Office of Program Planning Research and Evaluation, PREA Data Collection, Review, Retention and Publication Manual dictates retention of all sexual abuse data collected for at least 10 years after the date of the initial collection.</p> <p><b>Conclusion</b></p> <p>Auditor’s review of related policy noted in above narrative and interviews with Associate Commissioner/PREA Coordinator and Office of Special Investigations indicates Auburn meets requirements of this standard.</p>

<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>This is the third PREA audit of this facility. Auburn Correctional Facility was last audited in ay 6, 2020. The auditor was allowed access to all areas of the facility and had access to all required documentation. The auditor was allowed to conduct private interviews with offenders and staff. Notifications of the audit were posted throughout the facility permitting offenders to send confidential letters to the Auditor prior to the audit. DOCCS posts all audit reports on the DOCCS website in accordance with PREA Standard 115.403 subsection (f) which may be reviewed at: <a href="http://www.doccs.ny.gov/PREA/PREA_Final_Audit_Reports.html">http://www.doccs.ny.gov/PREA/PREA_Final_Audit_Reports.html</a>.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p>

<b>Appendix: Provision Findings</b>		
<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
<b>115.11 (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.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
<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	yes



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

	facility does not have female inmates.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or 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>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

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

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

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



	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the 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.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	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 inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
<b>115.33 (d)</b>	<b>Inmate education</b>	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (c)</b>	<b>Specialized training: Investigations</b>	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious 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.)	
<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.)	yes
<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	yes



	screening instrument?	
<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
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
<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	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
<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 being sexually abusive, to inform: Work 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: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
<b>115.42 (d)</b>	<b>Use of screening information</b>	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
<b>115.43 (b)</b>	<b>Protective Custody</b>	
	Do inmates who are placed in segregated housing because they 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)</b>	<b>Protective Custody</b>	

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d) 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) Protective Custody</b>		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
<b>115.51 (a) 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) 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	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
<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.	yes
<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.)	na
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	na
<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	na

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
<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.)	na
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	na
<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.)	na
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	na
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	na
<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.)	na
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	na
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
<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.)	na
<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,	na

	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.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<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	yes

	abuse or sexual harassment or retaliation?	
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of 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)</b>	<b>Staff first responder duties</b>	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report 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)</b>	<b>Staff first responder duties</b>	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate 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)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations	yes

	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).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial 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?	yes
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

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



<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has 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)</b>	<b>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	yes

	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?	
<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?	yes
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	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	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
<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</b>	

	<b>victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

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



	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?	
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	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.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
<b>115.403</b>	<b>Audit contents and findings</b>	

<b>(f)</b>		
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes