

PREA Facility Audit Report: Final

Name of Facility: Montana State Prison

Facility Type: Prison / Jail

Date Interim Report Submitted: 12/02/2023

Date Final Report Submitted: 06/25/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Nicole Fernandez	Date of Signature: 06/25/2024

AUDITOR INFORMATION	
Auditor name:	Fernandez, Nicole
Email:	nicole.c.fernandez@hawaii.gov
Start Date of On-Site Audit:	10/16/2023
End Date of On-Site Audit:	10/20/2023

FACILITY INFORMATION	
Facility name:	Montana State Prison
Facility physical address:	400 Conley Lake Road, Deer Lodge, Montana - 59722
Facility mailing address:	

Primary Contact

Name:	Jim Salmonsens
Email Address:	jjsalmonsens@mt.gov
Telephone Number:	406-415-6200

Warden/Jail Administrator/Sheriff/Director	
Name:	Jim Salmonsens
Email Address:	jjsalmonsens@mt.gov
Telephone Number:	406-415-6200

Facility PREA Compliance Manager	
Name:	Bill Weddington
Email Address:	bill.weddington@mt.gov
Telephone Number:	O: (406) 415-6572
Name:	Rae Ann Vasquez
Email Address:	rvasquez@mt.gov
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Melissa Scharf
Email Address:	Melissa.Scharf@mt.gov
Telephone Number:	406-415-6522

Facility Characteristics	
Designed facility capacity:	1607
Current population of facility:	1559
Average daily population for the past 12 months:	1565

Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	19-92
Facility security levels/inmate custody levels:	6
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	617
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	232
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	187

AGENCY INFORMATION

Name of agency:	Montana Department of Corrections
Governing authority or parent agency (if applicable):	State of Montana
Physical Address:	5 South Last Chance Gulch, Helena, Montana - 59602
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	Brian Gootkin
Email Address:	Brian.Gootkin@mt.gov
Telephone Number:	(406) 444-4913

Agency-Wide PREA Coordinator Information

Name:	Michele Morgenroth	Email Address:	mmorgenroth@mt.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

0

Number of standards met:

45

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:	2023-10-16
2. End date of the onsite portion of the audit:	2023-10-20

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:	The auditor contacted Just Detention International (JDI) and the Missoula YWCA as it related to PREA-related services at MSP. The auditor did not receive any email correspondence response from JDI and conducted a telephone interview with a Missoula YWCA representative. YWCA staff interviewed confirmed that they do provide PREA-related services for the Montana DOC/ MSP inmates.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1607
15. Average daily population for the past 12 months:	1565
16. Number of inmate/resident/detainee housing units:	13

<p>17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)</p>
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Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

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

<p>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</p>	<p>1559</p>
<p>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:</p>	<p>27</p>
<p>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:</p>	<p>39</p>
<p>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:</p>	<p>30</p>
<p>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:</p>	<p>28</p>

<p>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:</p>	<p>2</p>
<p>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:</p>	<p>45</p>
<p>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:</p>	<p>36</p>
<p>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:</p>	<p>26</p>
<p>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:</p>	<p>24</p>
<p>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:</p>	<p>1</p>
<p>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):</p>	<p>There were no identified youthful inmates on the first day of and during that onsite phase of the audit. This was corroborated through the facility tour, interviews with MSP PREA Compliance Manager, and listing of inmates.</p>

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	646
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:	198
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:	220
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:	MSP had approximately 646 staff, 220 contractors and 198 volunteers assigned to the facility on the first day of the onsite phase of the audit.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	33

<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Age</p> <p><input type="checkbox"/> Race</p> <p><input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input type="checkbox"/> Length of time in the facility</p> <p><input type="checkbox"/> Housing assignment</p> <p><input type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>The auditor requested and received a current inmate listing broken down by housing unit on the first day of the audit. Inmates were randomly selected by the audit team based on the lists provided by the facility and ensured a diversity of inmates based on age, gender, ethnicity/race, housing, and length of stay at the facility.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>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):</p>	<p>Oversampling of random interviews was done to ensure a sufficient and effective understanding of the procedures, process, and overall culture and environment of MSP as it relates to PREA. The audit team did not experience any barriers to the interviewing process for random inmates. The audit team was able to conduct one-on-one interviews with selected inmates in available rooms or office spaces within the housing units and throughout the facility to ensure privacy</p>

Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	33
<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>	
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:	3
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:	3
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:	2
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:	2

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:	2
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	6
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	9
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:	3
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:	1

<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>There were no identified youthful inmates at MSP during the onsite phase of the audit. There were significantly enough interviews in other specialized categories to compensate and ensure that the required total specialized inmate interviews were met. The audit team did not experience any barriers to the interviewing process for specialized groups of inmates. The audit team was able to conduct one-on-one interviews with selected inmates in available rooms or office spaces within the housing units and throughout the facility to ensure privacy.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>16</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" 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 type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

<p>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):</p>	<p>The audit team randomly chose a diverse sample of staff by interviewing staff on all shifts throughout the facility in the housing units and various other post locations throughout the facility. The sample also included a diversity of staff based on gender, length of time employed by MSP and job titles. Throughout the onsite review, the audit team was able to also conduct informal interviews with staff. The audit team did not experience any barriers to the interviewing process for random staff and was able to conduct interviews in a private setting.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</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>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>47</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>78. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>

79. Were you able to interview the PREA Compliance Manager?

Yes

No

NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this 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
If "Other," provide additional specialized staff roles interviewed:	<p>The selection of the specialized staff included the "other" category as the audit team interviewed other key staff with impacts on the implementation and maintenance of the PREA Standards. The "other specialized staff" interviewed were the MDOC Grievance Coordinator, MDOC Victim Liaison and the MSP mailroom staff.</p>
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	2
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	1

<p>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Security/detention</p> <p><input type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input checked="" type="checkbox"/> Other</p>
<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>The audit team conducted interviews with 47 specialized staff members. It should be noted that every staff member serves in more than one role. All employees are mandated reporters, and most are first responders. Specialized staff interviewed may serve in more than one role and were responsible for more than one of the Specialized staff duties and as a result, some interviews conducted with Specialized staff included multiple interview questionnaires. The auditor conducted web-based interviews before the onsite phase with identified supervisory, specialized staff, and administrative staff, because of their positions of authority and access to private locations such as secure offices.</p>

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

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).

Montana State Prison (MSP) is located in the city of Deer Lodge, MT. The facility covers 68-acres of the 40,860 acres facility land. MSP is the largest prison in Montana. MSP houses nearly 1,600 adult male offenders from low to high security levels. MSP also consist of the Riverside Special Need Unit, which is located approximately 80 miles from MSP in the city of Boulder, MT. This unit houses approximately 25 male offenders with serious and long-term medical needs.

The physical plant area viewed while onsite were:

- Administration Building
- Visiting
- Gymnasiums
- Recreation Yards
- Religious Activities Center
- Education and Programs Building
- Dinning Halls and Food Factory
- Laundry
- Vocational and Maintenance Areas
- Warehouse
- Canteen Area
- Infirmary High Side Units 1 &2
- Low Side Units A, B,C and D
- Restrictive Housing Unit (RHU)
- Secure Adjustment Unit (SAU)
- Intake/Reception Unit
- Work and Reentry Unit
- Montana Correctional Enterprise (MCE)
Main Office
- MCE Dairy
- MCE Ranch Office
- Riverside Special Needs Unit

While onsite at MSP, the audit team was provided with access to, and the ability to observe, all areas of the facility. The audit team was able to have formal and informal interviews with inmates and staff during the onsite phase of the audit. The audit team tested the inmate phone system in several areas to connect to the local rape crisis center. Throughout the onsite review, the audit team observed all areas for possible blind spots, camera surveillance, privacy from

cross-gender viewing, PREA information, interpreter services information, victim advocate information, and phone numbers and addresses for reporting sexual abuse and sexual harassment. PREA audit notices and posters were posted throughout the facility in English. The audit team also observed posters with information for interpreter services, victim advocate information, and phone numbers and addresses for reporting sexual abuse and sexual harassment.

Documentation Sampling

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

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

Yes

No

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

A pre-audit web-based meeting was facilitated on September 26, 2023, with the Montana DOC PREA Coordinator, MSP PREA Compliance Manager and MSP designated staff to discuss the audit process, discuss the review of the PAQ, documents, and files/ records for review and the schedule for the on-site phase. Additionally, a request for the following was requested to be provided on the first day of the audit:

- Inmate Roster by Housing Unit
- Inmates identified as having physical disabilities
- Inmates identified as having a cognitive or functional disability
- Inmates identified as being blind or low vision
- Inmates identified as being deaf or hard of hearing
- Inmates identified as being Limited English Proficient (LEP)
- Inmates who identify as being Gay or Bisexual
- Inmates who identify as being Transgender or Intersex
- Inmates who reported a PREA incident in the last 12 months
- Inmates who reported prior sexual victimization during risk screening in the last 12 months
- Staff Roster

During the audit process, the auditor selected and reviewed MSP human resource (employee and volunteer/contractors) files, inmate records, medical/mental health referral records, and PREA investigation files.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	62	12	62	12
Staff-on-inmate sexual abuse	11	1	11	1
Total	73	13	73	13

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	64	1	64	1
Staff-on-inmate sexual harassment	19	1	19	1
Total	83	2	83	2

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	9	12	0	0	0
Staff-on-inmate sexual abuse	0	1	1	x	x
Total	9	13	1	x	x

You indicated that you are unable to provide information for one or more of the fields above. Explain why this information could not be provided.

The staff-on-inmate sexual abuse criminal case was still on-going at the time of the audit.

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	24	16	21	1
Staff-on-inmate sexual abuse	1	6	3	1
Total	25	22	24	2

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
Inmate-on-inmate sexual harassment	0	1	0	0	0
Staff-on-inmate sexual harassment	1	0	0	0	0
Total	1	1	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	14	10	36	4
Staff-on-inmate sexual harassment	8	6	5	0
Total	22	16	41	4

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	18
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<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</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>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>13</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</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>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</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>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>5</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</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>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</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>
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Sexual Harassment Investigation Files Selected for Review

<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>13</p>
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<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</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>
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Inmate-on-inmate sexual harassment investigation files

<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>6</p>
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<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	7
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<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)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<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)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The auditor randomly selected investigation files to review and Montana DOC/MSP provided those selected files to review post onsite. The auditor did not experience any barriers to obtaining and reviewing the PREA investigation files or with any follow-up needed.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:	1

Non-certified Support Staff	
<p>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.</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:</p>	<p>2</p>
AUDITING ARRANGEMENTS AND COMPENSATION	
<p>121. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input checked="" 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 type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
<p>Identify your state/territory or county government employer by name:</p>	<p>State of Hawaii - Department of Corrections and Rehabilitation</p>
<p>Was this audit conducted as part of a consortium or circular auditing arrangement?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<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>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Montana DOC Organizational Chart 5. Montana DOC Investigations Organizational Chart 6. Montana DOC PREA Coordinator Job Description 7. MSP PREA Compliance Manager Job Description 8. Interviews with the following: <ol style="list-style-type: none"> 1. Montana DOC PREA Coordinator 2. MSP PREA Compliance Manager

115.11(a) - Montana DOC Policy Directive DOC 1.1.17, states that the Montana DOC has zero tolerance relating to all forms of sexual abuse and sexual harassment in accordance with the standards outlined in the Prison Rape Elimination Act of 20036 (PREA). This policy applies to all Department divisions, facilities, and programs. Further, it identifies the purpose of the policy and provides guidelines for the prevention, detection, responses, investigation, and tracking of sexual assault, sexual misconduct, sexual abuse, and sexual harassment against Montana DOC offenders. DOC 1.1.17 also includes PREA-related definitions as well as definitions of specific prohibited behaviors regarding sexual abuse and sexual harassment. Further, it identifies the sanctions for those found to have participated in prohibited behaviors related to sexual abuse and sexual harassment.

115.11(b) - A review of the Montana DOC Organizational Chart, Investigations Organization Chart, and PREA Coordinator position description confirms that Montana DOC employs an upper-level, agency-wide PREA Coordinator. The PREA Coordinator reports to the Investigations Bureau Chief. The Montana PREA Coordinator reports that she has sufficient time and authority to develop, implement, and oversee the agency's efforts to comply with PREA in all of its facilities. As the Montana DOC PREA Coordinator, she directly supervises three (3) facility PREA Compliance Managers. In addition to directly supervising and working with the facility PREA Compliance Managers, she works with facility Administrators on addressing any PREA compliance issues, staffing plans, and annual reports. As part of her supervision of the facility PREA Compliance Managers, she has daily contact with them through virtual and in-person meetings, telephonically, and email correspondence.

115.11(c) - Review Of MSP Operational Procedure MSP 1.1.17, PREA Compliance Manager position description and interview with the MSP PREA Compliance Manager confirm that MSP has a designated PREA Compliance Manager who is under the direct supervision of the PREA Coordinator. The MSP PREA Compliance Manager reports that he has sufficient time and authority to coordinate the facility's efforts to comply with PREA. The PREA Compliance Manager acts on behalf of the Bureau Chief and the Warden to ensure PREA compliance.

Montana DOC and MSP have shown that there is a zero-tolerance policy for sexual abuse and sexual harassment, has a designated PREA Coordinator and PREA Compliance Manager with sufficient time and authority to coordinate the facility's efforts to comply with PREA standards. While on-site, interviews with staff and inmates confirmed their knowledge and practice of Montana DOC's zero-tolerance policy.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Policy, Materials, Interviews, and Other Evidence Reviewed:

1. MSP Completed Pre-Audit Questionnaire (PAQ)
2. Montana Department of Corrections (DOC) Policy Directive
 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
3. Montana DOC Current Contracts for Confinement of Offenders
4. Interviews with the following:
 1. Montana DOC Community Corrections and Programs Facilities Contract Monitor Bureau Chief
 2. Montana DOC Secure Facilities Contract Monitor Bureau Chief

115.12(a)-(b) - Montana DOC Policy Directive 1.1.17 (pg.4) requires that any new contract or contract renewal for the confinement of offenders will include the contract entity's obligation to adopt and comply with the PREA standards and provisions for the department to monitor the contract to ensure the contractor is complying with the PREA standards. All contracts for the confinement of offenders entered into (or renewed) after August 20, 2012, contain language in the contract that requires that the contractor must comply with the Prison Rape Elimination Act and the standards mandated therein. Further, it mandates that the contractors comply with the MDOC PREA Policy Directive to include incident reporting, and establishing a zero-tolerance policy for incidents of sexual assault/rape or sexual misconduct.

Montana DOC has a Community Corrections and Programs Facilities Contract Monitor Bureau Chief who monitors contracted facilities for the confinement of offenders in pre-release centers, substance abuse treatment facilities, and assessment sanction centers and a Secured Facilities Contract Monitor Bureau Chief who monitors secure contracted facilities for the confinement of offenders. The Montana DOC currently has 15 Community Corrections and Programs Facilities who are contracted for the confinement of offenders and 2 secured facilities who are contracted for the confinement of offenders. The Secured Facilities Contract Monitor Bureau Chief reported that they are currently in the process of contracting a third secured facility for the confinement of offenders.

Interviews with both Contract Monitor Bureau Chiefs affirmed that all contracted facilities must be in compliance with the federal PREA standards, must adopt the MDOC PREA policy and have PREA audits every three years. Contract agreements for the contracted facilities and audit reports were reviewed by the auditor and confirmed this practice. In non-federal audit years, Montana DOC contract and compliance monitors visit each facility to ensure that they are continuing to comply with PREA standards. This was confirmed through the documentation provided of site visits and interviews with the two MDOC Contract Monitor Bureaus Chiefs.

Based on contract documentation and interviews with the two Contract Monitor Bureau Chiefs, Montana DOC has demonstrated compliance with all sections of this standard.

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Montana DOC - 2022 MSP Staffing Analysis 5. Montana DOC Memo to MSP Correctional Officers Re: 12-Hour Shifts (Dated 06/20/22) 6. MSP Annual Staffing Plan Review 7. MSP Staffing Plan 8. MSP Emergency Staffing Plan - 2021 9. Interviews with the following: <ol style="list-style-type: none"> 1. Montana DOC Director 2. Montana DOC PREA Coordinator 3. MSP Warden 4. MSP Intermediate or Higher Level Staff <p>115.13(a)-(b) - Montana DOC Policy Directive 1.1.17 (pg.4) requires that facility administrators develop, document, and make best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring, to protect offenders against abuse. In circumstances where the facility staffing plan is not complied with, facilities will document and justify all deviations from the plan. MSP Operational Procedure 1.1.17 (pg.4) further states that the facility will document and justify all deviations from the plan within the Command Post Daily Report and, on the staff schedule itself. Interviews with the Montana DOC Director and the MSP Warden confirmed that MSP regularly develops a staffing plan and adequate staffing levels to protect inmates against sexual abuse are considered in the plan's development. The auditor reviewed the MSP Staffing Plan and supporting documents provided and confirmed that the staff plan includes a detailed analysis addressing items (1) through (11).</p> <p>In the years prior to this audit, MSP had seen an increase in staff shortages due to vacancies, light duty, extended leaven, and overall a depleting workforce throughout Montana, which resulted in deviations from the staffing plan. Effective July 16, 2022, MSP implemented 12-hour shifts for all positions classified as correctional officers. MSP Administration reported that this change has been overall positive and that as a result there are minimum to no deviations from the staffing plan. Additionally, MSP received funding for new video monitoring and surveillance systems in 2020 and during the onsite phase of this audit it was in the final stages of installation and had not gone "live" yet.</p>

This substandard required correction action as during the onsite phase of the audit, the audit team observed several areas that needed to be addressed or mitigated as "blind spots": Secure Adjustment Unit (SAU) and Restrictive Housing Unit (RHU) staff restrooms had staff bathrooms that had barrel slide locks on the interior which were removed and Motor Vehicle Maintenance (MVM) area parts room with tool room around the corner of the first floor had a blind spot in the back right. MSP provided the auditor with photos to confirm that the barrel locks were removed and a mirror was placed in the MVM area to mitigate the blind spot.

115.13(c) - Montana DOC Policy Directive 1.1.17 (pg.4) and MSP Operational Procedure 1.1.17 (pg.4) state that the facility will review the staffing plan annually, in consultation with the PREA Coordinator, to assess and document whether adjustments are needed. A review of the MSP staffing plan along with interviews with the Montana DOC PREA Coordinator, MSP Warden, and MSP PREA Compliance Manager demonstrate and confirm that MSP assesses the staffing plan, facilities' use of monitoring technologies and resources to ensure adherence to the staffing plan, at least once a year.

115.13(d) - Montana DOC Policy Directive 1.1.17 (pg.4) and MSP Operational Procedure 1.1.17 (pg.4) state that Administrators will require intermediate-level and higher-level staff to conduct random unannounced rounds to identify and deter employee or service provider sexual abuse and sexual harassment. These rounds must be documented in an unannounced rounds log and cover all shifts and all areas of the facility. The facility must prohibit staff from alerting others of the conduct of such rounds. MSP Operational Procedure further identifies which staff are responsible for these rounds to include: a) Warden; b) Associate Warden(s); c) Captains; d) Lieutenants; e) Staff Sergeants; and f) Program Manager(s) as selected by the Warden.

Interviews with intermediate and high-level facility staff reported that they prevent staff from alerting other staff members of their unannounced rounds by making their rounds throughout the shift to different buildings and at different times and never in a pattern. This substandard required corrective action as while onsite the audit team found that the documentation of the unannounced rounds was not consistent. MSP created a new reporting process to document unannounced rounds which is set up in Office 365 and the intermediate and higher-level staff can document their unannounced rounds on the computer. This system then allows the facility to generate a graph data and Excel sheet which will enable them to confirm the rounds are being documented as well as enable them to identify any trends. Additionally, a reminder was sent to staff to remind them to ensure their rounds are also documented in the housing log books. MSP provided the auditor with log book entries as well as the Excel sheets of the unannounced rounds which demonstrated and confirmed compliance with this substandard.

115.14	Youthful inmates
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	Auditor Overall Determination: Meets Standard
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	Auditor Discussion
	MSP is an adult prison that does not house youthful offenders or offenders under the age of 18 years old. This standard does not apply wit MSP.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 3.1.17 Searches and Contraband Control 2. DOC 3.1.21 - Inmate Count and Supervision 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP 3.1.17a - Searches 2. MSP3.1.17b - Contraband Control 4. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Admissions Staff 2. MSP Random Staff 3. MSP Random Inmates <p>115.15(a) - Montana DOC Policy Directive 3.1.17 (pg.3) states that only health care providers, excluding facility health care providers, will conduct body cavity searches when there is a reason to do so and only the written authorization of the administration. MSP Operational Procedure 3.1.17a (pg.4) states that cross-gender unclothed body searches will not be conducted except in exigent circumstances. MSP reported no incidences of cross-gender strip searches in the 12 months preceding the audit. This was confirmed through interviews with staff and inmates.</p> <p>115.15(b) - MSP is a male facility and does not house female offenders therefore this subsection does not apply to this audit.</p> <p>115.15(c) - Montana DOC Policy Directive 3.1.17 (pg.3) states that written procedures will provide that, except in emergencies, staff of the same gender as the offender will conduct offender unclothed body searches in a private area and based on reasonable suspicion that the offender is carrying contraband or other prohibited material. Further, it states that cross-gender clothed body searches of residents in juvenile facilities, juveniles, and adult females are not permitted unless exigent circumstances require a cross-gender clothed body search. MSP does not house juvenile or female offenders.</p> <p>115.15 (d) - Montana DOC Policy Directive 3.1.21 (pg.4-5) states that facility</p>

procedures will ensure that inmates are able 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 viewing is incidental to routine cell check. Montana DOC Policy Directive 1.1.17 (pg.4) and MSP Operational Procedure (pg.4) state that transgender and intersex offenders will be given the opportunity to shower separately from other offenders either through physical separation by separate shower stalls or by time-phasing or scheduling showers.

This substandard required corrective action as during the onsite phase of the audit, the audit team observed several areas that needed to be addressed or mitigated for opposite-gender viewing concerns: Transportation Unit - Cell #3 toilet was directly visible through the window; Lower Gym - Inmate toilet was visible from the lower bleacher section of the gym; Secure Adjustment Unit (SAU) - Safety Cell and shower in the hallway does not have any privacy curtain; and Intake/Reception - Holding Cells D-2 and D-3 toilet were visible through the window. MSP was able to address this by refrosting cell windows and/or placing modesty barriers to ensure privacy from opposite-gender viewing and submitted verification through photo documentation. Further, it was identified that the Low Infirmery inmates in suicide/safety watch cells could be monitored 1:1 by female staff. MSP amended the post order for that post which specifies that 1:1 monitoring is to be a male post. Verification of the post order was provided to the auditor.

Additionally, MSP was currently in the process of updating its video monitoring system which had not gone "live" yet during the onsite phase. Therefore, the auditor was not able to confirm camera views to ensure that inmates are able to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their buttocks or genitalia. The camera placements identified by the audit team were the High Side Gym bathroom area and the Visiting Room camera around the toilets. MSP provided the auditor with photos of the camera views from these locations which confirmed that inmates were able to use the restroom without opposite-gender staff viewing their buttocks and genitalia.

Montana DOC Policy Directive 3.1.21 (pg.4-5) and MSP Operational Procedure 3.1.100 (pg.2) state that procedures will require staff of the opposite gender to announce their presence when entering an inmate housing unit. During the onsite phase of the audit, the audit team observed postings outside of the housing units for opposite-gender staff to announce their presence when entering the housing unit. It is reported to the audit team that the responsibility of the opposite gender announcements is placed on the opposite gender staff entering the unit and then the staff at the control will make an announcement on the intercom.

This substandard required corrective action as during the on-site phase, the audit team observed inconsistent announcements of the opposite gender notification when entering housing or living units. Interviews with random inmates and some staff confirmed that opposite-gender announcements are inconsistently occurring at MSP. MSP sent an email to all staff reminding them about the requirement for opposite-gender announcements. Additionally, postings were put up in designated areas of the

	<p>facility to remind staff to make opposite-gender announcements. MSP provided the auditor with documentation and has demonstrated compliance with this substandard.</p> <p>115.15 (e) - Montana DOC Policy Directive 3.1.17 (pg.3) and MSP Operational Procedure 3.1.17a (pg.4) state that staff are prohibited from searching or physically examining a transgender or intersex offender for the sole purpose of determining the offender's genital status.</p> <p>115.15 (f) - Montana DOC Policy Directive 3.1.17 (pg.5) states the facility administrators will require staff training to include how to conduct cross-gender clothed body searches, and searches of transgender and intersex inmates, professionally and respectfully, and in the least intrusive manner possible, consistent with security needs. Interviews with staff and a review of training logs and lesson plans confirm that staff has been trained to ensure pat-down searches are conducted professionally and respectfully.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. DOC 3.3.15 - Americans with Disabilities Act (ADA) Offender Accommodations 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. State of Montana contract with Language Link 5. Montana DOC "No Means No" Poster (Spanish) 6. Montana DOC Sexual Abuse Advocacy Services Poster (Spanish) 7. Inmate Education Video Transcript 8. Interviews with the following: <ol style="list-style-type: none"> 1. Montana DOC Director 2. MSP Random Staff 3. MSP Inmates with Disabilities/Limited English Proficient <p>115-16(a) - (b)- Montana DOC Policy Directive 1.1.17 (pg.6) requires that each facility take appropriate steps to ensure offenders with disabilities have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and sexual harassment. These steps shall include access</p>

to interpreters and written materials provided in formats or through methods that ensure effective communication. Further, the facility shall provide offender education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills. This is reiterated in MSP Operational Procedure 1.1.17.

During the on-site audit, inmates who identified with physical disabilities as being visually or hearing impaired and with limited English proficiency were interviewed and confirmed that tools and aids are present at MSP to assist them with PREA information, education, and any investigation process. Inmates were aware of the PREA, what their rights are, and what to do in the event of a PREA incident. PREA posters and information were observed throughout the facility in English and Spanish. Further, Montana DOC provides a transcript of the PREA education video for inmates who are hearing impaired, a braille PREA brochure for the visually impaired, as well as the "Don't Touch Me" booklet from the PREA Resource Center for those who may need pictures to help them understand PREA. An interview with the Montana DOC Director affirmed that there are policies and procedures in place to ensure that PREA educational materials are available for inmates with disabilities and those with limited English proficiency.

115.16(c) - Montana DOC Policy Directive 1.1.17 (pg. 11) states that the facility will not rely on offender interpreters for investigations regarding sexual abuse or sexual harassment except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, first responder duties or the investigation of the allegations. The PAQ indicated that MSP did not utilize inmate interpreters in the twelve months preceding the audit. Interviews with random staff indicated that staff is aware of the policy and does not rely on inmate interpreters, readers, or other types of inmate assistance during any sexual violence, staff sexual misconduct, or sexual harassment investigation.

Montana DOC has a current contract in place through the State of Montana with Language Link to provide telephone interpretation, as well as document translation, and services on demand to assist inmates that are limited English proficient. Interpreter services are available twenty-four (24) hours a day, seven (7) days a week. During the on-site review, interviews with inmates who identified as limited English proficient were conducted with the use of the Language Link interpreter serviced. This confirmed that MSP has a process in place to accommodate inmates with limited English proficiency.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews, and Other Evidence Reviewed:

1. MSP Completed Pre-Audit Questionnaire (PAQ)
2. Montana Department of Corrections (DOC) Policy Directive
 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
 2. DOC 1.3.2 - Performance and Conduct
 3. DOC 1.3.55 - Criminal Conviction in Employment
3. Montana State Prison (MSP) Operational Procedure
 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
4. Montana DOC - Code of Ethics Form
5. Montana DOC Contractor PREA Requirements (Clinical and Non-Clinical)
6. Montana DOC Volunteer PREA Requirements
7. Interviews with the following:
 1. MSP Human Resource Staff

115.17(a)-(b) - Montana DOC Policy Directive 1.3.55 (pg.2) states that for positions that may have contact with offenders, the department will not hire, enlist the services of, or continue the employment of an employee or service provider who:

- has engaged in sexual abuse in prison, jail, lockup, community confinement facility, juvenile facility, or other institution;
- has been convicted of engaging in 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;
- has been civilly or administratively adjudicated to have engaged in the activity described above; or
- has contact with youth and is listed on the PDHHS child abuse registry.

The department will consider any incident where the individual engaged in sexual harassment before hiring, promoting, or enlisting the services of any individuals who may have contact with offenders.

115.17(c), (d), (e) - Montana DOC Policy Directive 1.3.55 (pg.2) states that upon hire, transfer, promotion, and every five years thereafter, Human Resources will ensure that criminal background checks are conducted on employees and service providers who may have contact with offenders and ensure a DPHHS child abuse registry search for employees or service providers who may have contact with youth. Further, it requires all employees who may have contact with offenders to complete the Policy Acknowledgment and Disclosure Form in written applications or interviews for hiring and promotion. The form is then submitted to Human Resources. Employees must self-report criminal charges and convictions within five days of either the charge or conviction to their immediate supervisor and Human Resources.

115.17(f) - Montana DOC Policy Directive 1.3.55 (pg.2) states that employees have a continuing affirmative duty to disclose any of the misconduct listed in subsection (a) and (b) above.

	<p>115.17(g) - Montana Policy Directive 1.1.17 (pg.13) states that department employees are guaranteed constitutional and administrative protections; within the boundaries of those protections, employees will cooperate with any authorized investigation and inquiry and will relate fully and truthfully their knowledge of all issues pertaining to the alleged conduct under investigation. Material omissions or provision of materially false information that the employee knows or suspects to be false will result in the employee being subject to disciplinary action in accordance with DOC Policy 1.3.2 - Employee Performance and Conduct.</p> <p>115.17(h) - Montana Policy Directive 1.3.55 (pg.4) states that the department will 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 the employee has applied to work.</p> <p>Interviews with MSP Human Resource Staff confirmed that background checks are done on new employees and contractors (service providers). Additionally, background checks are completed for anyone being hired via transfer, promotion, or changing positions. Subsequently, background checks are done every five years. The auditor reviewed human resource files for new hires, contractors, and volunteers and found compliance with this section of the standard. This standard required corrective action as human resource files reviewed on staff that were promoted found that background checks, reference checks, and acknowledgment and disclosure forms were not consistently completed. Montana DOC PREA Coordinator did a refresher training with the MSP Human Resources staff on the new-employee pre-service PREA information, background checks, disclosure forms, and institutional reference checks for both new hires and promotions/transfers. MSP provided the auditor with HR files during the corrective action period on those that were promoted/transferred that confirmed that background checks, reference checks, and acknowledgment and disclosure forms were being completed as required. MSP has demonstrated compliance with this substandard.</p>
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. MSP PREA Department Security Camera Recommendations

5. MSP Proposed Cameras Listing and Mapping
6. Interviews with the following:
 1. Montana DOC Director
 2. MSP Warden
 3. MSP PREA Compliance Manager

115.18(a) - (b) - Montana DOC Policy Directive 1.1.17 states that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the facility and the department must consider the effect of the design, acquisition, expansion, or modification upon the facility's and department's ability to protect offenders from sexual abuse. Further, when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the facility and department must consider how such technology may enhance the facility's and department's ability to protect offenders from sexual abuse. MSP Operational Procedure 1.1.17, requires that the facility PREA Compliance Manager be notified at the beginning of any planning phase for expansion or modifications, installing, or updating technology.

MSP has not had any substantial expansions or modifications to its existing facilities since its last PREA audit in 2021. MSP received funding for new video monitoring and surveillance systems in 2020 and during the onsite phase of this audit, it was in the final stages of installation and had not gone "live" yet. The MSP PREA Compliance Manager and PREA Coordinator were involved in the process to ensure that consideration was taken in areas with blind spots and areas identified during incident reviews that video monitoring would have assisted in investigations, while also ensuring a level of privacy. Interviews with the Montana DOC Director and MSP Warden affirmed that Montana DOC/MSP takes into consideration a level of privacy for inmates in addition to protecting inmates from sexual abuse.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. DOC 3.1.19 - Investigations 3. DOC 3.1.28 - Crime Scene and Physical Evidence Preservation 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Montana DOC - SAFE/SANE Brochure

5. Montana DOC and YWCA Missoula Memorandum of Understanding (MOU)
6. PREA YWCA Advocate Training
7. Montana DOC PREA Advocate Services Form
8. Interviews with the following:
 1. MSP Medical Staff
 2. SANE/SART Nurses
 3. MSP PREA Investigators
 4. Montana DOC Criminal Investigators
 5. MSP Inmates who reported sexual abuse

115.21(a) - (b) - Montana DOC Policy Directive 1.1.17 states that administrators, or designees, will ensure all staff follow appropriate evidence procedures outlined in DOC Policy 3.1.28 Crime Scene and Physical Evidence Preservation. Montana DOC Policy Directive 3.1.28 outlines the responsibilities, documentation, and evidence handling to preserve crime scenes and physical evidence for crimes that occur within the the jurisdiction of the Department to maximize the possibility of successful prosecution and convictions.

115.21(c) - Montana DOC does not conduct SAFE/SANE exams at any of their facilities. Inmates are transported to local hospitals or rape crisis centers for examinations. Montana DOC and MSP provide a "Forensic Medical Exams: What you need to know" brochure to victims of sexual abuse that provides them with information on forensic exams and also informs them that the exam is completed at no cost to them. MSP primarily uses First Step in Missoula, MT for sexual assault exams. If First Step cannot do the exam for any reason, the inmate would be taken to St. Patrick Hospital in Missoula, MT. For inmates that are housed at the Riverside Special Needs Unit, they would be taken to St. Peter's in Helena, MT for the exam. Interviews with SANE/SAFE staff confirmed that they conduct sexual assault forensic exams for MSP.

115.21(d)-(e) - Montana DOC Policy Directive 1.1.17 (pg. 11) requires that services must be made available without financial cost to the victim and must include access to victim advocate or rape crisis center that can offer emotional support services throughout the investigative process, or access to a qualified employee or service provider. MSP Operational Procedure 1.1.17 (pg.12) further states that contact information for those services will be available to staff and inmates, where applicable through brochures, posters, and the coordinated response plan. If an inmate from MSP is transported to First Step for a sexual assault exam, First Step provides a victim advocate from Missoula YWCA for all sexual assault exams as per their standard protocol. For victim advocacy after the exam, Montana DOC utilizes their Department Victim Liaisons who are department employees who work in the Victim Programs office. The liaisons serve victims in the community and victims of crimes, such as sexual abuse, within the facilities. Montana DOC has a Memorandum of Understanding (MOU) with the YWCA Missoula to provide victim support services related to sexual abuse. Interviews with the Montana DOC Victim Advocate, department and facility investigators and a review of MSP PREA investigations files confirmed this practice in request and providing victim advocates for inmates who

	<p>reported sexual abuse.</p> <p>115.21(f) - The Riverside Special Needs Unit for MSP is located off site and in a different county from MSP. The Jefferson County Sheriff has primary jurisdiction and works collaboratively with Montana DOC criminal investigators for any sexual abuse allegations.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. DOC 3.1.19 - Investigations 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Montana DOC and Montana Department of Justice Memorandum of Understanding (MOU) 5. Montana DOC Website 6. MSP PREA Investigation Files 7. Interviews with the following: <ol style="list-style-type: none"> 1. MDOC Director 2. MDOC PREA Coordinator 3. MSP PREA Investigators 4. Montana DOC Criminal Investigators <p>115.22(a) - (b) - Montana DOC Policy Directive 1.1.17, requires that all reported incidents of sexual abuse and sexual harassment be investigated promptly, thoroughly, and objectively. It further states that criminal investigations will be conducted by either the LEAJ or by the Department's Office of Investigations in accordance with DOC Policy 3.1.19 Investigations. MSP Operational Procedure 1.1.17 states that potential criminal conduct will be reported to the Office of Investigations. It further outlines that the Office of Investigations will determine if they accept the case as criminal. Potential criminal conduct at the Riverside Special Needs Unit will be reported to the Office of Investigations who will then contact the Jefferson County Sheriff's Office. If it is accepted as criminal, an administrative case will be opened in conjunction with the criminal case.</p> <p>Montana DOC Policy Directive 1.1.17 further requires that reports of sexual abuse or sexual harassment by an employee, service provider, or inmate be forwarded to the Office of Investigations, MSP PREA Compliance Manager, and the Department PREA</p>

	<p>Coordinator within one business day. A Request for Investigation (RFI) for all allegations of sexual abuse and sexual harassment will be sent to the Office of Investigations to initiate an investigation. The Office of Investigations will forward RFIs that do not rise to the level of a criminal investigation to the facility PREA Compliance Manager and/or the appropriate administrator or designee, to open an administrative investigation. For any cases involving employees, the Office of Investigations will also notify the Office of Human Resources. The Office of Investigations refers their criminal investigations to the State Attorney General who then makes a determination on criminal prosecution. This process was confirmed during interviews with the Montana DOC PREA Coordinator, MSP PREA Investigators, and Montana DOC Criminal Investigators. MSP reported that during the 12 months preceding the audit, there were 155 allegations of which 13 were referred for criminal investigations.</p> <p>155.22 (c) - The Riverside Special Needs Unit located in Jefferson County falls under the authority and jurisdiction of the MSP Warden. The Jefferson County Sheriff's Office has primary jurisdiction and works in collaboration with the Montana DOC Office of Investigations for any criminal cases. Montana DOC Policy Directive 1.1.17 and MSP Operational Procedures 1.1.17 outline the responsibilities of each entity.</p>
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115.31	Employee training
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Montana DOC - Comprehensive PREA Training Lesson Plan and Slides 5. Montana DOC - PREA Pre-Service Orientation Brochure 6. Montana DOC - PREA Refresher Training 7. MSP Training Records 8. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Random Staff <p>115.31(a)-(d) - Montana DOC Policy Directive 1.1.17 (pg. 5-6) requires that before working with inmates, all employees with direct and/or incidental contact with inmates which includes visual, physical, or audio contact must receive documented PREA training. If an employee is unable to attend comprehensive PREA classroom training prior to contact with inmates, they must receive pre-service training in the form of reviewing the PREA policy and a PREA brochure and signing an</p>

acknowledgement form. The employee must then attend the next available classroom training. Montana DOC PREA Comprehensive classroom training and pre-service training, includes but is not limited to:

- review of MDOC Policy 1.1.17 PREA. DOC Policy 1.3.12 Staff Association and Conduct with Offenders, appropriate site-specific procedures, and other applicable state or federal laws;
- the agency's zero tolerance policy for sexual abuse and sexual harassment;
- how employees and service providers fulfill their responsibilities under the department's sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
- an offender's right to be free from retaliation for reporting sexual abuse and harassment;
- offender and employee rights to be free from retaliation for reporting sexual abuse and harassment;
- the dynamics of sexual abuse and harassment in confinement;
- common reactions of sexual abuse and sexual harassment victims;
- how to detect and respond to signs of threatened and actual sexual abuse;
- how to avoid inappropriate relationships with offenders;
- how to communicate effectively and professionally with offenders who might be lesbian, gay, bisexual, transgender, intersex (LGBTI) or gender nonconforming;
- how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities;
- facility procedures on sharing confidential information; and
- gender-specific information tailored to the gender of the offenders at the facility.

Each employee is required to attend classroom refresher training (also known as Comprehensive Classroom Training) in odd number years to cover the aforementioned topics. In even number years, employees will receive refresher information on current sexual abuse and sexual harassment policies and must complete Online PREA Refresher Training. MSP Operational Procedure 1.1.17 further elaborates that MSP trainers will schedule and conduct these trainings in conjunction with the Montana DOC Department of Professional Development Bureau and that the Warden will ensure compliance by sending the notice for these trainings.

Montana DOC's PREA Training was provided and reviewed by the auditor and covers all categories listed in subsection a (1-10). Montana DOC Policy Directive 1.1.17 requires that all training be documented, through signature or electronic verification, showing acknowledgement that the employee, volunteer or service provider received and understood the training. Interviews with random staff along with a review of training records confirmed that staff are receiving initial PREA training and annual PREA refresher training. As of November 29, 2023, there were approximately 55 staff that were remaining to complete their annual PREA refreshing training. Montana DOC PREA Coordinator confirmed that anyone who fails to take the refresher training and did not have a good justification will be referred to Human Resources for either discipline or a letter of expectation.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. DOC 1.3.16 - Volunteer Services 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Contractor PREA Requirements (non-clinical) 5. Contracted Medical and Mental Health Staff PREA Requirements 6. Volunteer PREA Requirements (non-clinical) 7. Montana DOC PREA Volunteer/Contractor Brochure 8. Montana DOC Contract/Volunteer PREA Acknowledgement Form 9. MSP Volunteer and Contractors File Review 10. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Contractors who have contact with inmates 2. MSP Volunteers who have contact with inmates <p>115.32(a) -(b) - Montana DOC Policy Directive 1.1.17 (pg.5-6) requires that all volunteers and service providers who have visual, physical, or audio contact with offenders will be trained at a minimum on the Department's zero-tolerance policy concerning sexual abuse and harassment, prevention, detection, and response methods, and how to report such incidents. The level and type of training provided to volunteers and service providers is based on the services they provide and the level of contact they have with offenders. This could rise to the same level as the Comprehensive PREA Training that employees attend. Further, Montana Policy Directive 1.3.16 (pg.3) requires that volunteers with direct and/or incidental contact with offenders must receive documented PREA training during volunteer orientation in accordance with DOC 1.1.17 PREA.</p> <p>115.32(c) - Montana DOC Policy Directive 1.1.17 states that volunteers and service providers will sign a training acknowledgment form. MSP Operational Procedure 1.1.17 identifies that the PREA Compliance Manager is responsible for keeping the documentation of this training for volunteers and service providers.</p> <p>A review of volunteer and contractor files and interviews with volunteers and contractors indicated that they have been trained and are knowledgeable on their responsibilities as it relates to PREA.</p>

115.33	Inmate education
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Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews, and Other Evidence Reviewed:

1. MSP Completed Pre-Audit Questionnaire (PAQ)
2. Montana Department of Corrections (DOC) Policy Directive
 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
3. Montana State Prison (MSP) Operational Procedure
 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
4. Montana DOC - PREA Brochure
5. Montana DOC - "End the Silence" Brochure
6. Montana DOC - Offender PREA Acknowledgement
7. Montana DOC - "No Means No" Poster
8. Montana DOC - Sexual Abuse Advocacy Poster
9. MSP Inmate Records
10. Interviews with the following:
 1. MSP Admissions Staff
 2. MSP Case Managers
 3. MSP Random Inmates

115.33(a)-(c) - Montana Policy Directive 1.1.17 (pg.6) and MSP Operational Procedure 1.1.17 (pg.6-7) that within 72 hours of facility intake for adult offenders and during the intake process for residents at juvenile facilities, employees will communicate to offenders, verbally and in writing: a) information about the department's zero tolerance of sexual abuse and sexual harassment; b) how to report incidents or suspicion of abuse or harassment; and c) this policy, 1.3.12 Staff Association and Conduct with Offenders, 3.3.3 Offender Grievance Program, and corresponding site-specific procedures.

Within 30 days of intake for adult offenders, and 10 days of intake for residents at juvenile facilities, the facility will provide education to offenders either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding facility procedures for reporting and responding to such incidents. Further, offenders will receive education upon transfer to a different facility regarding any policies and procedures of the offender's new facility that differ from those of the previous facility.

MSP has assigned these tasks to the MSP admissions staff, case manager(s), or designees, and MSP Operational Procedure 1.1.17 further elaborates documentation and storage of this communication.

Inmates arriving at MSP via the Montana Diagnostic and Intake Unit (MDIU) receive an orientation packet and have an opportunity to watch the PREA inmate education video on the day of arrival. Subsequently, inmates receive PREA education through a PowerPoint that also contains other facility information as well. Inmates arriving at MSP who bypass MDIU and go directly to a housing unit receive the same orientation

packet from a case manager in the unit. When the 30-day risk assessment is completed, the inmate is given time before that meeting to either view the orientation PowerPoint on the facility tablets or is given the PowerPoint to read. At the 30-day reassessment meeting, they are given an opportunity to ask questions if they have any at that time.

115.33(d) - Montana Policy Directive 1.1.17 (pg.6) and MSP Operational Procedure 1.1.17 (pg.6-7) state that each facility must take appropriate steps to ensure offenders with disabilities have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and sexual harassment. Such steps will include access to interpreters and written materials provided in formats or through methods that ensure effective communication. The facility will provide offender education in formats accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to offenders who have limited reading skills. MSP Operational Procedure further states that utilization of the interpreter service will be offered as an option for these inmates if it meets their identified needs. MSP utilizes Language Link for interpreter services, PREA brochures available in braille for those who are visually impaired, and an educational PowerPoint that has audio for those who are deaf, have limited reading skills, or are visually impaired. Additionally, the PREA inmate education video is played with sound and includes closed-captioning to ensure inmates with limited reading skills and visual impairments are receiving PREA education.

115.33(e) - Montana Policy Directive 1.1.17 (pg.7) and MSP Operational Procedure 1.1.17 (pg.7) state that the facility will maintain documentation of offender participation in PREA education sessions and have offenders sign an acknowledgment form.

115.33(f) - Montana Policy Directive 1.1.17 (pg.7) and MSP Operational Procedure 1.1.17 (pg.7) state that the facility will ensure that PREA information is continuously and readily available or visible to offenders through posters, offender handbooks, or other written formats. MSP Operational Procedure further states that Unit Managers are responsible for monthly checks in their units, and supervisors are responsible for monthly checks of the general building areas. The PREA Compliance Manager is responsible for random checks to ensure compliance. Throughout the on-site phase, PREA posters were observed throughout the facility and the PREA resource guide is available in the library. The information is available in English and Spanish.

Interviews with admission staff, case managers, and inmates and review of inmate records confirmed that inmates are receiving agency and facility PREA information and education as required by this standard. During the onsite phase of the audit, MSP was also in the process of providing PREA-related information and education to inmates on their assigned tablets.

115.34 Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews, and Other Evidence Reviewed:

1. MSP Completed Pre-Audit Questionnaire (PAQ)
2. Montana Department of Corrections (DOC) Policy Directive
 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
3. Montana State Prison (MSP) Operational Procedure
 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
4. Montana DOC - PREA Administrative Investigations Training
5. Montana DOC - PREA Pre-Service Orientation Brochure
6. Montana DOC - PREA Refresher Training(s)
7. Montana DOC PREA Investigations Training Records
8. Interviews with the following:
 1. MSP Administrative Investigators
 2. Montana DOC Criminal Investigators

115.34(a)-(c) - Montana DOC Policy Directive 1.1.17 (pg.8) requires that employees who conduct sexual abuse investigations will receive additional training in conducting such investigations in confinement settings, to include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collections, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. MSP Operational Procedure 1.1.17 (pg.6) further states that this training for employees who conduct sexual abuse investigations is conducted by the PREA Coordinator and DOC investigators, or designees. All training is documented, through signature or electronic verification, showing acknowledgment that an employee received and understood the training.

Agency and MSP investigators complete the National Institute for Corrections (NIC) training on PREA: Investigating Sexual Abuse in a Confinement Setting and PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations. Additionally, the agency developed its own PREA investigations training in 2017 and has updated it several times over the years. The training curriculum was reviewed by the auditor and includes training on techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collections, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

A review of training records confirmed that Montana DOC/MSP Investigators have completed specialized PREA training for investigators. Further, interviews with Administrative and Criminal investigators indicated that investigators are well-trained in conducting sexual abuse and sexual harassment investigations and confirmed their understanding of the specialized training curriculum.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Contracted Medical and Mental Health Staff PREA Requirements 5. Montana DOC PREA for Medical and Mental Health Practitioners 6. Medical and Mental Health Staff Training Records 7. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Medical Staff 2. MSP Mental Health Staff 3. MSP Contracted Mental Health Staff <p>115.35(a) - Montana DOC Policy Directive 1.1.17 (pg.6) requires that medical and mental health providers receive additional, specialized training relevant to their role in detecting and assessing signs of sexual abuse and sexual harassment, preservation of evidence, and responding effectively to victims of sexual abuse and sexual harassment. The specialized training for medical and mental health staff was reviewed by the auditor and covers topics 1-4 identified in this substandard. A review of training records and interviews with medical and mental health staff confirmed their knowledge and participation in the PREA Specialized Training for Medical and Mental Health staff.</p> <p>115.35(b) - The agency and facility medical staff do not conduct forensic medical examinations and therefore this substandard is not applicable.</p> <p>115.35(c) -(d) - MSP Operational Procedure 1.1.17 identifies that documentation of the specialized training will be kept in the official employee training record and the appropriate related department with copies provided to the PREA Compliance Manager. All medical and mental health practitioners receive training as required by standards 115.31 and 115.32. This was confirmed through a review of training records by the auditor.</p>

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Policy, Materials, Interviews, and Other Evidence Reviewed:

1. MSP Completed Pre-Audit Questionnaire (PAQ)
2. Montana Department of Corrections (DOC) Policy Directive
 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
3. Montana State Prison (MSP) Operational Procedure
 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
4. Montana DOC PREA Risk Screening Tool
5. MSP Inmate Records
6. Interviews with the following:
 1. Montana DOC PREA Coordinator
 2. MSP PREA Compliance Manager
 3. MSP Admissions Staff
 4. MSP Case Managers
 5. MSP Random Inmates

115.41(a)-(b) - Montana DOC Policy Directive 1.1.17 (pg.7) requires that a risk assessment of all offenders using an objective screening instrument for victimization or abusiveness will take place within 72 hours of intake into a facility. MSP Operational Procedure 1.1.17 further identifies that MSP admissions staff, case manager(s), or designees are responsible for the documentation of completing the PREA risk assessment and the process for storing it.

115.41(c) -(e) - Montana DOC Policy Directive 1.1.17 (pg.8) outlines that the PREA Risk Assessment will consider, at a minimum, the following criteria for risk of sexual victimization:

- whether the inmate has a mental, physical, or developmental disability;
- the age of the inmate;
- the physical build of the inmate;
- whether the inmate has previously been incarcerated;
- whether the inmate's criminal history is exclusively nonviolent;
- whether the inmate has prior convictions for sex offenses against an adult or child;
- whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- whether the inmate has previously experienced sexual victimization; and
- the inmate's own perception of vulnerability.

The screening also considers any prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse in assessing the inmate's risk for being sexually abusive. Montana DOC's PREA Risk Assessment was reviewed by the auditor and was determined to be an objective screening instrument that considers the minimum criteria listed above and in subsection d (1-10). Interviews with staff responsible for conducting the risk

	<p>screening confirmed that all factors of this subsection are taken into consideration when they conduct the risk screening on inmates and that the information is gathered through interviewing the inmate as well as offender records reviews.</p> <p>115.41(f)-(g) - Montana DOC Policy Directive 1.1.17 (pg.7) requires that within 30 days of intake, the facility will reassess the offender's risk of victimization or abusiveness, taking into consideration any additional relevant information received by the facility since the initial screening. MSP Operational Procedure 1.1.17 further identifies that MSP admissions staff, case manager(s), or designees are responsible for the documentation of completing the PREA risk reassessment and the process for storing it. Montana DOC Policy Directive 1.1.17 (pg.7) states that the facility will conduct additional screening assessments when warranted based on any new information, referral request, or incident of sexual abuse. MSP Operational Procedure 1.1.17 further outlines that the PREA Compliance Manager will send a reminder notice when necessary to ensure the designated staff completes these tasks. Verification of completion will then be submitted to the PREA Compliance Manager to add to the official case record.</p> <p>115.41(h) - Montana DOC Policy Directive 1.1.17 (pg.7) states that offenders will not be disciplined for refusing to answer, or for not disclosing complete information in response to questions asked during screening or reassessment.</p> <p>115.41(i) - MSP Operational Procedure 1.1.17 outlines who has access to and dissemination of the inmate's completed risk assessments. This was confirmed through interviews with the MDOC PREA Coordinator and PREA Compliance Manager.</p> <p>Interviews with staff responsible for completing the PREA risk screening corroborated that staff are knowledgeable and aware of their responsibilities to complete the initial and 30-day reviews of the risk screening. Further, interviews with inmates and a review of inmate records corroborated that the risk screenings are occurring as outlined in the policy and in compliance with the standard.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Montana DOC Transgender and Intersex Inmate Placement Review Committee

5. Montana DOC Transgender and Intersex Inmate Wellness Check
6. MSP Inmate Records
7. Interviews with the following:
 1. MSP PREA Compliance Manager
 2. MSP Admissions Staff
 3. MSP Case Managers
 4. MSP Transgender and Intersex Inmates

115.42(a) - Montana DOC Policy Directive 1.1.17 (pg.7) states that information from the risk assessment for victimization or abusiveness will be provided on a need-to-know basis to individuals who make housing, bed, work, education, and program assignments and used with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive. Interviews with the MSP PREA Compliance Manager and staff responsible for conducting the risk screening, and review of inmate records confirmed this process.

115.42(b)-(c) - Montana DOC Policy Directive 1.1.17 (pg.7-8) states that in deciding whether to assign a transgender or intersex offender to a facility, and in making other housing and programming assignments, the Department will consider on a case-by-case basis the placement's effect on the offender's safety, whether the placement would present management or security problems, and whether such placement would likely endanger the safety of others offenders. Further, it identifies a review committee consisting of a qualified health care professional, qualified mental health professional, PREA coordinator, chief legal counsel or designee, and the Montana State Prison and Montana State Women's Prison wardens or designees will determine the appropriate facility placement of transgender and intersex offenders based on their review of all relevant information. Montana DOC Policy Directive 1.1.17 outlines the review process that the review committee conducts in making recommendations for the facility placement that is given to the MDOC Director for final approval. MSP Operational Procedure 1.1.17 (pg.8) states that when determining other housing and programming assignments for transgender and intersex inmates with the facility, MSP will consider on a case-by-case basis the placement's effect on the offender's safety, whether the placement would present management or security problems, and whether such placement would likely endanger the safety of others offenders. This process will be reviewed by the Warden or designee. Interviews with the MSP PREA Compliance Manager, and inmates who identify as transgender or intersex confirmed this process. Additionally, a review of Transgender and Intersex Inmate Placement Committee recommendations affirmed compliance with the policy and this substandard.

115.42(d)-(g) - Montana DOC Policy Directive 1.1.17 (pg.8) requires that placement and programming assignments for each transgender or intersex offender will be reassessed at least twice each year to review any threats to safety experienced by the offender. A transgender or intersex offender's own views with respect to his or her own safety will be given serious consideration. Further, it states that transgender and intersex inmates will be given the opportunity to shower separately from other inmates either through physical separation by separate shower stalls or by time-

	<p>phasing or scheduling of showers. MSP Operational Procedure 1.1.17 Inmates may send a request to the Unit Manager or Shift Commander requesting this accommodation. All accommodations will be made through a collaborative effort by the Unit Manager and Shift Commander, and each accommodation will be done on a case-by-case basis. Montana DOC Policy Directive 1.1.17 (pg.4) states that the department will not place lesbian, gay, bisexual, intersex, or transgender offenders in dedicated facilities, units, or wings solely based on such identification or status. A review of MSP transgender and intersex inmate wellness checks, interviews with transgender and intersex inmates, staff responsible for risk screening, and the MSP PREA compliance Manager confirmed this process.</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. DOC 3.5.1 - Restrictive Housing 3. DOC 4.2.200 - Special Management Inmates 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. MSP 3.5.1 - Restrictive Housing 3. MSP 4.2.1 Inmate Classification System 4. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Warden 2. MSP PREA Compliance Manager 3. MSP Staff in Segregation Housing 4. MSP Inmate in Segregated Housing <p>115.43(a),(c),(d),(e) - Montana DOC Policy Directive 1.1.17 (pg.4-5) and MSP Operational Procedure 1.1.17 (pg.5) states that victims of sexual abuse and offenders at high risk for sexual victimization will not be placed in segregated housing for protective purposes unless an assessment of all available alternative has been made and a determination is made that there is no alternative means of separation. If a facility cannot conduct such an assessment immediately, the facility may hold the offender in segregated housing for up to 24 hours while completing the assessment. The facility will clearly document the basis for the facility's concern for the offender's safety and the reason no alternative means of separation could be arranged. The</p>

facility will review each offender placed in segregated housing for protective purposes every 30 days.

115.43(b) - Montana DOC Policy Directive 1.1.17 (pg.5) and MSP Operational Procedure 1.1.17 (pg.5) require that offenders placed in segregated housing for protective purposes will have access to programs, privileges, education, and work opportunities to the extent possible. If access is restricted the facility will document what opportunities have been limited, the duration of the limitation, and the reasons for such limitations. Further, Montana DOC Policy Directive 3.5.1 (pg.6) identifies that offenders in administrative segregation and protective custody have access to programs and services, that include, but are not limited to, the following:

- educational services;
- commissary services;
- library services;
- social services;
- counseling services;
- religious services; and
- recreational programs

The programs and services provided may not be identical to those provided in the general population; however, there will be no major differences for reasons other than danger to life, health, or safety.

MSP reported having no inmates at high risk for sexual victimization placed in involuntary segregation housing in the 12 months preceding the audit. While on-site, one inmate was identified as recently having been placed in involuntary segregation housing for safety concerns as the facility worked to find alternative housing placement options. The auditor reviewed documentation of placement and ongoing housing status reviews to affirm compliance with this standard. Interviews with the inmates and staff that supervise inmates in segregated housing affirmed that programs, privileges, education, and work opportunities to the extent possible. Interviews with the MSP Warden and MSP PREA Compliance Manager confirmed that should an inmate be identified to be at risk they would be re-evaluated and only if no available alternative means of separation from likely abusers could be made, they would be housed in restrictive or segregation housing.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews, and Other Evidence Reviewed:

1. MSP Completed Pre-Audit Questionnaire (PAQ)
2. Montana Department of Corrections (DOC) Policy Directive
 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
3. Montana State Prison (MSP) Operational Procedure
 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
4. Montana DOC and Nevada DOC Memorandum of Understanding (MOU)
5. MSP "No Means No" Poster
6. Interviews with the following:
 1. MSP Random Staff
 2. MSP Random Inmates

115.51(a) - (b) - Montana Policy Directive 1.1.17 (pg.8) and MSP Operational Procedure 1.1.17 (pg.9) requires that the facility will provide multiple internal ways for offenders to privately report sexual abuse and sexual harassment, retaliation by other offenders or employees for reporting sexual abuse and sexual harassment, and employee neglect or violation of responsibilities that may have contributed to such incidents. Additionally, the facility will provide at least one way for offenders to report abuse or harassment to a public or private entity that is not part of the department, and that is able to receive and immediately forward any reports from offenders of any sexual abuse or harassment to the facility or department officials, allowing the offender to remain anonymous upon request. Montana DOC entered into an agreement with Nevada DOC in 2021 to act as their outside agency reporting entity. The current contract agreement is an extension/renewal and is in effect from August 1, 2023, through July 31, 2024.

Inmates who are victims or have knowledge of sexual abuse or sexual harassment are able to immediately report the incident by one of the following methods:

- report the incident to an employee or service provider, verbally, in writing, anonymously, or through a third party;
- utilize the "locked box" formal grievance procedure in accordance with DOC Policy 3.3.3 Offender Grievance Program;
- contact the external agency listed on PREA posters and brochures that are posted and available throughout the facility; or
- use the inmate phone system following the instructions on the phone to leave a message for a Department employee.

Additionally, the Montana DOC has a PREA reporting email address listed on its website that is monitored by the PREA Coordinator. This provides a reporting mechanism for any individual, staff, community member, or offender. Both interviews with staff and random inmates confirmed that they are aware of the various ways to report, including but not limited to contacting the PREA hotline number, telling staff in person or in writing, or through the grievance process. The audit team also tested the inmate phone system to confirm the processing for sending and receiving reports from the PREA hotline number.

115.51(c) - (d) - Montana Policy Directive 1.1.17 (pg.8) states that employees and

	<p>service providers will accept reports verbally, in writing, anonymously, and from third parties and will immediately document verbal reports. MSP Operational Procedure 1.1.17 (pg.9) further states that the verbal reports will be documented via an incident report form that will be submitted immediately upon completion to the Command Post. Montana DOC Policy Directive 1.1.17 (pg.9) identifies that employees and service providers can privately report sexual abuse or sexual harassment through their chain of command or by notifying the Montana DOC PREA Coordinator. The Montana DOC has a PREA reporting email address listed on its website that is monitored by the PREA Coordinator. This can be used by staff to privately report outside of their facility chain of command. Interviews with staff confirmed that they knew of the various ways to report privately and many stated they would report it through their chain of command.</p>
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. DOC 3.3.3 - Offender Grievance Program 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. MSP 3.3.3 - Offender Grievance Program 4. MSP PREA Investigations 5. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Warden 2. MSP Grievance Manager 3. MSP Random Inmates 4. MSP Random Staff <p>115.52(a)-(c) - The agency is not exempt from this standard as it has an administrative process to address inmate grievances regarding sexual abuse. Montana DOC Policy Directive 3.3.3 (pg.3) states that offenders alleging sexual abuse are not required to use an informal grievance system nor are they required to resolve such grievance with staff or submit the grievance to the staff member who is the subject of the complaint and the grievance will not be referred to the staff member who is the subject of the complaint. Further, Montana Policy Directive 3.3.3 (pg.3) states that there will be no time limit placed on the filing of a grievance alleging</p>

sexual abuse. Applicable time limits may be applied to any portion of a grievance that does not allege an incident of sexual abuse.

115.52(d) - Montana Policy Directive 3.3.3 (pg.4) requires that final decisions on the merits of any portion of a grievance alleging sexual abuse must be issued within 90 days of the initial filing of the grievance process. This does not include time consumed by the offender in preparing any appeals. If the 90-day time period for response is insufficient to make an appropriate decision an extension of up to 70 days may be allowed to respond. The offender will be notified in writing of any extension and provided a date by which the decision will be made. Further, the policy identifies that at any level of the process, including the final level, if the offender does not receive a response within the time allotted for reply, including any properly noticed extension, the offender may consider that absence of a response to be a denial at that level. MSP reported

115.52(e) - Montana Policy Directive 3.3.3 (pg.4) states that third parties are permitted to assist offenders in filing requests for administrative remedies relating to allegations of sexual abuse, and are permitted to file such request on behalf of an offender with the following exceptions: a) adult offenders must give permission for the third party to file request and must personally pursue any subsequent steps in the grievance process; b) if the alleged victim is a juvenile a parent or legal guardian is allowed to file a grievance, including appeals, on behalf of the juvenile without the agreement of the juvenile; c) if the alleged victim is a juvenile and the third party is not a parent or legal guardian, the facility may require the juvenile to agree to have the request filed on his or her behalf and may require the juvenile to personally pursue any subsequent steps in the grievance process; and d) if the offender declines to have the request processed on his or her behalf that facility will document the offender's decision.

115.52(f) - Montana Policy Directive 3.3.3 (pg.4) outlines the procedures for filing an emergency grievance alleging that an offender is subject to a substantial risk of imminent sexual abuse. This process consists of a) the grievance, or any portion thereof that alleges the substantial risk of imminent sexual abuse, will immediately be forwarded to a level of review at which immediate corrective action will be taken; b) an initial response will be provided within 48 hours; c) a final decision will be made within five calendar days; and c) the initial response and final decision will document the determination whether the offender is in substantial risk of imminent sexual abuse and the action take in response to the emergency grievance.

115.2(g) - Montana Policy Directive 1.1.17 (pg.9) and MSP Operational Procedure 1.1.17 (pg.9) both state that reports in bad faith, which includes deliberately malicious reports by inmates or other parties, will result in disciplinary action and/or criminal charges.

MSP reported to have ten (10) grievances filed that alleged sexual abuse in the 12 months preceding the audit. An interview with the MSP Grievance Manager and a review of MSP grievance records and PREA investigations confirmed that the policy and practice are in place at MSP. Additionally, interviews with random staff and inmates affirmed that they knew about the grievance process and the ability to file a

	grievance to make a report of sexual abuse.
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. DOC 3.3.6 - Offender Mail 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. PREA Sexual Abuse Advocacy Series Poster 5. Montana DOC and YWCA Missoula Memorandum of Agreement (MOU) 6. MSP "End the Silence" PREA Brochure 7. MSP PREA Victim Services "What you Need to Know" Brochure 8. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Random Inmates 2. MSP Inmates who Reported Sexual Abuse 3. Montana DOC Victim Liaison <p>115.53(a)-(b) - Montana DOC Policy Directive 1.1.17 (pg.12) requires that each facility provide all offenders with access to outside victim advocates for emotional support services related to sexual abuse by giving offenders mailing addresses and telephone numbers of local, state, or national victim advocacy or rape crisis organizations. The facility will enable reasonable communication between offenders and these organizations in as confidential a manner as possible. The facility will inform offenders, 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.</p> <p>MSP provides access to victim advocates for emotional support services related to sexual abuse through the YWCA-Missoula. Inmates are informed of these services and the contact information (phone and mailing address) through the PREA Sexual Abuse Advocacy posters throughout the facility, MSP "End the Silence" PREA brochure, and MSP PREA Victim Services "What You Need to Know" brochure. Additionally, the Montana DOC Victim Liaison reported that she provides ongoing emotional support as requested by the victim, this could be in-person, telephonically, or written correspondence. She further reported that if a case is substantiated, they will continue to provide services as needed and will also connect them with emotional support services upon release into the community.</p>

	<p>Inmates who reported sexual abuse reported that they were informed about emotional support services available to them and also knew where to find the contact information should they choose to receive services. Further, interviews with inmates noted that they overall felt that the information they shared would be confidential but also noted that they understood that if it was regarding an incident that occurred at the facility it would have to be reported so that it could be addressed.</p> <p>115.53(c) - Montana DOC and YWCA -Missoula have a Memorandum of Understanding (MOU) to provide emotional support services related to sexual abuse and victim advocate services. Contact information is listed on the PREA Sexual Abuse Advocacy posters throughout the facility and the MSP "End the Silence" PREA brochure provided to inmates. The auditor facilitated a telephonic interview with a YWCA-Missoula representative who confirmed that they are presently providing emotional support services related to sexual abuse and victim advocate services to inmates at MSP.</p>
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Random Staff 2. MSP Random Inmates <p>115.54(a) - Montana DOC Policy Directive 1.1.17 (pg.8) states that offenders who are victims of or have knowledge of sexual abuse or sexual harassment should immediately report the incident by one of the following methods: report the incident to an employee or service provider verbally, in writing, anonymously or through a third party. Further, it states that employees and service providers will accept reports verbally, in writing, anonymously, and from third parties and will immediately document any verbal reports. MSP Operational Procedure 1.1.17 (pg.9) further states that these reports will be submitted immediately upon completion to the Command Post. The Montana DOC agency web page provides information on how to report sexual assault, sexual abuse, sexual misconduct, and sexual harassment. The MSP visiting rooms also contain postings with information on how to make a third-party report. The website information was verified and during interviews with staff and inmates, it was confirmed that they had knowledge of the information and website.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Montana DOC Clinical Services Division Disclosure and Consent Form 5. Montana DOC Memo Re: Response to Request for Clarification on Mandatory Reporting from Legal Department 6. MSP PREA Investigations 7. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Warden 2. MSP Medical and Mental Health Staff 3. MSP Random Staff <p>115.61(a)-(b) - Montana DOC Policy Directive 1.1.17 (pg.9) and Montana Operational Procedure 1.1.17 (pg.10) require that department employees and services providers to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not is part of the department; retaliation against offenders or employees who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Montana Operational Procedure 1.1.17 (pg.11) states that apart from reporting to designated supervisors and officials, employees, volunteers, and service providers will not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. Interviews with staff confirmed that staff is aware of the agency and facility policy for reporting any information related to inmate sexual abuse or sexual harassment.</p> <p>115.61(c) - Montana DOC Policy Directive 1.1.17 (pg. 10) and Montana Operational Procedure 1.1.17 (pg.11) requires that unless otherwise precluded by law, medical and mental health practitioners will report sexual abuse according to facility procedures and will inform offenders of their duty to report, and the limitations of confidentiality, at the initiation of services. Interviews with medical and mental health staff and a review of the Montana DOC Clinical Services Division Disclosure and Consent for Services form confirmed compliance with this substandard.</p> <p>115.61(d) - MSP does not house inmates under the age of 18. However, Montana DOC Policy Directive 1.1.17 (pg.9) and MSP Operational Procedure 1.1.17 (pg.10) states that if the alleged victim is under the age of 18, the administrator, or designee, must report the allegation to: a) the Director or Deputy Director immediately upon receipt</p>

of the allegation; and b) the Department of Public Health and Human Services in accordance with 41-3-201, MCA. If the alleged victim is at least 60 years old or is a person with a developmental disability, the administrator, or designee, must report the allegation to the Department of Public Health and Human Services in accordance with 52-3-811, MCA. Additionally, Montana DOC provided a memo for legal clarification on state mandatory reporting laws referenced in the policy.

115.61(e) - Montana DOC Policy Directive 1.1.17 (pg.10) requires that any potential criminal conduct be reported to the LEA first and then immediately to the Office of Investigations. If the Office of Investigations has primary jurisdiction over a facility's criminal investigations, however, that facility will report potential criminal conduct only to the Office of Investigations. MSP Operational Procedure 1.1.17 (pg.11) further states that Potential criminal conduct will be reported to the Office of Investigations. The Office of Investigations will determine if they accept the case as criminal. Potential criminal conduct at the Riverside Special Needs Unit will be reported to the Office of Investigations who will then contact the Jefferson County Sheriff's Office. If it is deemed criminal, an administrative case will be opened in conjunction with the criminal case. Emergent cases will be reported by the Command Post at MSP and the supervisor at Riverside Special Needs Unit to the on-call investigator. Further, both the policy directive and facility operational procedure require that reports of sexual abuse or sexual harassment by an employee, service provider, or offender will be forwarded to the Office of Investigations, facility PREA compliance manager, and the Department PREA coordinator within one business day. An interview with the MSP Warden and a review of the MSP PREA investigations confirmed compliance with this substandard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Interviews with the following: <ol style="list-style-type: none"> 1. Montana DOC Director 2. MSP Warden

3. MSP Random Staff

115.62(a) - Montana DOC Policy Directive 1.1.17 (pg.3) requires that administrators, or designees, will immediately respond to allegations of sexual abuse and sexual harassment, fully investigate reported incidents, pursue disciplinary action, and refer for investigation those who violate the requirements as set forth in this policy. MSP Operational Procedure 1.1.17 (pg.3) requires that all staff will immediately respond to allegations of sexual abuse and sexual harassment. Interviews with the Montana DOC Director and MSP Warden both confirmed that allegations of sexual abuse and sexual harassment are immediately responded to and that housing alternatives are looked at to ensure the protection of inmates at risk of imminent sexual abuse. Staff interviews affirmed that staff are aware of their responsibility to protect inmates in their care and that any perceived threat of harm including sexual abuse would result in immediate reporting and preventative action by staff.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews, and Other Evidence Reviewed: <ol style="list-style-type: none">1. MSP Completed Pre-Audit Questionnaire (PAQ)2. Montana Department of Corrections (DOC) Policy Directive<ol style="list-style-type: none">1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA)3. Montana State Prison (MSP) Operational Procedure<ol style="list-style-type: none">1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA)4. MSP Referrals to other agencies5. MSP PREA Investigations6. Interviews with the following:<ol style="list-style-type: none">1. Montana DOC Director2. MSP Warden <p>115.63(a)-(d) - Montana DOC Policy Directive 1.1.17 (pg.10) states that allegations that an offender was sexually abused while at another facility must be reported by the administrator to the administrator of the facility where the abuse occurred as soon as possible but no later than 72 hours after the initial report. For allegations involving a resident of a juvenile facility, the administrator will also notify with appropriate investigative agency. Notifications will be documented. MSP Operational Procedure 1.1.17 (pg.11) further requires that allegations that an inmate was sexually abused while at another facility must be reported by the Warden, the PREA Compliance Manager on the Warden's behalf if the Warden is absent from the facility, to the administrator of the facility where the abuse occurred as soon as possible but not later than 72 hours after the initial report and that notifications will be</p>

	documented. Interviews with the Montana DOC Director and MSP Warden and a review of notifications and investigations were conducted by the auditor that confirmed this practice is in place.
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. MSP PREA Investigations 5. Interviews with the following: <ol style="list-style-type: none"> 1. MSP staff and non-security first responders 2. MSP Random Staff 3. MSP Inmates who reported sexual abuse <p>115.64(a) - Montana Policy Directive 1.1.17 (pg.9) identifies that upon learning of an allegation that an offender was sexually abused, the first security staff to respond to the report will: a) separate the alleged victim and alleged perpetrator; b) preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, in accordance with DOC 3.1.28 Crime Scene and Physical Evidence Preservation; and c) if the abuse allegedly occurred within a time period that allows for collection of physical evidence, typically 72 hours, request that the alleged victim and ensure that the alleged abuser not take any action that could destroy physical evidence such as washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. If the first employee or service provider to learn of an allegation that an offender sexually abused is not security staff, the employee will request that the alleged victim not take any actions that could destroy physical evidence, take reasonable steps to ensure the victim's safety, and immediately notify security staff.</p> <p>A review of MSP PREA investigations and interviews with security and non-security staff confirmed that staff is aware of the procedures and their responsibilities as first responders to a PREA incident.</p>

115.65	Coordinated response
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Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews, and Other Evidence Reviewed:

1. MSP Completed Pre-Audit Questionnaire (PAQ)
2. Montana Department of Corrections (DOC) Policy Directive
 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
3. Montana State Prison (MSP) Operational Procedure
 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
4. MSP Coordinated Response Plan
5. MSP Command Post Sexual Abuse and Sexual Harassment Response and Containment Checklist
6. Riverside Special Needs Unit Sexual Abuse and Sexual Harassment Response and Containment Checklist
7. Interviews with the following:
 1. MSP Warden
 2. MSP Random Staff

115.65(a) - Montana DOC Policy Directive 1.1.17 (pg.9) states that each facility will maintain a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among employee and service provider first responders, medical and mental health practitioners, investigators, and facility leadership. MSP Operational Procedure 1.1.17 (pg.10) further states that the Warden in conjunction with the PREA Compliance Manager will maintain a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among employee and service provider first responders, medical and mental health practitioners, investigators, and facility leadership. The Coordinated Response Plan will be kept in the Command Post for reference.

MSP has a coordinated response plan which includes forms and a checklist to be completed by MSP Command Post when responding to an incident of sexual abuse. Interviews with the MSP Warden and staff further confirmed that staff is aware of the coordinated response plan in place at MSP. This standard required corrective action as interviews with MSP inmates who Reported Sexual Abuse and a review of MSP PREA Investigation files found that in several cases there was a delay in referrals to medical and/or mental health, or no referral done at all as required by the facility's coordinated response plan. During the corrective action period, MSP had set up and established quarterly meetings with the PCM and the Medical and Mental Health designated staff to ensure ongoing compliance with the facility's coordinated response plan and this standard. Additionally, MSP updated its PREA Investigation log and case checklist to better track notifications and referrals. During the corrective action period, MSP provided the auditor with PREA investigation files to review which confirmed that referrals to medical and mental health upon receiving a report of inmate sexual abuse are done timely and that documentation is completed. MSP has demonstrated compliance with this standard.

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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Collective Bargaining Agreement between Federation of Montana State Prison Employees and Montana State Prison/Montana DOC 2021-2023 5. Interviews with the following: <ol style="list-style-type: none"> 1. Montana DOC Director 2. MSP Warden <p>115.66(a)-(b) - Montana Policy Directive 1.1.17 states that the department will not enter into or renew any collective bargaining agreement or other agreement that limits the department's ability to remove alleged staff sexual abusers from contact with any offender pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p> <p>The CBA Article 18, Rights of Management (pg.33) states that the employee retains the rights to manage, direct, and control functions in all particulars except as limited by the terms of this agreement, or state law. This rights shall include but are not limited to 1) assigning work to employees in accordance with the requirements of the institution as determined by the employer; 2) establish rules, regulations, and procedures, lay-off, suspension, termination, or other employment action; and 3) make and enforce reasonable rules for the maintenance of discipline.</p> <p>Interviews with the Montana DOC Director and MSP Warden confirmed that involuntary actions related to the removal and reassignment of staff are within their authority.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Policy, Materials, Interviews, and Other Evidence Reviewed:

1. MSP Completed Pre-Audit Questionnaire (PAQ)
2. Montana Department of Corrections (DOC) Policy Directive
 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
3. Montana State Prison (MSP) Operational Procedure
 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
4. Montana DOC PREA Retaliation Monitoring Sheet
5. Montana DOC PREA Retaliation Monitoring Instructions
6. Interviews with the following:
 1. Montana DOC Director
 2. MSP Warden
 3. MSP Staff Charged with Monitoring for Retaliation
 4. Inmates who Reported Sexual Abuse

115.67(a) - Montana DOC Policy Directive 1.1.17 (pg.10) and MSP Operational Procedure 1.1.17 (pg.11) state that the department and facility will not tolerate retaliation against offenders, employees, or other parties for reporting sexual abuse or sexual harassment or cooperating with an investigation. Individuals who retaliate against any offender or witness are subject to disciplinary action. Further, employees who report sexual abuse or sexual harassment of an offender will not be subjected to retaliation by anyone within or outside of their chain of command. MSP Operational Procedure 1.1.17 (pg.11-12) identifies that MSP Case Managers are responsible for retaliation monitoring for inmates and MSP Human Resources are responsible for retaliation monitoring for staff members.

115.67(b) - Montana DOC Policy Directive 1.1.17 (pg.10) states that facilities will employ multiple protective measures, such as transfers or removals to separate victims from abusers and emotional support services. MSP Operational Procedure 1.1.17 (pg.11) further elaborates that the facility will employ multiple protection measures, such as housing changes or transfers for inmates 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.

115.67(c)-(d) - Montana DOC Policy Directive 1.1.17 (pg.10-11) states that the facility will monitor, for at least 90 days, the conduct and treatment of offenders and employees who reported sexual abuse or sexual harassment and offenders who were reported to have suffered sexual abuse or sexual harassment to prevent retaliation. Monitoring will continue beyond 90 days if there is a continuing need. Monitoring will include reviewing any offender disciplinary reports, housing or program changes, negative performance reviews, or reassignment of employees. For offenders, monitoring will also include periodic status checks. Additionally, if an offender is transferred from one department facility to another department facility during his or her monitoring, the transferring facility will notify the receiving facility of the offender's monitoring status, and the receiving facility of the offender's monitoring status and the receiving facility will continue the monitoring for the remainder of the

	<p>90 days, or beyond if there is a continuing need.</p> <p>115.67(e)- Montana DOC Policy Directive 1.1.17 (pg.11) states that if any other individual who cooperates with an investigation expresses a fear of retaliation, the department will take appropriate measures to protect that individual against retaliation.</p> <p>115.67(f) - Montana DOC Policy Directive 1.1.17 (pg.11) and MSP Operational Procedure 1.1.17 (pg.12) state that the facility's obligation to monitor retaliation may be terminated if the allegation is determined to be unfounded.</p> <p>Interviews with the MSP staff charged with monitoring retaliation confirmed that they are aware of their responsibilities and confirmed that monitoring for retaliation is occurring. Review of PREA Investigation files, which include the PREA monitoring form were also reviewed by the auditor and confirmed compliance. In the 12 months preceding the audit, MSP reported to have received one report of retaliation from PREA-related incidences. This case was reviewed by the auditor and confirmed compliance with this standard. Interviews with the Montana DOC Director and MSP Warden affirm the department's and facility's zero tolerance for retaliation.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. DOC 3.5.1 - Restrictive Housing Unit 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Warden 2. MSP Staff who supervise inmates in segregation housing 3. MSP Inmates in Segregated Housing <p>115.68(a) - Montana DOC Policy Directive 1.1.17 (pg.4-5) and MSP Operational Procedure 1.1.17 (pg.5) states that victims of sexual abuse and offenders at high risk for sexual victimization will not be placed in segregated housing for protective purposes unless an assessment of all available alternative has been made and a determination is made that there is no alternative means of separation. If a facility cannot conduct such an assessment immediately, the facility may hold the offender in segregated housing for up to 24 hours while completing the assessment. The</p>

facility will clearly document the basis for the facility's concern for the offender's safety and the reason no alternative means of separation could be arranged. The facility will review each offender placed in segregated housing for protective purposes every 30 days. Additionally, Montana Policy Directive 3.5.1 (pg.3) identifies that for secure facilities, the administrator or shift supervisor may order immediate segregation or placement in a restrictive housing unit when it is necessary to protect offenders or others. The action must be reviewed within 24 hours by the appropriate supervisor.

Further, Montana DOC Policy Directive 1.1.17 (pg.5) and MSP Operational Procedure 1.1.17 (pg.5) require that offenders placed in segregated housing for protective purposes will have access to programs, privileges, education, and work opportunities to the extent possible. If access is restricted the facility will document what opportunities have been limited, the duration of the limitation, and the reasons for such limitations.

MSP reported having no inmates at high risk for sexual victimization placed in involuntary segregation housing in the 12 months preceding the audit. While on-site, one inmate was identified as recently having been placed in involuntary segregation housing for safety concerns as the facility worked to find alternative housing placement options. The auditor reviewed documentation of placement and ongoing housing status reviews to affirm compliance with this standard. Interviews with MSP Warden, staff that supervise inmates in segregation housing, and inmates affirmed that programs, privileges, education, and work opportunities to the extent possible.

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. DOC 3.5.1 - Restrictive Housing Unit 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Interviews with the following: <ol style="list-style-type: none"> 1. Montana DOC PREA Coordinator 2. MSP Warden 3. MSP PREA Compliance Manager 4. MSP PREA Investigators 5. Montana DOC Criminal Investigators

6. MSP Inmates who reported sexual abuse

115.71(a) - Montana DOC Policy Directive 1.1.17 (pg.12) and MSP Operational Procedure 1.1.17 (pg.13) requires that all reported incidents of sexual abuse and sexual harassment will be investigated promptly, thoroughly, and objectively. Criminal investigations will be conducted by either the LEAJ or by the Department's Office of Investigations in accordance with DOC Policy 3.1.19-Investigations. Interviews with Montana DOC Criminal Investigators, MSP PREA Investigators, and a review of MSP investigations confirmed that an investigation is immediately started when there is an allegation of sexual abuse or sexual harassment. When there is an anonymous or third-party report, Investigative staff handles it immediately and appropriately.

115.71(b) - Montana DOC Policy Directive 1.1.17 (pg.12) requires that investigations of offender sexual abuse or sexual harassment will be conducted by department employees who have received specialized training in conducting sexual abuse and sexual harassment investigations in a confinement setting. The policy directive also requires that employees who conduct sexual abuse investigations receive additional training in conducting such investigations in confinement settings, to include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collections, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The specialized training was previously reviewed by the auditor under standard 115.34. Interviews with Investigation staff affirmed that they received specialized training and are highly knowledgeable in completing PREA-related investigations.

115.71(c),(d),(e) - Montana DOC Policy Directive 1.1.17 (pg.14) and MSP Operational Procedure 1.1.17 (pg.14) requires that investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. Investigators will interview alleged victims, suspected perpetrators, and witnesses and will review prior complaints and reports of sexual abuse involving the suspected perpetrator. It further states that when the quality of evidence appears to support criminal prosecution, compelled interviews will only be conducted after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. Both the policy and operational procedure indicate that the credibility of an alleged victim, suspect, or witness be assessed on an individual basis and will not be determined by the person's status as an inmate or employee. Interviews with Investigation staff and a review of MSP investigations confirmed compliance with this substandard. A review of PREA investigation files and interviews with the Montana DOC and MSP investigators affirmed that this process is being followed. Interviews with Montana DOC and MSP Investigation staff and inmates who reported sexual abuse confirmed that MSP does not require alleged victims, suspects, or witnesses to submit to a polygraph examination as a condition of proceeding with an investigation.

115.71(f),(g),(h)- Montana DOC Policy Directive 1.1.17 (pg.14) and MSP Operational Procedure 1.1.17 (pg.15) states that administrative investigations will include an effort to determine whether employee actions or failures to act contributed to abuse.

Further, all investigations will be documented in a written report that includes a description of the physical and testimonial evidence, the reasoning behind the credibility assessments, and investigative facts and findings. Policy Directive and facility operational procedures state that investigation materials including, but not limited to incident reports, statements, and investigation reports will be stored in a criminal or administrative investigative case file. Criminal investigative case files must be submitted to the Investigations Manager. Administrative investigative case files must be submitted to the PREA Compliance Manager and the PREA Coordinator. Any conduct that appears to be criminal will be referred by the Office of Investigations for prosecution. In the 12 months preceding the audit, MSP had two (2) substantiated cases of sexual abuse that were referred for prosecution.

Investigation files were reviewed and confirmed that investigations include an effort to determine whether staff actions or failures to act may have contributed to the abuse, description of physical and testimonial evidence, reasoning behind the credibility of statements, and investigative facts and findings.

115.71(i)-(j) - Montana DOC Policy Directive 1.1.17 (pg.14) and MSP Operational Procedure 1.1.17 (pg.15) state that all administrative and criminal investigation written reports will be retained for as long as the alleged abuser is incarcerated or employed by the department, plus five years. Additionally, the departure of the alleged abuser or victim from the employment or control of the facility or department will not provide a basis for terminating an investigation.

115.71(l) -Montana DOC Policy Directive 1.1.17 (pg.14) and MSP Operational Procedure 1.1.17 (pg.15) outline that if an agency investigates sexual abuse, the facility will cooperate with outside investigators and will endeavor to remain informed about the progress of the investigation. Montana DOC and MSP conduct investigations for reported allegations of sexual abuse and sexual harassment at MSP. The Riverside Special Needs Unit, which is under the jurisdiction of MSP, is located within a different county. Reports of sexual abuse received from the Riverside Unit are reported to the Jefferson County Sheriff and the Montana DOC and MSP investigators work collaboratively with them on cases. This was confirmed through interviews with the MSP Warden, DOC PREA Coordinator, MSP PREA Compliance Manager, and investigative staff.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews, and Other Evidence Reviewed:

	<ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Interviews with the following: <ol style="list-style-type: none"> 1. MSP PREA Investigators 2. Montana DOC Criminal Investigators <p>115.72(a) - Montana Policy Directive 1.1.17 (pg.13) and MSP Operational Procedure 1.1.17 (pg.14) states that investigators will not use a standard higher than preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated in administrative investigations. A review of MSP PREA investigations along with interviews with both the MSP PREA Investigators and Montana DOC Criminal Investigators confirmed that they use the preponderance of evidence to determine whether allegations of sexual abuse or sexual assault are substantiated.</p>
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. MSP PREA Investigations 5. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Warden 2. MSP PREA Compliance Manager 3. MSP Inmates Who Reported Sexual Abuse <p>115.73(a)-(f)- Montana DOC Policy Directive 1.1.17 (pg.14-15) and MSP Operational Procedure 1.1.17 (pg.15-16) state that following an investigation into an offender's allegation of sexual abuse or sexual harassment in a facility, the facility will inform the offender as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. If the investigation was conducted by the LEAJ, the department will request relevant information from the LEAJ in order to inform the offender. MSP Operational Procedure further identifies that the PREA Compliance Manager will ensure that the notice is hand-delivered to the inmate.</p>

	<p>Following an offender's allegation that an employee or service provider has committed sexual abuse against the offender, the facility will inform the offender, unless the allegation is unfounded, whenever: a) the employee or service provider is no longer posted within the offender's unit; b) the employee or service provider is no longer employed at the facility; c) the department learns that the employee or service provider has been indicted on a charge related to sexual abuse within the facility; or d) the department learns that the employee or service provider has been convicted on a charged related to sexual abuse with the facility. Following an offender's allegation that he or she has been sexually abused by another offender, the facility will inform the alleged victim whenever: a) the facility learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility, or b) the facility learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility.</p> <p>Montana DOC policy and MSP operational procedure both require that all notifications or attempted notifications are documented and that the facility's obligation to report will terminate if the offender is released from the department's custody.</p> <p>Interviews with the MSP Warden and PREA Compliance Manager confirmed that the policy and practice are in place. A review of MSP PREA Investigations and interviews with inmates who reported sexual abuse confirmed that notifications are provided and documented. However, it should be noted that through the review of investigations and interviews with inmates also identified that in several cases, notification was not given until a few months after the investigation was completed due to the workload of the investigator. The facility had already identified this as an area for improvement and has implemented one day a week that will be utilized as a day to provide notification of findings to inmates who reported sexual abuse or sexual harassment.</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. MSP PREA Investigation Files 5. Interviews with the following:

1. Montana DOC Director
2. Montana DOC PREA Coordinator
3. MSP Warden
4. MSP PREA Compliance Manager
5. MSP PREA Investigators
6. Montana DOC Criminal Investigators

115.76(a) -(d) - Montana Policy Directive 1.1.17 (pg.10) and MSP Operational Procedure 1.1.17 (pg.11) states that any employee or service provider who fails to report an allegation, or coerces or threatens another person to submit inaccurate, incomplete, or untruthful information may face dismissal or other disciplinary action. Further, both the policy and operational procedure state that employees will be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Termination is the presumptive disciplinary sanction for employees who have engaged in sexual abuse. Disciplinary sanctions for violations of the department policies relating to sexual abuse or sexual harassment (other than engaging in sexual abuse) will be commensurate with the nature and circumstances of the acts committed, the employee's disciplinary history, and the sanctions imposed for comparable offenses by other employees with similar histories. All terminations for violations of department sexual abuse or sexual harassment policies, or resignations by employees who would have been terminated if not for their resignation, will be reported to law enforcement agencies unless the activity was clearly not criminal, and to any relevant licensing bodies.

In the 12 months preceding the audit, there have been no staff members who were terminated for violating the agency's sexual abuse or sexual harassment policies at MSP. There was one (1) staff that had been disciplined for violating the department's policy related to the sexual harassment of inmates. MSP PREA investigation files were reviewed and interviews with Montana and MSP leadership affirm compliance with this standard.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure

1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
4. MSP PREA Investigation Files
5. Interviews with the following:
 1. MSP Warden

115.77(a)-(b) - Montana DOC Policy Directive 1.1.17 (pg.16) and MSP Operational Procedure 1.1.17 (pg.17) states that service providers or volunteers who engage in sexual abuse will be prohibited from contact with offenders and will be reported to law enforcement agencies unless the activity was clearly not criminal, and to relevant licensing bodies. The department will take appropriate remedial measures and will consider whether to prohibit further contact with offenders, in the case of any other violation of department sexual abuse or sexual harassment policies by a service provider.

MSP reported that there were no substantiated PREA incidents involving a service provider or volunteer within the past 12 months preceding the audit. An interview with the MSP Warden affirmed that appropriate and immediate measures would be taken to ensure contact with inmates would cease, an investigation conducted to include reporting to the relevant licensing body and referral to law enforcement agencies.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) <ul style="list-style-type: none"> Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. DOC 3.4.1 - Offender Discipline 3. DOC 3.4.2- Prohibited Acts 2. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. MSP 3.4.1- Institutional Discipline 3. MSP PREA Investigation Files 4. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Warden 2. MSP Medical and Mental Health Staff <p>115.78(a)-(c) - Montana DOC Policy 1.1.17 (pg.16) and MSP Operational Procedure 1.1.17 (pg.17) states that offenders are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender</p>

engaged in offender-on-offender sexual abuse or following a criminal finding of guilt for offender-on-offender sexual abuse. Montana DOC Policy Directive 3.4.2 states that acts categorized as major offenses are considered perilous and must be resolved formally. Montana DOC Policy Directive 3.4.2 identifies rape or sexual assault (Major Rule Infraction 4110), engaging in sexual acts (Major Rule Infraction 4203), and making sexual proposals, threats, or harassing remarks (Major Rule Infraction 4204) as major rule infractions.

Sanctions will be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories. The disciplinary process will consider whether an offender's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. In the 12 months preceding the audit, MSP had one (1) administrative finding of inmate-on-inmate sexual abuse at MSP. The auditor reviewed that PREA investigation and found that no disciplinary sanction was imposed on the abuser. The case was not referred for formal disciplinary process and only a recommendation to continue separation of the victim and abuser was in place. Therefore, this substandard required corrective action. During the corrective action period, MSP provided the auditor with substantiated PREA investigations as requested to include disciplinary infraction reports and outcomes of the disciplinary report. MSP has demonstrated that offenders are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding or criminal finding of guilt for offender-on-offender sexual abuse and sexual harassment.

115.78(d) - Montana DOC Policy 1.1.17 (pg.17) states that if the facility offers therapy, counseling, or other interventions designed to address and correct underlying reason or motivations for the abuse, the facility will consider whether to require the offender to participate in such interventions as a condition of access to programming or other benefits. MSP Operational Procedure 1.1.17 (pg.18) states the MSP will decide on a case-by-case basis. Interviews with MSP's mental health staff confirmed that MSP offers mental health services to offender-on-offender abuses and that they do not require the offending inmate to participate in interventions as a condition of access to programming or other benefits.

115.78(e) - Montana DOC Policy 1.1.17 (pg.17) and MSP Operational Procedure 1.1.17 (pg. 18) state that the agency may discipline an offender for sexual contact with staff only upon finding that the staff member did not consent to such contact. MSP had no instances of inmate-on-staff sexual abuse within the 12 months preceding the audit.

115.78(f) - Montana DOC Policy 1.1.17 (pg.17) and MSP Operational Procedure 1.1.17 (pg. 18) states that for the purpose of disciplinary action, a report of sexual abuse made in good faith based upon reasonable belief that the alleged conduct occurred will not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

115.78(g) - Montana DOC Policy 1.1.17 (pg.17) and MSP Operational Procedure 1.1.17 (pg. 18) state that offenders may not engage in sexual acts, make proposals or

threats or engage in indecent exposure pursuant to DOC 3.4.2-Prohibited Acts, and is subject to disciplinary action for violations. The facility may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced. Montana DOC Policy Directive 3.4.2 states that acts categorized as major offenses are considered perilous and must be resolved formally. Montana DOC Policy Directive 3.4.2 identifies rape or sexual assault (Major Rule Infraction 4110), engaging in sexual acts (Major Rule Infraction 4203), and making sexual proposals, threats, or harassing remarks (Major Rule Infraction 4204) as major rule infractions.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Montana DOC Clinical Services Division - Disclosure and Consent for Services Form 5. MSP Inmate Files 6. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Staff Responsible for Risk Screening 2. MSP Inmates Who Disclosed Sexual Victimization at Risk Screening 3. MSP Medical and Mental Health Staff <p>115.81(a) - (d) - Montana Policy Directive 1.1.17 (pg.7) requires that if an offender indicates they have experienced prior sexual victimization or previously perpetrated sexual abuse in the community or in an institutional setting on the PREA risk assessment, the facility will ensure the offender is offered a follow-up meeting with a qualified mental health professional within 14 days of the assessment. MSP Operational Procedure 1.1.17 (pg.8) further outlines that the risk assessment and mental health referral form will be forwarded to the mental health department for notification. The mental health staff will complete the mental health section of the risk assessment and have the inmate sign. Documentation of the follow-up is retained by the mental health department and verification of completion is sent to the requesting staff member to be added to the mini-file. Both the policy and operational procedure state that apart from reporting to designated supervisors or officials, employees and service providers will not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. The admission and case</p>

	<p>management staff who are responsible for conducting the PREA risk screening were interviewed and reported that all inmates who disclose either previous sexual abuse or previously perpetrating sexual abuse will be offered a follow-up meeting with a mental health practitioner. Interviews with medical and mental health staff and a review of mental health referrals confirmed that these guidelines are in place.</p> <p>115.81(e) - Montana Policy Directive 1.1.17 (pg.10) and MSP Operational Procedure 1.1.17 (pg.11) state that unless otherwise precluded by law, medical and mental health practitioners will report sexual abuse according to facility procedures and will inform inmates of their duty to report, and the limitations of confidentiality, at the initiation of services. Interviews with medical and mental health staff confirmed the practice of obtaining informed consent.</p>
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. DOC 4.5.3 - Health Care Autonomy 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Montana DOC - MSP Patient Care Protocol Sexual Assault Form 5. MSP PREA Investigations 6. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Medical and Mental Health Staff 2. MSP Inmates Who Reported Sexual Abuse 3. MSP Security and non-security first responders <p>115.82(a)-(b) - Montana DOC Policy Directive 1.1.17 (pg.11) identifies that the administrator, or designee, will develop procedures for providing services to offenders alleged to be victims of sexual abuse or sexual harassment within a confinement setting. Further, it states that department employees and service providers will adhere to the following standards for the examination of victims of sexual abuse or sexual harassment:</p> <ul style="list-style-type: none"> ◦ if the victim refuses medical or mental health attention, document the refusal on the Medical Treatment Refusal form; ◦ If reported within a time period which allows for the collection of physical evidence, typically within 72 hours of the incident, and with

the victim's permission, immediately transport the victim to a medical facility equipped with medical personnel certified as Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs), or if none are available, to a medical facility with other qualified practitioners, to evaluate and treat sexual assault/rape victims; and

- if reported more than 72 hours after the incident, and with the victim's permission, adhere to the following:
 - refer the victim to appropriate health care providers responsible for treatment and follow-up care for sexually transmitted or other communicable diseases who will complete a patient history, conduct an examination to document the extent of physical injury, and determine whether referral to another medical facility is required; and
 - upon request from law enforcement, transport the victim to a community medical facility for evidence collection.

Montana DOC Policy Directive 4.5.3 states that the DOC will ensure clinical decisions and actions regarding the health care provided to offenders to meet their serious medical, dental, and mental health needs are solely the responsibility of the qualified health care professional.

115.82(c)-(d) - Montana DOC Policy Directive 1.1.17 (pg.11) states that services must be made available without financial cost to the victim and must include, at a minimum:

- access to medical examination and treatment to include follow-up care and referrals;
- mental health crisis intervention and treatment;
- timely access to emergency contraception, STD prophylaxis, and all pregnancy-related tests and services; and
- access to a victim advocate or rape crisis center that can offer emotional support services throughout the investigative process, or access to a qualified service provider.

Interviews with MSP medical and mental health staff confirmed that the services listed above are made available without financial cost to the victim.

Interviews with security and non-security staff affirmed that they are aware of the preliminary steps to protect the victim and to report the incident. This standard required corrective action as interviews with MSP inmates who Reported Sexual Abuse and a review of MSP PREA Investigation files found that in several cases there was a delay in referrals to medical and/or mental health, or no referral done at all.

MSP had set up and established quarterly meetings with the PCM and the Medical and Mental Health designated staff to ensure ongoing compliance with this standard. Additionally, MSP updated its PREA Investigation log and case checklist to better track

	<p>notifications and referrals. During the corrective action period, MSP provided the auditor with PREA investigation files to review which confirmed that referrals to medical and mental health upon receiving a report of inmate sexual abuse are done timely and that documentation is completed, including documentation on the Medical Treatment Refusal Form if the victim refuses medical or mental health treatment. MSP has demonstrated compliance with this standard.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 2. DOC 4.5.2 - Health Care Continuity, Coordination, and Quality of Care During Incarceration 3. Montana State Prison (MSP) Operational Procedure <ol style="list-style-type: none"> 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Montana DOC - MSP Patient Care Protocol Sexual Assault Form 5. MSP PREA Investigations 6. Interviews with the following: <ol style="list-style-type: none"> 1. MSP Medical and Mental Health Staff 2. MSP Inmates Who Reported Sexual Abuse <p>115.83(a)-(b) - Montana DOC Policy Directive 1.1.17(pg. 11) and MSP Operational Procedure 1.1.17 (pg.12) state that the facility will provide medical, mental health, and victim services to inmates alleged to be victims of sexual abuse or sexual harassment within a confinement setting. Medical and mental health services for victims will be consistent with the community level of care. Montana DOC Policy Directive 4.5.2 states that the DOC facility health care unit will facilitate offender health care continuity from admission to discharge, including referral to community practitioners when indicated. Further, the health care staff will make follow-up arrangements or provide referrals to community providers for offenders who will be released from the department facility with critical medical or mental health needs.</p> <p>115.83(d)-(e) - MSP is a male facility and therefore these sub-standards are not applicable.</p>

115.83(f) - Montana DOC Policy Directive 1.1.17(pg. 11) and MSP Operational Procedure 1.1.17 (pg.12) state offenders alleged to be victims of sexual abuse will be provided with timely access to sexually transmitted disease (STD) prophylaxis.

115.83(g) - Montana DOC Policy Directive 1.1.17(pg. 11) and MSP Operational Procedure 1.1.17 (pg.12) state that the facility will provide medical, mental health, and victim services to inmates alleged to be victims of sexual abuse or sexual harassment within a confinement setting. Services are made available without financial cost to the victim.

115.83(h) - Montana DOC Policy Directive 1.1.17(pg. 12) and MSP Operational Procedure 1.1.17 (pg.13) state that the facility will attempt to conduct a mental health evaluation of all known offender-on-offender abusers within 60 days or learning of such abuse history and offer treatment when deemed appropriate by qualified mental health professionals. MSP Operational Procedure further states that documentation of such attempts will be provided to the PREA Compliance Manager for the case file.

Interviews with MSP medical and mental health staff confirmed that the services listed above are made available without financial cost to the victim. However, interviews with MSP inmates who Reported Sexual Abuse and a review of MSP PREA Investigation files found that in several cases there was a delay in referrals to medical and/or mental health, or no referral done at all. There were also delays in the mental health follow-ups after the initial referral was made on inmates who reported sexual abuse and inmate-on-inmate abusers. This section required corrective action. MSP has set up and established quarterly meetings with the PCM and the Medical and Mental Health designated staff to ensure ongoing compliance with this standard. Additionally, MSP updated its PREA Investigation log and case checklist to better track notifications and referrals. During the corrective action period, MSP provided the auditor with PREA investigation files to review which confirmed that referrals to medical and mental health upon receiving a report of inmate sexual abuse are done timely and that documentation is completed, including documentation on the Medical Treatment Refusal Form if the victim refuses medical or mental health treatment.

The auditor reviewed referrals to medical and mental health that are done in conjunction with Standard 115.41 and confirmed that they are done immediately upon completion of the assessment and that follow-ups are conducted by mental health staff within 14 days of the assessment.

MSP has demonstrated compliance with this standard.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Policy, Materials, Interviews, and Other Evidence Reviewed:

1. MSP Completed Pre-Audit Questionnaire (PAQ)
2. Montana Department of Corrections (DOC) Policy Directive
 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
3. Montana State Prison (MSP) Operational Procedure
 1. MSP1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
4. Montana DOC - Sexual Abuse Incident Review Forms
5. MSP Memo Re: PREA Incident Reviews, Schedules, and Team Members
6. MSP Sexual Abuse Incident Reviews
7. Interviews with the following:
 1. MSP Warden
 2. MSP PREA Compliance Manager

115.86(a)-(b) - Montana Policy Directive 1.1.17 (pg.15) and MSP Operational Procedure 1.1.17 (pg.16) require that the facility will 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. Such review will occur within thirty (30) days of the conclusion of the investigation. MSP Operational Procedure further states that the PREA Compliance Manager will schedule the reviews and coordinate the participation of all required parties. During the COVID-19 pandemic, MSP reported that they were conducting their sexual abuse incident reviews virtually through TEAMS. As of August 2023, they have since transitioned back to having the reviews in person, weekly, and immediately following the Warden's weekly meeting.

115.86(c) - (d)- Montana Policy Directive 1.1.17 (pg.15) and MSP Operational Procedure 1.1.17 (pg.16) identifies that the review team will include upper-level management from the facility, the facility's PREA compliance manager, line supervisors, investigators, qualified medical or mental health staff professionals and other employees with direct involvement. The review team will:

- consider whether the allegation or investigation indicates a need to change policy or procedure to better prevent, detect, or respond to sexual abuse;
- consider whether the incident or allegation was motivated by race, ethnicity, gender identity, LGBTI status or perceived status, STG affiliation, or was motivated or caused by other group dynamics at the facility.;
- examine the area where the incident allegedly occurred to assess whether the physical barriers in the area may enable abuse;
- assess the adequacy of staffing levels in that area during different shifts;
- assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- prepare a report of its findings and any recommendations for

improvement and submit the report to the facility administration, the Department PREA Coordinator, and the facility PREA Compliance Manager.

Further, the findings will be kept with the case file associated with the incident, and the facility will implement recommendations for improvement or document its reasons for not doing so.

Interviews with the MSP Warden, and MSP PREA Compliance Manager indicated that the PREA Incident Reviews are being conducted and completed as required. The auditor reviewed the MSP Sexual Abuse Incident Reviews which confirmed the members of the review team as well as the topics covered by the review team, to include any recommendations for improvement.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive <ol style="list-style-type: none"> 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 3. Montana DOC Annual PREA Report - 2021 and 2020 4. Survey of Sexual Victimization Form (SSV-IA) 5. Interviews with the following: <ol style="list-style-type: none"> 1. Montana DOC PREA Coordinator <p>115-87(a) - (f) - Montana DOC Policy Directive 1.1.17 (pg.15-16) states that the department will collect accurate, uniform data for every allegation of sexual abuse at facilities and programs under its direct control using a standardized instrument and definitions set forth in this policy. The incident-based data collected will include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization conducted by the Department of Justice. Further, the department will aggregate the incident-based sexual abuse data at least annually. The department will maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Each facility PREA Compliance Manager will maintain records of all allegations, investigations, and Incident Reviews and report such information to the PREA Coordinator. Upon request, the department will provide all such data from the previous calendar year to the Department of Justice. The department will make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, available to the public at least annually through the</p>

	<p>Department website. All personal identifiers will be removed from the data prior to making it public. The Department will maintain sexual abuse data for at least 10 years after the date of its initial collection.</p> <p>An interview with the Montana DOC PREA Coordinator, a review of the SSV-IA forms, and agency PREA annual reports confirmed compliance with this standard.</p>
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115.88	Data review for corrective action
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	<p>Auditor Overall Determination: Meets Standard</p>
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	<p>Auditor Discussion</p>
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	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p>
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1. MSP Completed Pre-Audit Questionnaire (PAQ)
2. Montana Department of Corrections (DOC) Policy Directive
 1. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA)
3. Montana DOC PREA Annual Report - Calendar Year 2020 and 2021
4. Interviews with the following:
 1. Montana DOC Director
 2. Montana DOC PREA Coordinator
 3. MSP PREA Compliance Manager

115.88(a)-(d) - Montana DOC Policy Directive 1.1.17 (pg.15) states that there will be a system in place to collect data on incidents of sexual abuse or sexual harassment. Such data will be analyzed to determine possible corrective action or improvement. The department will make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, available to the public at least annually through the Department website. All personal identifiers will be removed from this data prior to making it public. The Department will maintain sexual abuse data for at least 10 years after the date of its initial collection.

The most recent annual report available is for Calendar Year 2021. The annual reports can be found at: <https://cor.mt.gov/PREA/>. The report information includes a comparison of the current year's data with those from prior years and provides an assessment of the agency's progress in addressing sexual abuse.

Interviews with the Montana DOC Director, Montana DOC PREA Coordinator, and MSP's PREA Compliance Manager all attested that the agency and facility collect data, aggregate data, and analyze the information to assist them in creating a safer environment for the inmates and staff. This data analysis allows the DOC and MSP to improve the effectiveness of their sexual abuse prevention, detection, and response policies, practices, and training.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews, and Other Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MSP Completed Pre-Audit Questionnaire (PAQ) 2. Montana Department of Corrections (DOC) Policy Directive 3. DOC 1.1.17 - Prison Rape Elimination Act of 2003 (PREA) 4. Montana DOC PREA Annual Report - Calendar Year 2020 and 2021 5. Interviews with the following: <ol style="list-style-type: none"> 1. Montana DOC PREA Coordinator <p>115.89(a)-(d) - Montana DOC Policy Directive 1.1.17 (pg.15-16) states that the department's Office of Investigations will maintain records of all criminal investigations of sexual abuse and sexual harassment conducted by that office or as provided by the LEAJ. Each facility will maintain records of all administrative investigations of sexual abuse and sexual harassment at that facility. Records will include information on the outcome of any criminal or disciplinary charges. Further, the department will make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, available to the public at least annually through the Department website. All personal identifiers will be removed from this data before making it public. The Department will maintain sexual abuse data for at least 10 years after the date of its initial collection. An interview with the Montana DOC PREA Coordinator confirmed this practice and process.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Montana DOC is currently in the second year of the fourth-year audit cycle. This was confirmed by and during interviews with the Montana DOC Director and PREA Coordinator. While onsite at MSP, the audit team was provided with access to, and the ability to observe, all areas of the facility. The auditor received copies of all requested documents and was permitted to conduct private interviews with staff and inmates. Inmates were permitted to send confidential correspondence to the auditor.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	The completed Montana DOC PREA Audit Reports are located on the Montana DOC website at https://cor.mt.gov/PREA/ .

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	Contracting with other entities for the confinement of inmates	
	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.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional 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
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

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

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

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	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
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	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
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

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

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

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

	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
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	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
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

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

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	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
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	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.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following 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?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: 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
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

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

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent 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.)	
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they 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
115.43 (c)	Protective Custody	

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	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.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

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

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	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
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	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
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

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

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report 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
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	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?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	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
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	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
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	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
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial 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
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

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

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has 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
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	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?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	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?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	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
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	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?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	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
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

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

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	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
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	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
115.87 (d)	Data collection	
	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
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	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?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

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

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