

PREA Facility Audit Report: Final

Name of Facility: Louisiana State Penitentiary

Facility Type: Prison / Jail

Date Interim Report Submitted: 11/29/2022

Date Final Report Submitted: 06/29/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" 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 checked="" type="checkbox"/>
Auditor Full Name as Signed: William Peck	Date of Signature: 06/29/ 2023

AUDITOR INFORMATION	
Auditor name:	Peck, William
Email:	williamepeck@gmail.com
Start Date of On-Site Audit:	10/08/2022
End Date of On-Site Audit:	10/15/2022

FACILITY INFORMATION	
Facility name:	Louisiana State Penitentiary
Facility physical address:	17544 Tunica Trace , Angola , Louisiana - 70712
Facility mailing address:	Louisiana

Primary Contact	
Name:	Shirley Coody
Email Address:	SHIRLEY.COODY@LA.GOV
Telephone Number:	2253687958

Warden/Jail Administrator/Sheriff/Director	
Name:	Tim Hooper
Email Address:	Tim.Hooper@la.gov
Telephone Number:	225-655-2928

Facility PREA Compliance Manager	
Name:	Shirley Coody
Email Address:	shirley.coody@la.gov
Telephone Number:	O: 225-368-7958

Facility Health Service Administrator On-site	
Name:	Jacob Johnson
Email Address:	Jacob.Johnson@la.gov
Telephone Number:	225-655-2255

Facility Characteristics	
Designed facility capacity:	5546
Current population of facility:	4299
Average daily population for the past 12 months:	4716
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:	18-90
Facility security levels/inmate custody levels:	Minimum, Medium,Maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	1082
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	20
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	315

AGENCY INFORMATION	
Name of agency:	Louisiana Department of Public Safety and Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	504 Mayflower Street, Baton Rouge, Louisiana - 70802
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	Chief Seth Smith
Email Address:	504 Mayflower Baton Rouge
Telephone Number:	2253421330

Agency-Wide PREA Coordinator Information

Name:	Michele Dauzat	Email Address:	michele.dauzat@la.gov
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Facility AUDIT FINDINGS	
Summary of Audit Findings	
<p>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.</p> <p>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.</p>	
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:

2022-10-08

2. End date of the onsite portion of the audit:

2022-10-15

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?

Yes

No

a. Identify the community-based organization(s) or victim advocates with whom you communicated:

STAR Sexual Trauma Awareness and Response
LaFASA La Foudation Against Sexual Abuse

AUDITED FACILITY INFORMATION

14. Designated facility capacity:

5546

15. Average daily population for the past 12 months:

4716

16. Number of inmate/resident/detainee housing units:

63

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?

Yes

No

Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	4254
37. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	0
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:	266
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:	11
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:	3
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:	5
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:	27

<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>4</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>7</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>67</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>4</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>0</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>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>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:</p>	<p>1078</p>

<p>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:</p>	<p>315</p>
<p>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:</p>	<p>20</p>
<p>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:</p>	<p>No text provided.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>24</p>
<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 checked="" type="checkbox"/> Race</p> <p><input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input type="checkbox"/> Length of time in the facility</p> <p><input checked="" type="checkbox"/> Housing assignment</p> <p><input type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>

55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Roughly equal distribution among housing units
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	20
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/detainees.</p> <p><input type="checkbox"/> The inmates/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/detainees).</p>	<p>0 in population</p>
<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:</p>	<p>3</p>
<p>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:</p>	<p>1</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>No text provided.</p>
<p>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:</p>	<p>1</p>

<p>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:</p>	<p>1</p>
<p>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:</p>	<p>3</p>
<p>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:</p>	<p>4</p>
<p>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:</p>	<p>4</p>
<p>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:</p>	<p>1</p>
<p>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:</p>	<p>2</p>

<p>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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Policy avoids use of PC for victims, leadership states that there are many other units available for relocations if needed</p>
<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>Many older offenders have multiple illnesses but have little interest in talking to outside personnel or being interviewed.</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>12</p>

<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input 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>Turnover here is significant and numerous staff were relatively new</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>23</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><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</p> <p><input type="radio"/> No</p>

78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	Turnover is significant and many vacancies exist in specialized staff positions

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

Yes

No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

Yes

No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

Yes

No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

Yes

No

88. Informal conversations with staff during the site review (encouraged, not required)?

Yes

No

<p>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).</p>	<p>No text provided.</p>
<p>Documentation Sampling</p>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
<p>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?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>HR files, 6 random 3 intake/assessment Intake PREA forms and training 4 Reassessment forms</p>
<p>SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY</p>	
<p>Sexual Abuse and Sexual Harassment Allegations and Investigations Overview</p>	
<p>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.</p>	

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	16	0	16	0
Staff-on-inmate sexual abuse	38	0	38	0
Total	54	0	54	0

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	13	4	0
Staff-on-inmate sexual abuse	0	35	2	0
Total	0	48	6	0

Sexual Harassment Investigation Outcomes

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

6

<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>4</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>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>4</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>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>1</p>
<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 type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>1</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>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>

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	Five cases were referred to the District Attorney and 4 were determined not to proceed to filing of charges

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 type="radio"/> Yes <input checked="" type="radio"/> No
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Non-certified Support Staff

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

Yes

No

a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:

1

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

The audited facility or its parent agency

My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

A third-party auditing entity (e.g., accreditation body, consulting firm)

Other

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>The DPS&C Secretary has appointed a Department PREA Coordinator who has oversight of activities to develop, implement and oversee DPS&C's efforts to comply with the PREA Standards in all units. She reported in her interview that she has adequate time for this function, in addition to performing Deputy Warden duties at her own facility. For PREA matters, she reports to the Agency Chief of Operations. Her information provided indicates that the agency has a system of routine telephone conferences, site visits on a regular basis, and that there are routine mock audits and video conferences of both State DOC facilities and local level (Parish) facilities per their contracts.</p> <p>Department regulation OP-A-15 mandates zero tolerance towards all forms of sexual abuse and sexual harassment at all state-operated facilities to include privately operated facilities. The Agency Wide PREA Coordinator and the PREA Compliance Manager both stated that they have the time and the authority to develop and oversee compliance to the PREA standards. Organizational charts were provided which indicated the Agency PREA Coordinator reports directly to the Chief of</p>

	<p>Operations and the PREA Compliance Manager reports directly to the Deputy Warden of Programming at LSP, who directly reports to the Warden of the facility, confirming that each has the authority to oversee compliance to PREA.</p> <p>"It is the policy of LSP to provide a safe, humane and appropriately secure environment, free from threats of sexual abuse and sexual harassment for all staff, volunteers, contractors, and offenders by maintaining a program of prevention, detection, response, reporting, investigating and tracking of all alleged and substantiated incidents of sexual abuse. LSP leadership has zero tolerance for incidents of sexual abuse and sexual harassment." LSP's Assistant Warden for Administrative Services serves as the PREA Compliance Manager to coordinate efforts to comply with the PREA standards. The PREA Compliance Manager (PCM) reported in the interview that she has sufficient time and authority to coordinate the facility's efforts to comply with PREA Standards.</p> <p>The PREA Compliance Manager (PCM) serves as a liaison between LSP and DPS&C's PREA Coordinator and other appropriate Headquarters staff and is responsible for monitoring PREA related activities, etc. The PREA Compliance Manager (PCM) ensures that each requirement of Department Regulation OP-A-15, on Prison Rape Elimination Act (PREA, including verification that all training, screening, assessments, reporting, and monitoring is accomplished in a timely manner."</p> <p>Several of the older inmates said that the interactions between staff and inmates has significantly improved over the last 10-15 years and, when asked why, all of them said it began changing when education/vocation programs were introduced. Those programs offered both staff and offenders an opportunity to work with each other and build mutual respect. In tandem with this, several noted that they would report an allegation to staff now, due to that growth in respect, whereas they would not have done so a number of years in the past.</p> <p>The Department has a zero-tolerance policy toward victimization and sexual abuse within the facilities through the PREA Program. Full investigations, appropriate reporting, and compliance to the standards program are required to be treated as a top priority by administrators and investigators. Staff who violate this regulation may receive disciplinary action, up to and including termination. Despite policy, both inmates and staff report that there are line and support staff who still demonstrate an attitude of "they're just inmates" and tend to ignore, discount or not believe inmate allegations. This is both a training and a leadership role model issue.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The LA DOC Agency does contract for confinement, but not LSP per se. LSP does

	<p>contract for services and some personnel, however, and the contracting agent interviewed indicated that part of his job is to ensure every contract is totally clear and specific on PREA requirements and training, etc. The Agency PREA Coordinator affirmed that the DOC does contract out confinement to outside facilities and all PREA requirements are included in every DOC contract. Further, she noted that all contractors are routinely audited by the State agency and the audit includes PREA requirement compliance.</p>
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115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>There were 4716 inmates received at LSP in the last 12 months. Department Regulation OP-A-15, AM-F-10 and Penitentiary Directive 14.005, 09.023 and 03.010 address the components of this standard. Department Regulation OP-A-15 requires a staffing plan be developed to provide adequate staffing levels to protect offenders against sexual abuse as well as an annual review of the staffing plan which includes the consultation of the DOC PREA Coordinator. When developing the staffing plan, the agency and facility are mandated to take into consideration the eleven components as outlined in the PREA standard.</p> <p>When calculating adequate long-term staffing levels and determining the need for video monitoring, each unit is required to take into consideration the items listed in §115.13(A):</p> <ul style="list-style-type: none"> • Generally accepted detention and correctional practices; • Any judicial findings of inadequacy; • Any finding of inadequacy from Federal investigative agencies; • Any findings of inadequacy from internal or external oversight bodies; • All components of the unit’s physical plant (including “blind spots” or areas where staff or offenders may be isolated); • The composition of the offender population; • The number and placement of supervisory staff; • Institution programs occurring on a particular shift; • Any applicable State or local laws, regulations or standards; • The prevalence of substantiated and unsubstantiated incidents of sexual abuse; • Any other relevant <p>Interviews with the PREA Compliance Manager and senior staff also indicate that all incident data is considered in staffing reviews, and all interviews noted that the Sexual Assault Incident Reviews normally focus on staffing, camera technology, blind spots and population characteristics. The DOC PREA Coordinator, the Warden and the</p>

PREA Compliance Manager all, in their interviews, indicated that the PREA Coordinator reviews and approves every facility staffing plan annually after institutional review and approval. This security staffing summary is issued quarterly but is reviewed in conjunction with the approved staffing plan.

In circumstances where the staffing plan is not complied with, the Warden or designee documents and justify all deviations from the plan. This document is forwarded to the Agency PREA Coordinator Compliance Manager for retention purposes. The Warden or PREA Compliance Manager assesses, determines and documents whether adjustments are needed to the staffing plan, deployment of video monitoring systems or other monitoring technologies, and to determine the resources the facility has available to commit to ensuring adherence to the staffing plan.

The Warden, with his senior staff, develops the PREA staffing plan and submits an annual update to DPS&C's PREA Coordinator. The staffing plans consider and document whether adjustments are needed to the staffing plan, deployment of video monitoring systems or other monitoring technologies and the resources the facility has available to commit to ensuring adherence to the staffing plan.

When designing new units or additions, planning substantial expansions or modifications to existing units or when updating a video monitoring system, the Warden is tasked to consider how such expansions, modifications or updates would enhance the unit's ability to protect offenders from sexual abuse.

Each year, a review and evaluation are conducted to note any areas of need or best practice in the placement of cameras. Currently, all areas of offender housing and/or activity area are well supervised and the Warden and PCM plan for LSP to continue to enhance its video surveillance as aggressively as budgets allow.

Turnover and vacancies are ongoing staffing problems due to the remoteness of the facility and low salary. The PCM and HR Manager reported that it requires continuing attention to ensure that priority and critical billets are filled in each shift.

In addition to rounds specified in the institutional policy, the Warden requires both intermediate-level or higher-level supervisors conduct and document unannounced rounds on all shifts for the purpose of identifying and deterring staff sexual abuse and sexual harassment. Policy prohibits staff from alerting other staff members that these supervisory rounds are occurring unless such announcement is related to the legitimate operational functions of the unit. Interviews with staff and offenders indicated that unannounced security rounds are in fact conducted by intermediate-level and higher-level staff on all shifts. This was supported by documentation in the shift logs in all units.

115.14	Youthful inmates
	<p data-bbox="324 210 1442 262">Auditor Overall Determination: Meets Standard</p> <p data-bbox="324 273 1442 325">Auditor Discussion</p> <p data-bbox="324 346 1442 577">Essentially, LSP does not confine youthful offenders, however it did receive one for a period of time this past year due to special security circumstances after that youth committed an extensive violent attack on a correctional staff at another facility. He was 17 at the time of arrival and became 18 while housed here. PREA standards of separation from adults, separate staff supervision, recreation and programs were all observed.</p> <p data-bbox="324 609 1442 682">All offenders under the age of 18 years housed in any LA DOC correctional facility are considered youthful offenders (YO) and Department policy statewide recognizes that:</p> <p data-bbox="324 714 1442 829">No youthful offender may be placed in a housing unit in which the offender will have contact with any adult offender through use of a shared day room or other common space, shower area or sleeping quarters.</p> <p data-bbox="324 861 1442 1039">Outside of housing units, the Department requires facilities shall either maintain "sight and sound separation" between youthful offenders and adult offenders to prevent adult offenders from seeing or communicating with youthful offenders or provide direct staff supervision when youthful offenders and adult offenders are together.</p>

115.15	Limits to cross-gender viewing and searches
	<p data-bbox="324 1228 1442 1281">Auditor Overall Determination: Meets Standard</p> <p data-bbox="324 1291 1442 1344">Auditor Discussion</p> <p data-bbox="324 1365 1442 1669">The facility policy does not allow cross-gender strip or cross-gender visual body cavity searches of inmates and there have been none. The facility has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Showers now have zig-zag concrete wall design that still provides some privacy for bodily functions but still enables security oversight of the general area.</p> <p data-bbox="324 1701 1442 1816">The facility has a policy prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.</p> <p data-bbox="324 1848 1442 1963">There were 100% of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs.</p>

115.16	Inmates with disabilities and inmates who are limited English proficient
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>Department Regulations OP-A-15, HCP-37, B-08-16, and B-08-018 address the components of this standard.</p> <p>As would be expected in a maximum security penitentiary, where the vast majority of offenders are serving life sentences, there are very few who do not speak any English, however, there are always a few who have arrived relatively recently. Auditors reviewed this issue in detail to gain a better knowledge of the level of use. Inmate language and sign-language interpreters are utilized to some extent in various activities around the facility but generally for mundane daily tasks or at the offender's own request or volition. Inmate interpreters are never used for any PREA, medical or investigative issues or where privacy is needed. While there are a number of Spanish speaking staff, the facility has added and utilizes Lingualinx for any other language and in fact for most Spanish language issues as well. Interviews with the medical staff, investigators, mental health personnel and senior leadership all stated that Lingualinx is readily available and is being routinely and increasingly used throughout the Penitentiary. Although a number of offenders have learned signing, to include several Seminary students, LSP has also initiated a contract with Sign Language Services International, Inc in Baton Rouge, LA to provide sign language services to offenders, a contract that provides ADA certified interpreters to be available for offenders with hearing or deafness issues. The auditors conclude that the area is compliant and that the low level of offender interpreter use does not endanger anyone or create any privacy violations.</p> <p>Policies HCP-37 (Americans with Disabilities Act) and HCP-36 (Effective Communication with the Hearing Impaired) are two of the major pieces of guidance from the Departmental level. DPS&C Policy is that all facilities take appropriate steps to ensure that offenders with disabilities (including, for example, offenders who are deaf or hard of hearing, those who are blind or have low vision, those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the DPS&C's efforts to prevent, detect and respond to sexual abuse and sexual harassment. LSP meets these requirements and takes a number of additional steps due to the growing number of older offenders with numerous challenges.</p> <p>LSP provides interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. (\$115.16(B))</p> <p>Certified offender interpreters may be used to explain the policies and procedures for reporting; however, the Department does not rely on offender interpreters, offender readers or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the</p>	

	<p>offender's safety, the performance of first- responder duties or the investigation of the offender's allegations. Inmate interpreters have not been used to obtain information in regard to an allegation.</p> <p>Appropriate steps are required to ensure that offenders with disabilities (deaf, hard of hearing, blind, have low vision, intellectual disabilities, psychiatric disabilities, speech disabilities, limited English proficient, or limited reading skills), have an equal opportunity to participate in or benefit from all aspects of the facilities efforts to prevent, detect and respond to sexual abuse and sexual harassment. Written materials are provided for offenders with hearing disabilities, access is provided through Lingualinx interpreter access program for non- or limited English proficient offenders and video presentations are available for offenders with limited reading skills as well as staff assistance. The facility has contracted for the use of the above-noted language line to use as needed to ensure that any offender with limited English proficiency has the ability to communicate as needed and to ensure clear effective communication of any needs or concerns. During interviews with several offenders who were limited-English proficient, all expressed that they received and understood all information provided in regard to PREA requirements, safeguards, preventative actions, reporting and response procedures, and that staff took appropriate time to ensure all needs were met and a clear understanding of the facility's policy regarding PREA was communicated.</p> <p>The PREA information pamphlet is available in braille as well as in audio format for offenders that are blind or have low vision.</p>
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115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Department Regulation OP-A-15, Section 9, outlines the PREA standard requirements for hiring and promoting staff. Additionally, Department Regulation AM-F-8 indicates that all prospective employees receive a background check every five years. In addition, LSP directive 03.008 Criminal Records Check and 14.005 Prison Rape Elimination Action support the components of this standard.</p> <p>LSP reported that the five-year criminal background checks were conducted in 2018 and this was verified in the random staff HR files checked.</p> <p>As indicated by interviews with the PREA Compliance manager and the Human Resources (HR) staff member, LSP does not hire, promote, or enlist the services of any contractor who may have contact with offenders who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institutions. Per policy, there shall be no hiring, detail or promotion of an applicant, employee or contractor who:</p>

- 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;
- Has been civilly or administratively adjudicated to have engaged in the above conduct.

Any incidents of sexual harassment are a determining factor as to whether to hire or promote, or to enlist the services of a contractor.

Prior to hiring, detailing or promoting any employee/applicant or enlisting services of a contractor who may have contact with offenders LSP conducts criminal background checks in accordance with Department Regulation AM-F-8. Twenty contractor checks were done in the past year. Six random staff HR files were reviewed and validated the background checks and the acknowledgement of both PREA rules and training.

Prior to hiring, the Human Resources Office contacts each applicant's prior community confinement facility, jail, lockup, and/or prison employers. An Authorization to Contact Previous Employers is required and completed by all applicants prior to the effective date of hire. Applicants for hire, detail to special duty, or direct promotion must also answer these questions prior to the effective date of hire or promotion.

All applicants (including promotions) are required to answer verbal and written questions relative to previous misconduct described in 115.17(a), according to interviews with supervisory and HR staff. Applicants must notify Human Resources if or when any new such charges have been brought against them. Current employees must notify their immediate supervisor. The form "PREA Requirements for Applicants and Employees Being Considered for Hire, Detail to Special Duty and/or Promotion" is utilized upon hire for this purpose.

Each employee has a personal responsibility to disclose to the Warden within 72 hours, any such conduct of which he/she accused, charged, and/or convicted. Applicants and employees who fail to disclose this information are subject to disciplinary action up to and including termination.

Unless prohibited by law, information regarding substantiated allegations of sexual abuse or sexual harassment involving current or former employees upon receiving a request from a community confinement facility, jail, lockup, prison, juvenile facility, or other institutions for whom such employee has applied to work is provided.

Human Resources staff ensures a criminal history check is conducted at the time of application submission and at least once every five years for employees. Business office staff ensure annual criminal history checks are conducted on all contractual employees. The Volunteer Services Coordinator (Chaplain) ensures that, prior to approval as a volunteer, a criminal history check is conducted on volunteers and every two years thereafter.

There have been 263 persons hired this past year who had criminal background

	<p>checks and there were also 20 service contract staff where criminal background checks were conducted. Both random staff interviews and contractors interviewed indicated these had been done and they were aware of them when they occurred.</p> <p>Turnover is significant right now because it is being impacted by higher-paying oil/energy field hiring cycles and also because many staff have been at LSP for years and are simultaneously reaching their retirement eligibility milestone. Further, staffing is perennially difficult here due to the isolated location.</p>
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115.18	Upgrades to facilities and technologies
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Although no expansion has been completed, in the sense of full construction, the prison has continued to accomplish some plant upgrades. Adding needed cameras has continued as funds permit each year. In all areas of the facility, shower and toileting areas have been updated with barrier screens to reduce the opportunity for non-security required observation. Each year, a planning review and evaluation are conducted to note any areas of need or best practice in the placement of cameras.</p> <p>When designing new units, planning substantial expansions or modifications to existing units or when updating a video monitoring system, the Warden stated he always considers how such expansions, modifications or updates would enhance the unit's ability to protect offenders from sexual abuse.</p> <p>DVR Cameras are in every housing unit and at key exterior points at all facility sites, exterior yards, hobby shop and program areas such as Reentry Program and vocational shops, etc. The fewest cameras are located in medical areas due to HIPAA concerns and medical privacy needs. Retention is 31 days.</p>

115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Interviews with medical and mental health staff indicated:</p> <ol style="list-style-type: none"> 1. None of the medical staff could identify a SANE/SAFE-trained nurse on the Angola staff. During the interview with the doctor, he said he did not have any specialized sexual assault training and he is the provider who performs medical examinations. The doctor in the ER said he'd like to send nurses to

the SANE training but hasn't been able to due to low staffing and COVID. There is a conflict of information here as, according to the Assistant Warden, several nurses have in fact attended SANE/SAFE training.

2. The ER doctor and a nurse practitioner both indicated that the physician would perform a medical examination specific to sexual assault only if "penile or rectal trauma" were present, this is not normal DOJ protocol. Every allegation is to be treated as genuine in terms of response.
3. One nurse, not assigned to the ER, was completely unaware of what the evaluation and treatment of inmates who have been victimized entails and, in nearly 30 years of working at Angola, was only a aware of "a few" PREA incidents, but was not involved in any of them.
4. The two nurse practitioners both said they had not received specialized training regarding sexual abuse and sexual harassment.
5. Access to community advocates (LAFASA) is available; however, due to the remote location of the facility, advocates are not available to come to the facility on short notice. All staff interviewed said that the MH/social workers would be called if an advocate was requested, and this is further addressed below.

It appears that written policies and procedures are in place and staff are aware of the procedures to report PREA allegations however, staff roles are not clearly defined leading to confusion as to who should be called and what their responsibilities are to inmate victims.

1. Social workers do not identify themselves as victim advocates, however most other staff interviewed indicated MH/Social Workers act as victim advocate, so this is clearly inaccurate or confused. The Administration advises that both specific nurses and mental health workers have been identified as advocates.
2. Numerous staff have apparently completed advocacy training, but no one interviewed could identify which staff members act as victim advocates.
3. Medical nursing staff have completed SAFE/SANE training, according to senior leadership, and certificates were provided to Auditors, but no one identified themselves as a certified forensic/sexual assault medical examiner, nor can anyone identify a staff member who is certified, including the Emergency Room Doctor.

There is not a strict forensic protocol followed, so cultural, generational, and social differences may influence interpretations of reported PREA incidents. Additionally, there may be implicit and explicit biases that affect responses to sexual abuse and harassment allegations, and this may be an area in need of corrective training. Areas of concern to be reviewed include:

1. According to several inmates interviewed, when they reported previous sexual abuse and requested to see mental health, he was denied and told that exposure of genitals, without touching, is not considered a mental health issue.

2. Not performing a complete SANE/SAFE exam, including critical evidence gathering and assessment outside the physical examination, if there is no "penile or rectal trauma" visible. Auditors were unable to determine that any forensic interviews were conducted.
3. The ER Doctor stated that it was difficult to tell whether or not it was sexual assault because of the frequent consensual sex between inmates, further indicating the need for the process to be managed by forensic-trained providers..

The Auditor believes the senior physician and the administration should require that sexual abuse forensic examinations be done by trained SAFE/SANE personnel or the physicians be required to receive forensic training to ensure qualifications in the non-medical aspects of the forensics and all providers be required to follow mandatory forensic protocols in total.

During the Corrective Action Period (CAP), on May 2, 2023, the Auditor had an extensive phone conversation with Dr. Randy Lavispere, Medical Director for LA DOC, regarding the LSP forensic processes. There are several factors contributing to this problem, two of which are: the Maximum Custody of the population, and the significant and continual turnover of medical staff at LSP. The turnover level is high enough that anyone trained as a SAFE/SANE would almost certainly leave quickly and the need for a forensic-trained medical staff would essentially be continual. The Maximum Custody nature of the population makes use of a local hospital problematic in terms of staffing and the certainty of the offenders' use of PREA allegations just to get outside the security perimeter to get to a less-secure hospital.

Dr. Lavispere will complete the SAFE/SANE training and be the sole provider of forensic examinations at LSP. His location at DOC headquarters is essentially the same distance to the facility as is the hospital. This will create personal scheduling issues for him, but is compliant and will provide stability while he pursues efforts to provide other compliant solutions.

Since Dr. Lavispere will be personally responsible for all forensic exams at LSP, he must ensure that LSP medical staff do not develop a system that avoids notifying him of every instance and/or does not develop a system of advising him forensics are not needed, unless they have followed clear guidance and direction from him.

A list of trained Victim Advocates will be placed in both the Treatment Center and the Investigations Unit. A Fall training program is being conducted to train additional new Victim Advocates.

On June 20, 2023 the Auditor and Dr. Lavespere had a follow-on conversation after Dr. Lavespere had spent a day with the Regional Coroner's SANE, who travels throughout several Parishes and has done forensic exams for some 20 years. Dr. Lavespere is already incorporating a number of her processes and forms and policies into the LSP process and is on track with his plan to complete SAFE/SANE training.

115.22 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Upon review of investigative files, it was found that a large number of the case outcomes were noted as "unfounded". The PAQ indicated some 44 cases the past 12 months, a significant reduction from the roughly 120 cases found in 2019. The Post-Audit Review Form (PARF), when received, increased that number to 54 cases, of which 48 were determined to be unfounded and 6 to be unsubstantiated.

Upon review of multiple files, it would appear that more cases should be found to be either substantiated or unsubstantiated rather than unfounded. Additionally, it is noted that several interviewed inmates reported they had filed allegations that never received any investigative response to their allegations, and they believe that either unit staff did not forward them to investigators or that investigators failed to respond. Neither of these could be verified during the audit period, but the Investigator interview stated that every allegation received is investigated.

In addition to the above areas, the Auditor has other concerns:

--It is noted that LSP previously had 2 assigned PREA-specific investigators but those positions were rolled into the larger general unit by the new Investigator in charge in May 2021. There have been no substantiated cases since that time.

--The Interview indicated that all Investigators had now received the NIC PREA Investigator training. The Investigator in charge, during his interview, also indicated that PREA investigations require too much time and full investigations would be better replaced by brief one-page summaries. That would not meet DOJ expectations of a full and professional investigation.

--The total lack of criminal sexual abuse allegations being referred to the Sheriff's Office and the lack of any substantiated cases give the appearance of not genuinely having a zero tolerance of sexual abuse at the investigation level.

--The facility reports there were zero sexual harassment allegations in the past 12 months. Given the size of the facility and the widespread use of sexual harassment allegations throughout the nation's correctional systems, this seems highly doubtful. It may be part of the reason for a number of inmates' beliefs that allegations are often not being forwarded or are not taken seriously at the investigation level, and this area should be included in the administrations review.

The facility has completed extensive additional training for investigative staff to include information presented by the headquarters agency-wide Chief Investigator.

Evidence Protocol and Forensic Medical Examinations Policy:

- The Investigative Service Office investigates allegations of sexual abuse and

follows evidence collection protocols as outlined in DOC policy C-01-003 - Crimes Committed on the Grounds of Correctional Facilities.

- All victims of sexual abuse have access to a forensic medical examination conducted on-site, at no cost to the victim, where evidentiary or medically appropriate.
- Examinations performed are supposed to be conducted by individuals who have received Sexual Assault Forensic Examiners (SAFE) or Sexual Assault Nurse Examiners (SANE) training or by qualified medical practitioners. It appears that sexual assault examinations provided in the past year were performed by an LSP physician and not by a qualified SAFE or SANE. One rape victim interviewed indicated his exam was cursory at best and not an actual forensic exam, but this could not be verified by the auditor. Exams conducted by SAFE/SANE personnel are preferable in any event since staff is always present 24/7/365. DOJ policy generally talks to exams by qualified practitioners if a SAFE/SANE is not available, however DOJ guidance is that 'qualified' includes the expectation of some forensic training due to requirements for areas and investigative questioning other than just medical examinations.
- Any investigations that cannot be handled at the facility, and any criminal investigations, are supposed to be transferred to the West Feliciana Parish Sheriff's Office for handling but this has not occurred for quite some time. The Sheriff's Office uses the same standards of investigation as 115.21 (a) - (e)). LSP has a Memorandum of Understanding with the West Feliciana Sheriff's Department for them to abide by the PREA standards while conducting sexual abuse.
- The assigned investigator notifies a Victim Advocate (internal designated nursing staff) immediately that an alleged sexual abuse has occurred.

Offenders who are victims of sexual abuse have access to victim advocates on staff and to staff at the statewide rape crisis agency, LaFASA. In practical terms, since the forensic exam is done on-site in a very short time, the immediate Advocate is either one of the specific nurses or mental health providers who have received Advocate training. The LaFASA role then is often one of moral and emotional support as the process evolves and following the forensic exams.

The Victim Advocate consults with the assigned investigator and aids the alleged victim as appropriate. According to interviews with the PCM, an Advocate, and the investigator, a facility Advocate assists in the facility and is available at the treatment center as needed. As requested by the victim, the Advocate may participate in supporting victims throughout the forensic medical examination process (ensuring compliance in confidentiality laws) and investigatory interviews and provide emotional support, crisis intervention, information, and referrals.

All conversations between the Victim Advocate and the alleged victim remain confidential except when disclosure of the confidential information is necessary to protect the victim or another (staff or offender) from potential harm, or the identity of an otherwise unknown alleged sexual predator is revealed. The Victim Advocate does

	<p>not prepare or submit an Unusual Occurrence Report based upon conversations or functions performed while in the role of Victim Advocate.</p> <p>Department Regulation OP-A-15 supports this standard. In addition, the LSP policy dictates how the regulation is to be applied. The training records revealed that both prior PREA investigators (no longer assigned to PREA) received the specialized NIC training, and some have received state-wide training for investigating sexual abuse inside correctional facilities. Additionally, the senior PREA investigator is a POST-certified prior law enforcement officer. LSP has provided additional training and direction to staff regarding their role following an incident regarding preserving usable physical evidence.</p> <p>The Auditor believes this entire process to be potentially seriously impaired, including response to allegations by unit staff, by investigators, and by medical responders. Senior leadership needs to do a detailed review of this entire area of actions and responses to allegations, and the criminal cases especially, and advise the Auditor of actions taken during the Corrective Action Period.</p> <p>During the Corrective Action Period (CAP), the agency Chief Investigator conducted a detailed onsite review of the investigations process and provided a report to the Auditor. He determined that the discipline of most of the cases of 'false allegations' was warranted but also determined that there were significant shortfalls in investigative reports and files, and in reporting back to offenders after an investigation concluded. He has directed corrections in these areas and will be reviewing each case as it is reported to his DOC headquarters office. Further, he indicated that PREA investigations at all DOC facilities will be relocated to and managed by his office in the future.</p> <p>Additional training of all investigators at LSP will be conducted by the Chief Investigator.</p> <p>The Victim Advocate and medical issues noted above that relate to investigations are addressed in their respective Standards (115.21 and 115.81).</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>It is noted that LSP has routine staff shortages due to a variety of factors that include remoteness of the facility, relatively low pay, and the impact of the volatile energy market and other employment opportunities in Louisiana.</p> <p>The facility has 1082 staff who have contact with offenders and who have received PREA training, beginning with the Corrections Academy which is located on the grounds.</p>

The DOC Academy training is being increased from 4 weeks to 6 weeks, still to be followed by OJT before assuming independent post standing. All training on sexual abuse pursuant to the PREA Standards is developed by the DPS&C's Training Director in conjunction with the Chief of Operations, Wardens, the Department PREA Coordinator, and the Department's Medical/Mental Health Director, and includes the following:

- A zero-tolerance policy for sexual abuse and sexual harassment;
- How to fulfill their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures.
- The rights of offenders and employees to be free from sexual abuse and sexual harassment;
- The rights of offenders to be free from sexual abuse and sexual harassment;
- The rights of offenders and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- The dynamics of sexual abuse and sexual harassment in confinement;
- The 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 with offenders including, gay, bisexual, transgender, intersex, or gender nonconforming;

All employees have trained annually on PREA and the current sexual harassment policies and procedures and are required to sign a training roster as verification of their attendance and understanding of the training. All current staff and new hire employees sign the Sexual Assault and Sexual Misconduct with Offenders Acknowledgement Form and the Malfeasance in Office Form and both forms are maintained in the employee's personnel file.

Employee training regarding all areas of the PREA program is evident as observed during staff and offender interviews. All staff, volunteers and contractors are well versed on the comprehensive PREA policy and required response procedures. Many staff were observed with a card that is carried on their person at all times listing the required steps in the event that a PREA allegation is reported. All staff is aware of the requirement to report immediately and maintain confidentiality concerning allegations. Staff is aware of the requirement to take all allegations seriously and the procedures required for reports from other confinement facilities. The Department provides Correctional Officers and all other staff with refresher training annually, to ensure that all employees are aware of current sexual abuse and sexual harassment policies and procedures.

All security staff is trained in how to conduct cross-gender pat-down searches, and searches of transgender and intersex offenders, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. During orientation and annually thereafter, all staff are trained in the prevention, detection, response, reporting, and investigation of sexual abuse.

	<p>There is also specialized training for medical and mental health staff, as well as for investigators. Medical nursing staff employed by the agency have received appropriate training to assist them in arranging for the conduct of forensic examinations but they do not perform them, such examinations are performed by staff physicians. The agency documents that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.</p> <p>Medical and mental health care practitioners also receive the training mandated for employees under §115.31 or for contractors and volunteers under §115.32, depending upon the practitioner's status at the agency.</p> <p>One staff challenge noted is that many staff are personally uncomfortable with talking about or addressing sexual activity and avoid these issues, which can be problematic in confronting potential PREA situations. This is a potential area to address in training.</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>All 335 volunteers and contractors who have offender contact were trained in the required PREA procedures and policies and training are provided via monthly sessions in order to accommodate these numbers. Chaplains go out and do training on-site, as in the case of large churches for example, as well as in-house and no one who has not had PREA training is allowed on the volunteer list or admitted to the facility. It is noted that volunteer activities at all levels have been seriously curtailed during the pandemic, as has their training and is just now growing again.</p> <p>The Department ensures that all volunteers, interns, and contractors who have contact with offenders have been trained on their responsibilities under the Department's sexual abuse and sexual harassment prevention, detection and response policies and procedures.</p> <p>All volunteers, interns, and contractors must sign the Sexual Assault and Sexual Misconduct with Offenders Volunteer Acknowledgement Form stating that they understand that any violation shall result in disbarment from the prison and may include the filing of criminal charges as warranted.</p> <p>The Chaplain oversees volunteer training, and the Training Department oversees staff and interns'/student workers' training and is also responsible for ensuring that all who have contact with offenders receive training on their responsibilities.</p> <p>The PCM indicated that contractors and volunteers are informed prior to the awarding</p>

	<p>of the contract and prior to their approval of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment. Contractors and volunteers are required by Department Regulation No OP-A-15 to sign the Sexual Assault Sexual Misconduct with Offenders form (kept in their personnel files). Violations of this policy serve as grounds for revoking the contract and terminating the volunteer(s) access. Contractors and volunteers are also responsible for reporting incidents of sexual abuse and sexual harassment.</p> <p>The facility maintains documentation confirming the training the volunteers, interns, and contractors received. Forms for volunteers are maintained by the Volunteer Services Coordinator (Chaplain), and by the Business Office for contractors. A review of training records and interviews with volunteers confirmed volunteers are provided the training required by this standard. The level and type of training provided to volunteers, interns, and contractors is based on the services provided and level of contact they have with offenders, but all who have contact with offenders are notified of the zero-tolerance policy regarding sexual abuse and sexual harassment and informed of the procedures to follow to report such incidents.</p>
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>It is noted that all required education is given at arrival since there is no short-term turnover here that would provide for an inmate leaving in fewer than 30 days.</p> <p>Department Regulation OP-A-15 and LSP directive 14.005 support the components of this standard. All offenders are provided offender orientation in the form of a handbook, video, and verbal instruction upon intake with detailed PREA information regarding reporting and services available. All received PREA education material. It was verified through interviews with offenders that the population is knowledgeable about PREA. LSP has appropriate signage throughout the facility that included the Crime Stoppers toll-free number for offenders to anonymously report allegations of sexual abuse as well as posters. PREA brochures/posters were available in English and Spanish.</p> <p>At intake, offenders receive information on the zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. The day of intake, offenders are scheduled for orientation where they receive required information on their right to be free from sexual abuse and sexual harassment; to be free from retaliation for reporting incidents, and procedures for responding to incidents.</p> <p>Each time an offender transfers, this information is repeated at the new institution and the offender signs a new Intake Sheet, and this was verified in numerous offender interviews as well as offender file reviews. Each offender orientation includes verbal</p>

and written training information regarding sexual assault and sexual misconduct, including:

- Prevention;
- Self-protection;
- Multiple channels of reporting sexual assault and sexual misconduct;
- Protection from retaliation;
- Treatment and counseling;
- DPS&C zero tolerance for sexual assault and sexual misconduct.

The facility utilizes different formats to ensure offenders understand the information that is being presented, including;

- Offenders who are limited English proficient;
- Offenders who are deaf;
- Offenders with visual impairment; and
- Offenders who show signs of other disabilities including those with limited reading skills.

Classification staff documents these education sessions, and this information is readily available via posters and in the offender handbook.

Offenders received at LSP Angola are normally there for longer terms, so short turnovers are relatively rare. Of the 256 offenders received in the past year, all received a comprehensive education since their stays were all 30 days or longer. The policy requires that offenders at all institutions receive information concerning sexual abuse during offender orientation at their respective permanent housing unit upon intake. In addition, each offender receives one hour of annual training regarding sexual abuse and reporting.

Offenders are very familiar with the facility PREA program as well as the methods of reporting, hotline number and ways to prevent. It was noted that the majority of the offenders interviewed outlined the frequency of the training provided to them which is above and beyond the requirement. Information provided to the offenders concerning PREA is provided verbally and in hard copy format in the offender handbook, handouts, and posters. Several offenders with cognitive difficulties were interviewed and they expressed that staff spent additional time to ensure they explained all requirements and that they understood.

Certified offender interpreters may be used to explain the policies and procedures for reporting; however, the Department will not rely on offender interpreters, offender readers or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first- response duties or the investigation of the offender's allegations.

The Department utilizes Lingualex Telephone Interpreting Services for all foreign language interpreting needs.

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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Training includes that offered by DPS&C Headquarters and also training offered by the National Institute of Corrections. Documentation of this training is retained in the Training Department for training credit and documentation. The current staff training Certificates of investigators are in their HR files. DPS&C training overview was reviewed and are in the training folders and meet the standard elements required to be trained.</p> <p>Investigators receive training in conducting sexual abuse and sexual harassment investigations in a confinement facility. Investigator and Assistant Warden interviews confirmed that his training includes:</p> <ul style="list-style-type: none"> • Techniques for interviewing sexual abuse victims; • Proper use of Miranda and Garrity warnings; • Sexual abuse collection; and • Criteria and evidence required to substantiate a case for administrative action or prosecution referral. <p>The facility has completed additional training for investigative staff to include information presented by the Head of headquarters agency-wide investigations. Training documentation was provided to auditors.</p>

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>LSP has a total of 81 medical and 13 mental health care employees and their interviews and training program records show that all staff has received specialized training as required in 115.35 (a) and staff interviews supported that this has occurred. The training includes:</p> <ul style="list-style-type: none"> • To detect and assess signs of abuse; • To preserve physical evidence of sexual abuse; • To respond effectively and professionally to victims of sexual abuse and sexual harassment;

- How to report allegations or suspicions of sexual abuse and sexual harassment.

In addition to the specialized training requirements and the requirement to complete NIC training related to this area, medical and mental health staff receive the training required for all staff, as do contract medical and mental health personnel, a growing number due to shortages across the entire medical department. During orientation and annually thereafter, all staff receive training in the prevention, detection, response, reporting, and investigation of sexual abuse. The staff interviewed indicated training was very useful to them but also indicated their time constraints were very real due to being only partially staffed. They felt that offenders here are safe and receive few indications of offenders fearful or concerned about sexual safety.

The agency maintains documentation that medical and mental health practitioners have received the required training referenced in this standard either from the agency or elsewhere.

The only issue in medical training is that there is a disconnect in information provided. While certificates were provided related to SAFE/SANE training, virtually every medical interview reported there were no such trained personnel among the staff. There was also some confusion about the number and identification of trained victim advocates who currently remain available.

Provide the Auditor with clear information regarding medical roles and training accomplished and accurate numbers of trained staff; and advise what action is/was taken to clarify the protocol as well as expectations of all medical and mental health staff. In an April 26, 2023 letter, the PCM has provided the training rosters and dates to the auditor as well as notes from a meeting between the PCM, Mental Health and Medical departments to resolve these issues.

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The 256 inmates entering the facility (either through intake or transfer) within the past 12 months, whose length of stay in the facility was for 72 hours or more, were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility.</p> <p>Per audit requirements, specialized offender interviews were conducted with offenders of all required categories.</p> <p>At intake, all offenders are screened to assess their risk of being sexually abused or abusive toward other offenders. The screening is normally conducted no later than 72</p>

hours after arrival at the facility and utilizes the objective DPS&C PREA HRSV/HRSP intake forms and process.

The intake process includes staff from Medical, Dental, Security and Mental Health meeting with each new arrival to determine if there are any situations that need to be addressed. It is also recognized that the increased numbers of older offenders with fairly serious medical needs have placed numerous challenges on the LSP medical department and there has been a responsive increase in facility PREA assessment and reassessment efforts to ensure the safety of this sometimes more vulnerable population. Elderly inmates interviewed generally split on their assessment of their medical care, about half being satisfied and about half stating they felt ignored and untreated.

DPS&C's PREA Screening Checklist is a strong tool that includes the following:

- Whether the offender has a mental, physical or developmental disability;
- The age of the offender;
- The physical build of the offender;
- Previous incarcerations;
- Exclusively nonviolent criminal history;
- Whether the offender has prior convictions for sex offenses against an adult or child;
- Whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- Has the offender previously experienced sexual victimization;
- The offender's perception of vulnerability;
- Whether the offender is detained solely for civil immigration purposes.

In addition, the screening also includes:

- Prior acts of sexual abuse;
- Prior convictions for violent offenses;
- When known, to the facility: a history of prior institutional violence or sexual abuse.

Staff and inmate interviews provided no support for required reassessments (within 30 days) being completed, making this standard non-compliant. An offender(s) risk is also supposed to be reassessed when warranted due to referral, request, incident of sexual abuse or receipt of additional information that bears on the offender's risk of sexual victimization or abusiveness. No offenders interviewed could recall this happening to them after an incident.

No offender is disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked on the PREA Screening Checklist. Offender(s) are informed that any information given in response to questions asked are of a confidential nature and will not be disseminated in any way that will be exploited to the offender's detriment.

All 256 offenders received were here longer than 72 hours received the required reassessment within less than 30 days, the standard for the Mental Health staff being 14 days.

LSP uses the LA DPS&C PREA Screening Checklist, an assessment tool utilized to assess an offender's probability of being a PREA Blue High-Risk Sexual Victim (HRSV), a PREA Red High-Risk Sexual Predator (HRSP) or, if neither, classified as PREA Green. Reception center staff enter the results of the Checklist in the Offender Management System. Consideration concerning housing, including possible single cell placement, is determined by the Classification Board based on initial screening information for those offenders confirmed/deemed PREA Blue HRSV and/or PREA Red.

- **PREA Blue HRSV:** Based on the Checklist, any offender within the custody of the DPS&C who has been identified as an individual who has been confirmed as a sexual victim or appears to be at high risk for sexual
- **PREA Red HRSP:** Based on the Checklist, any offender within the custody of the DPS&C who has been identified or confirmed as an individual with the propensity to sexually assault
- **PREA Green:** Based on the Checklist, any offender within the custody of the DPS&C with no significant risk of either sexual victimization or sexually predatory

MH (Mental Health) Screening, including PREA assessment, is conducted on all transfers, at the time of admission to LSP, by mental health trained or qualified MH care personnel. MH Appraisals are conducted within 14 days of admission to a DOC reception center. Offenders designated by the reception center appraisal process, or who exhibit mental health symptoms upon arrival at a new institution, receive a comprehensive evaluation by a Licensed MH professional. In addition to the required mental health screening.

Decisions concerning housing assignments, jobs, and group activities for PREA Blue HRSV and PREA Red HRSP offenders are the responsibility of the Intake Team Classification groups and are based on the Checklist, record review, prior facility behavior and current behavior. If mental health intervention is indicated, a referral is made by the Board to a mental health professional.

Transgender or intersex offenders are not normally designated to LSP; however, if these offenders are received, or make their status known at some time after arrival, housing and programming policy on assignments requires that they are considered on a case-by-case basis as to whether a placement would endanger the offender's health and safety or present management or security problems. Policy for transgender offenders provides that they can shower separately and each unit documents a Shower Preference Statement. Questions regarding the identification of a transgender or intersex offender's genital status are referred to DPS&C's Gender Dysphoria Disorder Clinical Management Team (GDCMT).

Placement and programming assignment policy require transgender and intersex offenders would be reassessed twice each year to review threats to safety that may

	<p>have been experienced by the offender. DPS&C OP-A-15 Form O (Transgender/ Intersex Reassessment) is utilized statewide. The views of the offender with respect to their own safety is given consideration.</p> <p>Transgender offenders are given an opportunity to shower separately from other offenders by completing a Shower Preference Statement, but few choose this option as showers are largely private anyway.</p> <p>As an additional corrective action, the facility needs to track and maintain records on targeted inmate populations in order to ensure protections are delivered as required and reviews are conducted as schedules require.</p> <p>There was no evidence or interviews that indicated required reassessments being completed, either by required schedule or by the occurrence of a sexual abuse incident. This requires being addressed by the leadership.</p> <p>During the Corrective Action period, in an April 26, 2023 letter, the PCM/Assistant Warden informed the Auditor that she had met with the medical and mental health department heads and that the responsibilities of staff were clearly explained and that all mental health staff were given additional training on PREA rsponsibilities to include required 30-day reassessments, 6-month reassessments, and reassessments following any incident or allegation review. The PCM will receive copies of all reassessments. Sample of reassessments and the training roster were provided the auditor.</p> <p>Copies have been provided the auditor. Additionally, this work has increased stress on the very understaffed MH department and the PCM is considering reassigning the assessment processes to the Classification staff, retaining only reassessment of any victims to the mental health department. Determination of who will do Retaliation Monitoring may also be reviewed in the future but this has not yet been decided.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Department Regulation OP-A-15 was revised to include language regarding utilization of the DPS&C PREA Vulnerability Assessment. Victims and predators cannot live in the same dormitories but can be assigned to the same job or programming if the supervisor of the area is aware and closely monitors them. The directive required that all personnel involved in conducting Boards or in the movement of offenders receive training regarding the Importance of the PREA Assessment.</p> <p>Once an offender is determined as a PREA Blue HRSV and/or PREA Red HRSP at any</p>

time during incarceration, the offender is evaluated by the Classification Office for appropriate housing and programs and referred to a mental health professional. The mental health professional meets with the offender upon receipt of the referral to offer services and encourage programming.

The screening information is used as follows to keep separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive.

- Housing assignments;
- Bed assignments;
- Work assignments;
- Education assignments; and
- Program assignments.

Each Monday, when new bed assignment print-outs are sent to the Assistant Wardens the lists of all Victims and Predators are compared again to ensure these groups are not housed together. Additionally, the Assistant Wardens are notified of any discrepancy by the PREA Compliance Manager, who also monitors these moves.

Inmates in LA DOC generally are assigned by the reception prison to facilities based on sentence and not by the type of crime, etc. It then becomes a facility responsibility to separate and secure the individual offender in the safest location and program. The exception is a death penalty sentence which always transports directly to the penitentiary, not to a reception facility. Once at LSP, the facility does not place lesbian, gay, bisexual offenders on a tier solely on the basis of such identification or status and auditors found them located across the entire housing spectrum.

Mental health staff interviewed indicated that services for PREA Blue HRSV offenders focus on issues related to treatment for and prevention of victimization. DPS&C's Medical/Mental Health Director is also tasked to ensure that they have access to the services of a professional who has training and experience in trauma counseling.

Mental health services for PREA Red HRSP offenders focus on alleviating the offender's propensity for predatory or aggressive sexual behavior and sex offender treatment is often offered these offenders if it would be appropriate.

The Classification Officer ensures that PREA information is entered into the offender's Master Record and in the mental health section of the offender's medical record for monitoring purposes. Each unit of the facility reviews the offender's PREA designation prior to any housing, job or program reassignment in order to make an individualized safety determination. The Classification Board conducts subsequent reviews depending on the offender's classification and reevaluates every offender at least annually.

Assignment to a specific unit is made after consideration of age, PREA status, disciplinary history, gang affiliation, medical and mental health concerns, pending charges and prior incarceration history.

115.43	Protective Custody
	<p data-bbox="329 216 959 247">Auditor Overall Determination: Meets Standard</p> <p data-bbox="329 285 586 317">Auditor Discussion</p> <p data-bbox="329 354 1317 426">There has been no use of protective custody separation in the last 12 months according to the reported data and the staff interview with the PCM.</p> <p data-bbox="329 459 1422 911">Department Regulation OP-A-15 prohibits offenders at high risk for sexual victimization from being placed in segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there are no available alternative means of separation from likely abusers. LSP initiated significant changes in segregation procedures following the 2016 and 2019 PREA audits and developed a separate program that places protective custody offenders under mental health management and programming and not segregation. Policy is that aggressors are segregated, and victims are not, although they can request protective custody and, if they do, it is reviewed by a PC management team to determine the safest management of the offender. In actual practice, the auditors found several cases where victims were segregated. It is noted that, when discovered, these segregations were reversed by leadership quickly.</p> <p data-bbox="329 945 1409 1129">Generally, an offender who was held in protective custody would remain there only until the investigation is completed and a determination made regarding the allegation. DPS&C has a management form titled "24-hour Review of Involuntary Segregation Status During PREA-Related Investigation" that they utilize to document the offender's stay in restricted housing.</p> <p data-bbox="329 1163 1382 1348">An offender placed in segregation because of a high risk of sexual victimization is required to have access to programs, privileges, education and work opportunities commensurate to offenders in general population. Documentation is maintained indicating which opportunities were limited, the duration of the limitations and the reasons for the limitations.</p>

115.51	Inmate reporting
	<p data-bbox="329 1537 963 1568">Auditor Overall Determination: Meets Standard</p> <p data-bbox="329 1606 586 1638">Auditor Discussion</p> <p data-bbox="329 1675 1433 1940">Department Regulation OP-A-15 and Penitentiary Directive 14.005 allows multiple means for offenders to report sexual abuse, harassment, retaliation, and/or staff neglect. This includes verbal or written reports to staff via letter through farm mail or regular mail; and also the Administrative Review Procedure (ARP). LSP also provides the contact information for JDI (Just Detention International) for reporting and support. In addition, LA DOC has a Memorandum of Understanding with the Crime Stoppers organization statewide via a hotline number posted in all units. The Crime Stoppers</p>

	<p>hotline is LSP's outside reporting entity as required by this standard. LSP had an earlier deficiency in providing offenders in Administrative Segregation, cellblock, and death row an avenue to report sexual abuse to an outside entity. LSP entered into an MOU with Louisiana Foundation on Sexual Assault to give offenders who do not have routine phone access a place to write and report allegations of sexual abuse. Upon entering into a unit to where the offender phone access will be restricted, offenders are provided a flyer with the address of organization. Additionally, the address for the Louisiana Foundation on Sexual Assault (LaFASA) is painted on the cellblock walls.</p> <p>LSP interviewed senior staff, including the Assistant Warden, and all indicated that they do not house offenders solely for civil immigration purposes, however offenders of a foreign citizenship are still allowed to contact their respective Consulate. In the event that LSP should house an offender solely for civil immigration purposes, the institution has documentation available regarding consular officials and the Department of Homeland Security.</p> <p>Staff in random interviews were aware in every case that they are required to report sexual abuse and sexual harassment and may do so anonymously. Almost every staff member indicated they would not need to remain anonymous and would simply use their chain of command.</p>
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>In the past 12 months, 44 allegations of PREA violations have been made and 13 were filed as grievances; all 13 reached a final decision within 90 days after being filed. The LSP policy is to treat all such allegations as alleging substantial risk of imminent sexual abuse and so all 44 also reached final decisions within 5 days.</p> <p>The Department does not require an offender to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse but Department Regulation OP-A-15 indicates that an offender <i>may</i> use the Administrative Remedy Procedure (ARP) as a means to report sexual abuse and misconduct.</p> <p>Department Regulation B-05-005 covers all components of the standard including the filing of an emergency complaint regarding the risk of Imminent sexual abuse. However, the regulation conflicts with the standard by stating, "If the offender has been secured and is no longer in danger or imminent harm, the grievance procedure shall proceed as outlined within the deadlines and time limits stated in the Administrative Remedy Procedure."</p> <p>Offenders may use the Administrative Remedy Procedure (ARP), grievance or any</p>

	<p>informal method to report sexual abuse and/or sexual harassment. The offender's report does not have to be submitted to the staff member who might be the subject of the complaint. Grievances may also be placed in institution mail. The investigation of the accusation(s) is not referred to the staff member referred in the grievance. No offenders declined third-party grievance assistance.</p> <p>A decision on the grievance relating to sexual abuse and/or sexual harassment is required to be made within 90 days of the initial filing of the grievance. The offender is notified in writing of any extension in time that is needed to respond and the approximate date. In practical terms, however, the PREA Compliance Manager and Warden indicated that any ARP related to sexual abuse is always treated as an emergency ARP until involved offenders are safely situated.</p> <p>Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates can assist offenders in filing requests for administrative remedy as it pertains to sexual abuse or sexual harassment. Third party reporting filed on behalf of the offender requires the offender to agree to proceed as a condition of processing the request. If the offender declines to have the request processed the offender will complete the ARP Drop Form.</p> <p>The facility documents the actions taken in response to the emergency grievance and the final decision of actions taken.</p> <p>Of the 44 cases, 37 resulted in the inmate grievant being disciplined for acting in 'bad faith', an unusually high proportion. The administration is requested to review these numbers and this process and review it in tandem with the number of inmates who rescinded their allegation during meetings with investigators. Even allowing for inmates attempting to manipulate the system, these numbers give the appearance of an effort to deter reporting of allegations.</p> <p>In an April 26, 2023 letter, the PCM/Assistant Warden advises that all investigations are completed even if the offender withdraws the original allegation. Prior to the audit, the PCM was reviewing completed reports but will now review the entire investigation including all documentation, reports and video.</p> <p>The DOC had a policy that any grievances submitted as emergency or exigent concerns would be processed as an emergency but would revert to normal grievance procedures and schedules once the offender was placed in a safer situation. Following a discussion with the DOC PREA Coordinator, the Auditor has been advised that they have approved an agency-wide policy change that requires that all grievances that are accepted as emergency grievances will now follow that entire process to its conclusion using emergency timeframes and processes.</p>
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Currently, the on-property medical center is utilized for medical evaluation, forensics and treatment following an allegation of sexual abuse, and so facility nurses are being utilized as victim advocates if one is requested by the offender. An outside advocate is available but given the facility remoteness, would not normally be able to reach LSP before the medical treatment and testing were completed.</p> <p>- The Warden and PREA Coordinator worked with Mental Health to separate out and clearly define specific staff. It is possible that, when mental health providers ceased being Retaliation Monitors after the 2019 audit, they also ceased doing other assigned duties related to sexual abuse as well, there are significant numbers of comments about their refusal to become involved in such cases.</p> <p>LSP has a protocol that provides offenders in restricted housing units a flyer with the address to Just Detention International (JDI) when they enter the cellblock. Offenders may write JDI to receive outside victim advocacy services through the Louisiana crisis agency LAFASA, which also has their information provided.</p> <p>Offenders may request at the time of the allegation to have access to receive outside assistance from victim advocates for emotional support. Those offenders detained for civil immigration receive mailing addresses, telephone numbers and toll-free numbers to national immigration services agencies.</p> <p>Offenders are placed on notice that all telephone calls are monitored with the exception of properly placed privileged calls between an offender and his attorney, or reports to Crime Stoppers. Reports of abuse are always forwarded for investigation.</p> <p>The Auditor was advised in an April 26, 2023 letter that management of Retaliation Monitoring has changed so that the monitoring is completed by the offender's mental health counselor assigned to his unit/area, the same counselor who does reassessments. Sessions are now mandatory and copies are to be provided to both the PREA Compliance Manager office and the Medical/Mental Health record.</p>
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115.54	<p>Third-party reporting</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>LSP provides information regarding ways to report sexual abuse to visitors by posting information throughout the visiting room and information regarding third party reporting can also be found on the Louisiana Department of Corrections website (www.doc.la.gov). While talking with and interviewing offenders it was determined that offenders felt confident their family or friends could contact the facility and their allegations would be addressed.</p>
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	<p>LSP methods in place to receive third-party reports of sexual abuse and sexual harassment include calling Crime Stoppers, filing a grievance, use of institutional (“farm”) mail or use of regular mail. Posters and the PREA handbook provide information to access third-party reporting. Crime Stoppers, when called, forwards the complaint to the Department PREA Coordinator who is turns forwards it to the appropriate PREA Compliance Manager.</p> <p>Third parties (which may include other offenders, unit staff, family members, attorneys, and outside advocates) may also assist offenders by making sexual abuse harassment reports, and/or initiating formal grievances. However, once this formal grievance process has been initiated by a third party, the offender must authorize the request for remedy and must continue the process in accordance with Department Regulation No. B-05-005 “Administrative Remedy Procedure.” The prison documents offenders who decline to continue with the grievance once a third party initiates the process.</p>
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115.61	<p>Staff and agency reporting duties</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Department Regulation No. OP-A-15 and Penitentiary Directive 14.005 require that all allegations of sexual abuse are to be treated confidentially and explains reporting of allegations of sexual assault or misconduct. Staff reporting procedures are covered in annual training. Staff interviewed indicated they were aware of how to report an incident. Copies of Unusual Occurrence Reports (UOR) reviewed in investigation files verified that.</p> <p>Staff is required to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment, retaliation, or staff neglect or violation of responsibilities that may have contributed to an incident or sexual harassment or retaliation that occurred in the facility.</p> <p>Apart from reporting to their designated supervisor, staff has been directed to refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in this policy, to make treatment, investigation, and other security and management decisions.</p> <p>Medical and mental health practitioners are required to report sexual abuse as referenced above and the offender is informed of this requirement at the initiation of services and the limitations of confidentiality. LA statute requires that the facility report, on behalf of adults who are considered vulnerable, any allegations to the appropriate State or local service agency under mandatory reporting laws.</p>
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	<p>All allegations of sexual abuse and sexual harassment are reported to Investigations, including third-party and anonymous reports.</p> <p>All allegations of sexual assault, sexual misconduct or sexual harassment by either staff or offender may be reported to any staff member. The staff member who receives such reports, whether verbally or in writing, immediately notify the supervisor who ensures that an Unusual Occurrence Report (UOR) is completed. All PREA related UOR's go immediately up the chain of command.</p> <p>Any allegation of sexual abuse is reported to DPS&C's PREA Coordinator and PREA Investigator immediately following the initial notification to the Warden. The assigned investigator immediately notifies the Victim Advocate (but no later than the next business day), that an alleged sexual abuse has occurred.</p>
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>When the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate. Every grievance regarding sexual abuse allegations, for example, are treated as an immediate and substantial risk, rather than following normal time frames.</p> <p>Immediate steps are taken when the facility learns that an offender might be subject to a substantial risk of imminent sexual abuse. PREA time limits of 48 hours for initial response and 5 days for resolution are observed in this process and, in actuality, the initial response is virtually immediate. The LSP policy is that every allegation is to be treated as an imminent risk until the offenders are safely positioned.</p> <p>When staff learns that an offender is subject to a substantial risk of imminent sexual abuse, they are trained to take immediate action to protect the alleged victim and to assume all reports of sexual victimization, regardless of the source of the report (third party, anonymous, verbal, etc.) are credible and respond accordingly.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The facility has received no allegations of sexual abuse at LSP from other facilities in the last 12 months. Allegations received from other confinement facilities that an offender was sexually abused while confined at LSP are reported directly to the</p>

	<p>Warden and he ensures that allegations are investigated in the same manner as are all allegations.</p> <p>Upon receiving an allegation from an offender at LSP that he was sexually abused while confined at another facility, the Warden stated in his interview that he notifies their executive in writing. An email is usually sent from the LSP Warden to the other Warden; or from investigator to investigator of the facility where the alleged abuse occurred. Notification is provided as soon as possible, but no later than 72 hours after receiving the allegation and documentation is placed in the offender's Master Record. Documentation of the notification is also logged in the "case" logbook.</p>
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Of the 44 allegations of sexual abuse in the past 12 months, the first security staff member to respond to the report took actions in all cases to separate the alleged victim and abuser, as required by LSP policy. When questioned about the accuracy of this number, interviewed security staff reported that the separation is often by changing units to ensure safety of the offender, not necessarily physical separation in the midst of an incident. Staff were notified within a time period that still allowed for the collection of physical evidence in 3 cases, and these 3 cases were also the number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence.</p> <p>In these 3 cases, the first security staff member to respond to the report requested that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.</p> <p>LSP has provided all staff with a 'PREA' card outlining the role and responsibility of a first responder and also including initial supervisory steps as well. LSP conducts routine trainings at roll call providing staff instructions and expectations should they serve as a first responder. Documentation was viewed indicating all staff participated in the routine training and the annual refresher training required for all staff.</p> <p>All staff interviewed, including non-uniformed staff, were well familiar with proper steps and procedures for initial responses to an incident, and most had their PREA card with required steps in their possession.</p> <p>First responders secure the alleged crime scene if feasible and if forensic evidence</p>

	<p>may exist. The only persons allowed to enter a secured crime scene are the assigned investigator(s), medical staff and/or the Warden, as needed. The crime scene remains secured until released by the investigator.</p> <p>Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator.</p> <p>Louisiana law requires all biological evidence collected in cases involving homicide and rape to be held in secure custody indefinitely or turned over to the local Sheriff's Office if it is a criminal investigation.</p> <p>The alleged victim will be promptly escorted under appropriate security to the infirmary for assessment. If transporting the alleged victim to the infirmary or a hospital emergency room, the victim is instructed to undress over a clean sheet in order to collect any potential forensic evidence that may fall from his person. The sheet, along with the victim's clothing, is collected as evidence and placed in a paper bag with an appropriate chain of evidence form attached. When released from the infirmary or emergency room, the alleged victim is to be segregated from the alleged aggressor and screened by a mental health professional with appropriate referrals made.</p> <p>Alleged aggressors who are offenders are held in segregation pending investigation and remain there until the investigation is complete unless other circumstances require the transfer of the alleged offender aggressor. The offender accused of the predatory behavior is always evaluated by mental health staff prior to the disciplinary hearing of the violation. LSP conducts a mental health evaluation of all known abusers within 60 days of learning of such abuse history and after treatment when deemed appropriate by mental health practitioners. This is documented utilizing the Mental Health Evaluation for Substantiated Cases of Sexual Assault Form.</p> <p>The credibility of an alleged victim, suspect or witness is assessed on an individual basis and not be determined by the person's status as detainee or staff. In every case where the alleged aggressor is a staff member, there is no contact between the alleged aggressor and the alleged offender/victim without the approval of the Warden.</p>
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard

Auditor Discussion

LSP employs a Coordinated PREA Response Checklist which shows the initial responsibilities of staff and a checklist for the notification of Medical, Mental Health, Investigators and facility leaders. The completed checklist is filed with the investigation documents.

Each supervisor and senior staff member interviewed was aware of the steps required by the various parties following any incident and, as would be expected, most line staff were aware of their own requirements and just some of the requirements of their supervisors.

LSP Policy on Actions Required After Report of Sexual Abuse

- When staff learns that an offender is subject to a substantial risk of imminent sexual abuse, take immediate action to protect the alleged victim. Staff report and respond to all allegations of sexually abusive behavior and sexual harassment. Assume all reports of sexual victimization, regardless of the source of the report (third party, anonymous, verbal, etc.) are credible and respond accordingly.
- Only designated employees specified by the policy should be informed of the incident, as it is important to respect the victim's security, identity, and privacy.
- All allegations of sexual abuse are to be handled in a confidential manner throughout the investigation.
- All conversations and contact with the victim should be sensitive, supportive, and non-judgmental.

Initial Responder:

- Intervene in any assaults and separate the alleged victim and abuser.
- Detain the abuser.
- Call for emergency medical care for the victim, if necessary.
- Immediately notify the supervisor and remain on the scene until relieved by responding personnel.
- Preserve and protect the crime scene until appropriate steps can be taken to collect any evidence.
- Request that the alleged victim does not take any actions that could destroy physical evidence, including bathing, brushing teeth, changing clothes, defecating, smoking, drinking, or eating.
- Ensure that the alleged victim not take any actions that could destroy physical evidence, including bathing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- If the first responder is not a correctional officer the responder is still required to request that the alleged victim not take any actions that could destroy physical evidence; remain with the alleged victim and notify security staff.
- Apart from responding to designated supervisors, employees are not to reveal

any information related to the incident to anyone other than to staff involved with investigating the alleged incident.

- Document detailed description of:
- Victim and abuser locations and affect (emotions, appearance, etc.)
- Wounds and where they are
- Anything the victim or abuser reported to you

Shift Supervisor will follow the below procedures:

- Notify immediately the Warden or designee, the PREA Compliance Manager, and the Investigator. The Investigator assumes control.
- Assign an officer to remain at the crime scene to protect the area.
- Attend to the victim. Ensure the alleged victim is assessed by medical staff and housed in the Infirmary Isolation cells. Do not speak loudly or call unnecessary attention to the victim.
- A security staff member is placed outside the cell or area for direct observation to ensure these actions are not performed. The alleged victim must not be left alone until evaluated by Mental Health Staff for suicide risk.
- The alleged abuser remains in the dry cell/area under the direct supervision of a same-sex correctional officer to ensure he does not destroy potential evidence.
- After the investigator has completed the interview, separate and apart from the alleged victim, the alleged abuser is referred to medical for further assessment and treatment as deemed necessary by healthcare providers. Visible injuries are documented both photographically and in writing and placed in the abuser's medical record.
- Thereafter, the alleged abuser is held in segregation pending further investigation.
- A brief inquiry will be made to each individual separately and apart from each other to determine if the sexual contact was consensual or non-consensual. Note: Designated staff interpreters will be used when communicating with victims with limited English proficiency unless exigent circumstances exist which will be fully documented.
- Ensure all persons who played an active role in the response document their actions, providing as much detail as possible, and ensure that they remain on duty until properly debriefed and relieved as appropriate.
- Ensure referrals to EAP for staff in need of crisis intervention counseling.

Facility Crime Scene

- Start a crime scene log. Everyone who enters the crime scene area must sign the log. Document each person entering the crime scene, the time of entry and time of departure. Note: Only person(s) allowed to enter the crime scene are assigned investigators, medical staff, and the Warden or designee.
- Video and photograph the crime scene area before removal of any items from the area.

- Identify staff that will touch and/or handles evidence.
- Incidents are fully documented.
- Log Book
- Security Video
- Photos

Notifications Required when Sexual Abuse is Alleged: Ensure below notifications are made within two hours of the occurrence:

- Warden
- PREA Compliance Manager
- Investigator
- Health Care Authority
- Mental Health

For allegations of sexually abusive behavior in which an employee is the alleged abuser, only the Warden and investigator are notified of the specifics of the allegation. They make notifications and referrals to outside law enforcement agencies and licensing board as appropriate.

Note: In every case where the alleged abuser is an employee, contractor, or volunteer there is to be no contact between the alleged abuser and the alleged victim pending the outcome of an investigation.

Evidence Protocol

If the abuse occurred within 72 hours, procedures will be followed in accordance with LSP policy 02-01-007- "Crimes Committed on Grounds of LSP".

Responsibility when Sexual Harassment is Alleged

Some offender allegations rise only to the level of sexual harassment, not sexual abuse. For allegations of sexual harassment, responding supervisory staff:

- Ensure that the alleged victim and abuser are separated.
- A brief inquiry will be made to each individual separate and apart from each other to ascertain if the sexual behavior was consensual or nonconsensual.
- Ensure that the supervisor and the investigator are notified.
- Incidents of this sort are fully documented.
- The incidents are investigated and the alleged abuser may be segregated pending the outcome of the investigation.
- The alleged victim is referred to Mental Health for re-assessment to determine if any issues need to be addressed.
- If the allegation is substantiated, the abuser is referred for administrative disciplinary sanctions and re-assessed to determine if any issues need to be addressed.

1. Responsibility When Sexual Activity is Alleged

Not all reports or allegations require a full response protocol. For reports or allegations of sexual activity where the involved offenders independently report a non-coercive consensual sexual encounter, responding supervisory staff:

- Ensure that the involved individuals are separated.
- A brief inquiry will be made to each individual independently to ascertain if the sexual encounter was consensual or nonconsensual
- Notify the supervisor and the Investigator.
- If the Investigator determines the behavior is, in fact, sexual activity, the involved offenders are referred for administrative disciplinary sanctions. The disciplinary board refers the offender to mental health for an assessment as to whether an offender's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, should be imposed.
- The involved individuals are always re-assessed to determine if any issues need to be addressed.

In other cases, there may be insufficient reason to proceed (the alleged victim credibly recanted, or the alleged abuser was not in the facility on the date of the allegation, etc.) and the response protocol may be terminated. Incidents of this sort are still reported.

It is noted that PREA allegations are supposed to be referred to mental health in all cases but that numerous offenders reported an unwillingness by mental health personnel to become involved and, in fact, reported they had been advised that if no harmful physical contact occurred that it was not an issue for mental health to respond to or assess for any impact.

115.66	Preservation of ability to protect inmates from contact with abusers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>LA DPS&C has an agreement with AFSCME, and the Union Contract addresses the working environments for Department employees who choose to join the union. The agreement does not prohibit the Department of Corrections from disciplining employees who have violated PREA or from suspending alleged staff perpetrators during the investigation.</p> <p>Interviews with the DPS&C PREA Coordinator and an LSP Contracts staff report that LSP and LA DPS&C have no limits on LSP's ability to remove the alleged staff sexual</p>

	<p>abuser from contact with any offender pending the outcome of the investigation or of a determination of whether and to what extent any staff discipline is warranted. As with any State, LA has a Personnel Board and HR requirements to ensure fair hearing procedures and treatment.</p>
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<p>115.67</p>	<p>Agency protection against retaliation</p>
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The PREA Compliance Manager is comfortable that she can accomplish all her duties, including monitoring for Retaliation, as she now has a larger support staff to assist her in this area and believes that the monitoring is more effective when centrally managed.</p> <p>Retaliation is prohibited in DPS&C. If detected or alleged, the appropriate supervisor is directed to immediately contact the facility investigative section. Staff is trained to also report any claims of retaliation against offenders and other staff for reporting abuse, as well as any staff neglect or violation of responsibility that may have contributed to an incident or retaliation. The Assistant Warden for Administrative Services is responsible for collaborating with the Mental Health Retaliation Monitor to monitor retaliation. Interview of the Assistant Warden indicates a system of informal checks and maintaining sensitivity to housing changes, disciplinary reports, job changes, etc. He indicated he maintains contact even in cases determined to be unfounded. Further, his interview and the PCM interview both indicated that the 90 days was a guideline and had been exceeded on occasion when it appeared advisable.</p> <p>There are multiple protection measures in place for offenders or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with an investigation. To the maximum extent possible, staff referenced in an offender's grievance or ARP are moved until the conclusion of the investigation. Mental health services are always available to offenders by writing to mental health.</p> <p>Except in instances where LSP determines that a report of sexual abuse is unfounded, the facility does the following for at least 90 days following a report of sexual abuse:</p> <ul style="list-style-type: none"> • Monitor the conduct and treatment of offender or staff who report sexual abuse to see if there are changes that may suggest possible retaliation by other offenders or staff; • Monitor the conduct and treatment of offenders who suffered sexual abuse to see if there are changes that may suggest possible retaliation by other offenders or staff; • Act promptly to remedy any retaliation; • Monitor offender disciplinary reports;

	<ul style="list-style-type: none"> • Monitor offender housing changes; • Monitor offender program changes; • Monitor negative performance review of staff; • Monitor reassignments of staff; • Continue monitoring beyond 90 days if the initial monitoring indicates a continuing need. <p>Offenders receive a periodic status check for at least 90 days following a report of sexual abuse; the LSP Mental Health Retaliation Monitor monitors the conduct and treatment of offenders or staff who reported the sexual abuse and offenders who were reported to have suffered sexual abuse. If any changes suggest retaliation, the Monitor discusses them with the PREA Compliance Manager and Deputy Warden in order to act promptly to remedy any such retaliation. Items monitored include offender disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff.</p> <p>Such monitoring continues beyond 90 days if the initial monitoring period indicates a continuing need. The reason is documented on the PREA Agency Protection against Retaliation for Offenders/Staff Form. If an offender who is being monitored for retaliation is transferred, the PREA Compliance Manager at the sending facility follows up with the receiving facility to ensure continuity of retaliation monitoring.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Department Regulation OP-A-15 prohibits offenders at high risk for sexual victimization from being placed in segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there are no available alternative means of separation from likely abusers.</p> <p>LSP has developed a 24-hour review/ status check form for offenders who are placed in involuntary segregation and the form states the reason for use of involuntary segregation.</p> <p>Staff making the recommendation must contact the PREA Compliance Manager, Investigator or Duty Warden as soon as involuntary separation for protection occurs. There was no use of involuntary separation for protection reported in the past 12 months.</p> <p>During the on-site review, investigator and PREA Compliance Manager interviews reflected that protective custody is rare and that it is managed by the mental health unit. If an offender requests protective custody (PC), he can go to a single cell while</p>

	<p>the investigation is completed but, during that time, Mental Health staff interview and evaluate the offender and then the PC (Protective Custody) Committee determines the safest location for housing. There have been no requests for PC for PREA, but an offender could go to the protection board if they did ask.</p>
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115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Department Regulation OP-A-15 gives the agency process and gives specific steps to be followed when an allegation of sexual abuse is made. LSP policy is to refer serious incidents to the West Feliciana Parish Sheriff Department and LSP investigators stay informed on the progress of the investigations although on-site investigators have received training in regard to investigating sexual abuse in a confinement setting, to include evidence collection and crime scene preservation.</p> <p>The DPS&C Secretary has appointed a senior headquarters staff member to serve as DPS&C's major PREA Investigator, a position that oversees all investigations for the Department and works in conjunction with the Wardens and individual investigators. All investigation case reports are required to be concluded, reviewed and forwarded to Headquarters within 30 days of receiving the initial allegation. In the event an extension of the 30-day time period is needed, a request is submitted to the Headquarters Director of Investigations. This HQ position also tracks SAFE/SANE evaluations and enters required data into the annual State report on investigations.</p> <p>Incidents involving criminal acts of sexual assault and sexual misconduct where local law enforcement is not conducting the investigation should be conducted by an investigator who is acting under the authority of DPS&C's HQ-level PREA Investigator. If an investigator is not assigned to the reporting prison, one is assigned to the facility by the Chief of Operations.</p> <p>Prompt attention is given to providing objective and thorough investigations pertaining to sexual abuse and/or sexual harassment that are conducted regardless of how they are reported. When sexual abuse is alleged, LSP uses investigators who have received special training in sexual assault and sexual misconduct investigations; crime scene management; elimination of contamination; evidence collection protocol; and crisis intervention.</p> <p>Investigations include the collection of and preservation of direct and circumstantial evidence as well as interviews with the victim(s), the suspected perpetrator(s) and any witnesses. Investigators also check for prior reports or complaints that may have been filed against the suspected perpetrator. Any physical and DNA evidence is collected in accordance with LSP policy 02-01-007 - Crimes Committed on the Grounds of LSP. In an investigation of recent sexual assault or sexual misconduct occurring within 72 hours, steps to be taken by the Warden or designee include the</p>

referral for forensic examination and detailed preservation and study of the scene. Investigations of sexual abuse occurring more than 72 hours after the incident is relatively similar, except that a determination is made based upon the amount of time that has passed since the alleged incident as to whether the alleged offender aggressor should be placed in a dry cell to preserve forensic evidence.

Per the Investigator interview, investigators are trained to be objective and consider the facts of the allegation(s) and not weigh the individuals' status as an offender or as an employee. Offender victims are not subjected to a polygraph examination as a condition of preceding with an investigation.

Upon review of the files, it appears that the evidence utilized to determine outcome can be somewhat subjective due to lack of adequate information. It would appear that more cases should be found to be unsubstantiated rather than unfounded. There were no substantiated cases reported in the PAQ or the PARF (Post-Audit Reporting Form), however the Auditors interviewed/reviewed 2 cases, selected at random, which apparently were substantiated, indicating some possible inaccuracy in reported facility-provided PAQ and PARF numbers. It subsequently appears these were unsubstantiated.

Extensive Investigator training developed by the Departmental Investigations Office is conducted by the headquarters agency-wide head of Investigations on a routine basis for all investigators. Training documentation was provided to auditors upon completion.

Investigations (both criminal and administrative) review all details including what staff actions or inactions may have led to the sexual abuse and/or sexual harassment and these later receive Sexual Assault Incident Reviews per DOC policy. Investigative reports are compiled in accordance with DPS&C Form E (Standardized Case Report Format) which includes descriptions of the physical evidence and testimonial evidence as well as the reasoning behind credibility assessments and facts and findings.

The Warden is always notified and an investigation initiated as directed. Based upon the initial inquiry and/or evidence that the allegation represents possible criminal activity, the Warden notifies local law enforcement and the facility investigative section. At the initiation of the investigation, the alleged victim(s) and alleged aggressor(s) are immediately separated if not already done. The Warden or PREA Compliance Manager coordinates with the assigned investigator in decisions regarding the housing and management of the alleged offender/victim(s), alleged offenders and any alleged offender/witness(es) so as not to inadvertently interfere with the criminal investigation.

Substantiated allegations of sexual abuse are referred for criminal prosecution. Investigative reports of unsubstantiated or unfounded claims are maintained in accordance with the Department Records Management Program, which requires that reports from the active year plus 6 years be archived. Substantiated allegations are forwarded to the local District Attorney for a decision regarding prosecution, and the

	<p>PREA Investigator works with the District Attorney's Office to ensure appropriate criminal prosecution of substantiated cases of sexual assault. Cases sent for criminal prosecution are maintained as long as the alleged abuser is incarcerated or the employee is still employed, plus five years. The release of the accused abuser (offender or staff) does not constitute grounds for termination of an investigation.</p> <p>The administration needs to verify the actual investigation numbers and data to ensure accuracy and report the accurate information to the Auditor during the Corrective Action Period. Additionally, there should be a review of cases to ensure there were no other substantiated cases missed. Data is requested on any case where the inmate was arrested or prosecuted. If needed or appropriate, revise the Investigations numbers and outcomes in the PARF entries.</p> <p>In the CAP, the facility reports that 4 cases were referred to the District Attorney since 2020 and only one was accepted for potential prosecution and also that there were no substantiated cases at LSP in the 12 months prior to the audit.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Department Regulation OP-A-15 defines the investigation outcome categories Per policy and interviews with the investigator, Warden, and PCM, neither DPS&C nor LSP imposes a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	DPS&C policy is that offenders shall be notified of the outcome of investigations into allegations made by the offender that he suffered sexual abuse. Following the conclusion of an investigation into an offender's allegation, the investigator interviewed stated that he or his investigators inform the offender as to whether the allegation was determined to be substantiated, unsubstantiated or unfounded but this is not reflected in the statistics. If the prison did not conduct the investigation, it requests the relevant information from the investigative entity in order to inform the offender of the investigative findings. All 25 of the investigations of alleged sexual abuse had documented results reported back to the offender after completion of the administrative investigations; there were no external agency investigations.

	<p>Following an offender’s allegation that an employee has committed sexual abuse against him, unless, it has been determined that the allegation is unfounded or unless the offender has been released from custody, the offender is informed of the following:</p> <ul style="list-style-type: none"> • The employee is no longer posted within the offender’s housing unit; • The employee is no longer employed; • The facility learns of the employee’s indictment on charges related to sexual abuse; • The facility learns of the employee’s conviction on charges related to sexual abuse. <p>Following an offender’s allegation that an offender has committed sexual abuse against him, he is notified of the following:</p> <ul style="list-style-type: none"> • The alleged abuser has been indicted on a charge related to sexual abuse; • The alleged abuser has been convicted on a charge related to sexual abuse. • These notifications are documented in the case report. <p>The investigator indicated that all notifications use the Notification of “Outcome of PREA Allegation” form for substantiating delivery of the notice.</p> <p>A review of Investigative files showed no signed documents by any inmate, thus no evidence of reports being made. Some checklists indicated a date reporting had been done but there was no evidentiary support. Every inmate interviewed who had filed a report indicated they had not received any report or feedback. One had filed an ARP to find out the investigation status even though it was completed as substantiated, he just had received no report of outcome.</p> <p>Provide the auditor with copies of reports of all investigations signed by inmates who are notified.</p> <p>In the CAP, the PCM reports that investigators have notified all offenders who made allegations during 2022 and 2023 following the visit and review by the Chief of DOC Investigations. The PCM provided the Auditor the form now in use reflecting recent report use.</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In the past 12 months, one staff from the facility has been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.</p>

	<p>LSP has had one staff disciplined in the last 12 months violating the agency's sexual abuse or sexual harassment policies but LA DPS&C Policy OP-A-15 outlines staff violating the DOC sexual abuse and sexual harassment policy may receive disciplinary action up to and including termination. Regulation OP-A-15 also requires substantiated allegations to be forwarded to the local District Attorney for a decision regarding prosecution or forwarded to the relevant professional licensing boards.</p> <p>One staff member was determined to have violated agency policy regarding sexual abuse. During an interview with Investigators, and after West Feliciana Parish Sheriff's Office had been notified, this staff member signed resignation papers to terminate her employment and, at the completion of the interview, the staff member was arrested by the responding Sheriff's deputies.</p> <p>No staff has been disciplined short of termination or resignation.</p> <p>The seriousness of the conduct is considered in determining the appropriate response according to the interview with the Warden. Serious sexual harassment complaints, even if committed once, are still addressed by the Warden or leadership designee.</p> <p>Disciplinary sanctions are commensurate with the nature and circumstances of the acts committed, the employees' disciplinary history, and the sanctions imposed for comparable offenses.</p> <p>Louisiana state law includes a specific provision that defines sex between Department of Corrections officials and people in their custody as Malfeasance in Office and specifically states that "sexual conduct (is) prohibited with persons in the custody and supervision of the Department of Public Safety and Corrections." It carries a sentence of up to 10 years in prison and fines up to \$10,000. This statute is in addition to Louisiana laws governing rape, which carry even harsher sentences.</p> <p>Louisiana also has a law that states that a person is incapable of giving consent when "the person is under arrest or otherwise in the actual custody of a police officer or other law enforcement official." Correctional officers in Louisiana are considered law enforcement agents.</p> <p>Substantiated cases of sexual abuse and/or sexual harassment are reported to local law enforcement regardless of whether the employee is terminated or resigns to avoid termination. Those employees with licensure are reported to the appropriate licensing boards.</p>
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	In the past 12 months, no contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates.

	<p>Department Regulation OP-A-15 specifies that contractors and volunteers who engage in sexual abuse are prohibited from having contact with offenders and banned from the institution indefinitely. Violations of this policy by contractors and volunteers are reported to law enforcement and the respective licensing board. No volunteers or contractors were reported to law enforcement and/or their respective licensing boards during the past 12 months. Volunteers interviewed all were familiar with this situation and requirement from their training before performing any institutional services.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>In the past 12 months, there were no administrative or criminal findings of inmate-on-inmate sexual abuse that have occurred at the facility. The facility also reports there were no allegations of sexual harassment of any type. Given the facility population ranging from 4500 inmates and up, the Auditor believes these numbers to be highly questionable.</p> <p>Offenders found guilty pursuant to a formal disciplinary of engaging in offender-on-offender sexual abuse are written-up on a rule violation as enumerated in Disciplinary Rules and Procedures for Adult Offenders. All sexual contact between offenders is prohibited and violators will be charged with the appropriate rule #21 (a-e) violation. Sanctions are reportedly commensurate with the nature and circumstances of the abuse committed and include the offender disciplinary history and comparable offenses by other offenders. As noted elsewhere, there were 44 grievances filed alleging sexual abuse and 37 of those inmates were disciplined for reporting in 'bad faith,' also a number well out of the norm for most prisons.</p> <p>Offenders are not disciplined for violations of rules for engaging in sexual conduct with an employee. Offenders and staff are informed that there is no consenting to sexual activity in the Department of Corrections between an employee and offender.</p> <p>Mental health staff and the PREA Compliance Manager interviewed indicated that the disciplinary process takes into consideration the mental faculties of the offender who perpetrated the act when determining the sanctions. LSP has a process in place to ensure the hearing officer receives input from mental health prior to hearing the violation. In these cases, a referral to mental health is made and the report deferred until the completion of the mental health evaluation. Reports of sexual abuse and/or sexual harassment made in good faith and based on a reasonable belief that the alleged conduct occurred is not false reporting or considered lying. Decisions are based on the preponderance of the evidence.</p> <p>The Auditor has requested that senior staff review the entire post-allegation process at LSP. An April 26, 2023 memo from the PCM advised that this had been done by the</p>

	<p>Chief Investigator for DOC and there were discrepancies found in reporting back to inmates but that findings of unfounded/unsubstantiated etc. were justified. The related use of forensics has also been significantly modified as noted in other medical Standards above.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>If the PREA screening at Intake, whether by medical staff or mental health staff, indicates that an offender has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, or that an offender perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, mental health staff interviewed state they ensure that the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.</p> <p>The Classification Department completes an Availability of Mental Health Counseling Form upon intake for those offenders with a history of sexual victimization or who have previously perpetrated sexual abuse and this form is forwarded to the Mental Health Director for completion and placement into the Mental Health Section of the Medical Record. To ensure compliance, the facility has implemented the PREA Interview Form which is utilized by mental health when meeting with an offender who reported past sexual abuse. This form clearly documents the offender was seen due to his report of past sexual abuse during a Risk Assessment.</p> <p>Any information related to sexual victimization or abusiveness that occurred in an institutional setting is limited to treatment staff (and others only as necessary) in order to develop treatment plans and security and management decisions, including housing, bed, work, education, and program assignments.</p> <p>Because of the numerous allegations regarding reluctance or resistance of mental health staff to address sexual abuse assessments and response, it is requested that the facility review this area and indicate what corrective actions are needed or are taken.</p> <p>During the Corrective Action period, in an April 26, 2023 letter, the PCM/Assistant Warden informed the Auditor that she had met with the medical and mental health department heads and that the responsibilities of staff were clearly explained and that all mental health staff were given additional training on PREA responsibilities to include required 30-day reassessments, 6-month reassessments, and reassessments following any incident or allegation review. The PCM will receive copies of all reassessments. Sample of reassessments and the training roster were provided the auditor.</p>

	<p>AT present, per the PCM comments, a copy of every counseling request will go to both the mental health director and the PCM for tracking.</p> <p>Additionally, training at the Academy and at roll call has been conducted with all levels of staff, and all departments, to ensure a better understanding of their specific roles regarding any PREA complaint or allegation.</p> <p>Training rosters of MH PREA training have been provided the Auditor.</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Each camp and main facility has a mental and mental health office with office hours. The Mental Health team onsite is comprised mainly of therapists and social workers. The psychiatrist comes about every 60-90 days to meet with inmates. Social Workers perform check-ins, suicide and depression assessments, and can make referrals to therapists or the psychiatrist. Investigative Services and/or Security will contact social workers during investigations or when an inmate requests to speak with "mental health."</p> <p>The policy is that offenders receive timely, unimpeded access to emergency medical treatment and crisis intervention services in accordance with the professional judgment rendered by medical and mental health practitioners. The medical staff supervisor interviewed supports this and it also appears very evident at LSP, especially with their significant number of aging offenders. LSP has its own trauma-equipped ambulances and an emergency room on the grounds with 24-hour medical staff coverage which ensures immediate care.</p> <p>All PREA incident cards (issued to every staff member) list the preliminary steps to protect the offender-victim and include the immediate notification of medical and mental health staff. There is a staff of 30 EMTs who provide 24/7 response to every medical incident.</p> <p>Victims of sexual abuse or sexual harassment are evaluated and treated, and also receive follow-up services that include treatment plans and referrals upon discharge. Referral to Mental Health is required to always occur, and after-incident support is offered.</p> <p>Examinations performed are supposed to be conducted by individuals who have received Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE's) training or, if SAFE/SANEs are unavailable, by qualified medical practitioners. It appears that sexual assault examinations provided in the past year were performed by an LSP physician, performing as a 'qualified medical practitioner', and not by a SAFE or a SANE. One rape victim interviewed indicated his exam was</p>

cursory at best, and not a forensic exam, but this could not be verified by the auditor. The SANE's have special training on how to conduct the forensic exam and this includes things that are not necessarily medical in nature. Since LSP has trained SANEs at the facility, that seems the prudent professional to conduct a forensic exam. Physicians who are not trained to do forensic exams really should not conduct them if other choices are available. The physician should treat any medical needs that are present, but the forensic exam really is an evidence gathering procedure to facilitate prosecution of the perpetrator. Exams conducted by SAFE/SANE personnel are also preferable since trained SANE staff is present across all shifts 24/7/365. DOJ policy generally points to exams being by qualified practitioners only if a SAFE/SANE is not available. Alternatively, if the physician desires to continue doing forensic exams, he should complete appropriate training since forensics include far more items than a physical examination.

LSP theoretically offers all victims of sexual abuse forensic medical examinations at an outside facility, without financial cost to the victim, when evidentiary or medically appropriate but, as a practical matter, nursing medical staff on-site have had SANE training in regard to Sexual Assault examinations, although an LSP physician (without SAFE training) has been the actual forensic medical exam provider. Auditors did not locate any indications that actual forensic interviews are accomplished.

Testing for sexually transmitted diseases and other diseases as determined by the attending physician and counseling are made available to the alleged victim when appropriate.

In reviewing investigation files, it was obvious that mental health response to PREA cases was rote and not in depth, very disengaged, that even questions to alleged rape victims were cursory and tended towards suicide issues, not sexual assault. Numerous inmates who had been involved in PREA allegations all reported essentially the same thing- a theme of non-involvement on the part of mental health staff, Such phrases as "Keep PREA away from me" and "We don't do PREA reports, tell someone else" were repetitious. Every staff member is required to accept PREA reports, including mental health staff, and, in fact, mental health should be the most deeply and intuitively involved in such allegations rather than attempting to avoid involvement.

The Auditor's assessment is that efforts in the 2019 audit recommendation to free up mental health staff from collateral assignments, to allow more time for counseling, went astray and has been possibly misunderstood as directing mental health staff towards disengagement from PREA treatment and involvement. Quite the opposite is what is needed, mental health staff are the first line of critical response to victims of sexual assault.

During the Corrective Action period, in an April 26, 2023 letter, the PCM/Assistant Warden informed the Auditor that she had met with the medical and mental health department heads and that the responsibilities of staff were clearly explained and that all mental health staff were given additional training on PREA responsibilities to include required 30-day reassessments, 6-month reassessments, and reassessments

	<p>following any incident or allegation review. The PCM will receive copies of all reassessments. Sample of reassessments and the training roster were provided the auditor.</p> <p>During the Corrective Action Period (CAP), on May 2, 2023, the Auditor had an extensive phone conversation with Dr. Randy Lavespere, Medical Director for LA DOC, regarding the LSP forensic processes. There are several factors contributing to this problem, two of which are: the Maximum Custody of the population, and the significant and continual turnover of medical staff at LSP. The turnover level is high enough that anyone trained as a SAFE/SANE would almost certainly leave quickly and the need for a forensic-trained medical staff would essentially be continual. The Maximum Custody nature of the population makes use of a local hospital problematic in terms of staffing and the certainty of the offenders' use of PREA allegations just to get outside the security perimeter to get to a less-secure hospital.</p> <p>Dr. Lavespere will complete the SAFE/SANE training and be the sole provider of forensic examinations at LSP. His location at DOC headquarters is essentially the same distance to the facility as is the hospital. This will create personal scheduling issues for him, but is compliant and will provide stability while he pursues efforts to provide other compliant solutions.</p> <p>Since Dr. Lavespere will be personally responsible for all forensic exams at LSP, he must ensure that LSP medical staff do not develop a system that avoids notifying him of every instance and/or does not develop a system of advising him forensics are not needed, unless they have followed clear guidance and direction from him.</p> <p>On June 20, 2023 the Auditor and Dr. Lavespere had a follow-on conversation after Dr. Lavespere had spent a day with the Regional Coroner's SANE, who travels throughout several Parishes and has done forensic exams for some 20 years. Dr. Lavespere is already incorporating a number of her processes and forms and policies into the LSP process and is on track with his plan to complete SAFE/SANE training.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Community level of care is the LSP target performance level for medical and mental health services rendered to victims. Random and specialized staff interviewed all felt that this is achieved and likely surpassed when considering many other underserved areas of the state. Medical care received more negative comment than any other segment of LSP operations, especially from some of the elderly and handicapped, but the Auditors are not qualified to assess general medical care. It is also noted that</p>

some elderly offenders were positive in their assessment of medical care and felt well cared for. LSP does largely meet the major elements of required medical PREA steps regarding sexual abuse follow-up but, as noted previously, social worker resistance to involvement in sexual abuse issues was repeatedly mentioned in inmate interviews.

Health Care Policies HC-09, HC-30 HC-36 address the components of this standard. LSP conducts a medical and mental health evaluation and offers treatment, as appropriate, to offenders who have a history of sexual abuse. Offenders who have been victimized by sexual abuse in any prison, jail, lock-up or juvenile facility are offered medical and mental health evaluations and treatment. Follow-up services and treatment plans, as well as referral for continuing care following transfer or placement in other facilities, are provided for victims. Staff reported, when applicable, they set up the continuity of care upon release. Interviews indicated care and counseling often continues for several months but can also continue throughout the incarceration.

All but one transgendered inmate interviewed thought the prison was doing a good job at providing mental health services, and feel they are treated with dignity and respect.

Mental health evaluations are required to be conducted on all-known offender-on-offender abusers within 60 days of learning of the abuse but really are routinely done within 14 days. LSP frequently offers a sex offender program to such offenders if it appears appropriate to that case.

Victims of sexual abuse are offered tests for sexually transmitted infections as appropriate. These services are at no cost to the victim regardless of whether the victim names the abuser or cooperates with any investigation.

Inmates were frequently clear that they do not perceive that PREA issues receive in-depth consideration or forensic analysis and this medical PREA area has been recommended for facility administration review in earlier standards.

During the Corrective Action Period (CAP), on May 2, 2023, the Auditor had an extensive phone conversation with Dr. Randy Lavispere, Medical Director for LA DOC, regarding the LSP forensic processes. There are several factors contributing to this problem, two of which are: the Maximum Custody of the population, and the significant and continual turnover of medical staff at LSP. The turnover level is high enough that anyone trained as a SAFE/SANE would almost certainly leave quickly and the need for a forensic-trained medical staff would essentially be continual. The Maximum Custody nature of the population makes use of a local hospital problematic in terms of staffing and the certainty of the offenders' use of PREA allegations just to get outside the security perimeter to get to a less-secure hospital.

Dr. Lavispere will complete the SAFE/SANE training and be the sole provider of forensic examinations at LSP. His location at DOC headquarters is essentially the same distance to the facility as is the hospital. This will create personal scheduling issues for him, but is compliant and will provide stability while he pursues efforts to provide other compliant solutions.

	<p>Since Dr. Lavisphere will be personally responsible for all forensic exams at LSP, he must ensure that LSP medical staff do not develop a system that avoids notifying him of every instance and/or does not develop a system of advising him forensics are not needed, unless they have followed clear guidance and direction from him.</p>
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115.86	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>In the past 12 months, six criminal and/or administrative investigations of alleged sexual abuse were completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents.</p> <p>Department Regulation OP-A-15 and Penitentiary Directive 14.005 require a sexual abuse incident review at the conclusion of every substantiated or unsubstantiated sexual abuse investigation and LSP conducts a Sexual Abuse Incident Review within 30 days of the conclusion of every sexual abuse investigation unless the allegation is determined to be unfounded.</p> <p>The review team includes upper management officials, (Deputy Warden, or Assistant Wardens and PREA Compliance Manager, etc.) with input from line supervisors, investigators, and medical or mental health practitioners. The review team prepares a Sexual Abuse Incident Review Form that follows the elements of the Standard. The completed form is maintained in the investigative file and a copy is sent to the Warden and the PREA Compliance Manager.</p> <p>The review team members interviewed all agreed that the review considers the following:</p> <ul style="list-style-type: none"> • A need to change policy or practice to better prevent, detect, or respond to sexual abuse; • Was the abuse motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification status or the perceived status; • An examination of the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; • Adequacy of staffing levels in the area; • Considers whether monitoring technology should be deployed are augmented; • A report of the findings is submitted to the Warden. <p>Recommendations that are in the Warden's control are normally implemented. Documentation is provided if a recommendation from the Incident Review team is not implemented.</p>

	<p>There were 44 administrative investigations of alleged sexual abuse in the last 12 months and 6 were followed by an incident review within 30 days; 48 were determined unfounded. The auditors have some concern that the other investigations, those determined to be unfounded, were not subject to an Incident Review and this 48 represents almost 90% of the facility allegations. Following the investigator training noted in 2019, and numerous camera changes and physical plant improvements for tier viewing, it was expected that a higher proportion of cases would be defined as unsubstantiated rather than unfounded and Incident Review numbers would increase. That has not occurred.</p> <p>The Warden should consider a senior level review of every investigation.</p> <p>During the Corrective Action Period (CAP), the agency Chief Investigator conducted a detailed onsite review of the investigations process and provided a report to the Auditor. He determined that the discipline of most of the cases of 'false allegations' was warranted but also determined that there were significant shortfalls in investigative reports and files, and in reporting back to offenders after an investigation concluded. He has directed corrections in these areas and will be reviewing each case as it is reported to his DOC headquarters office. Further, he indicated that PREA investigations at all DOC facilities will be relocated to and managed by his office in the future.</p> <p>The Victim Advocate and medical issues noted above that relate to investigations are addressed in their respective Standards (115.21 and 115.81).</p>
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The LA DPS&C PREA Allegation Database is the electronic collection of data to track all allegations of sexual abuse. This information is included in an annual report compiled by the Department's PREA Coordinator which is posted on the Department's website (www.doc.la.gov) for review by the public.</p> <p>The LADPS&C monitoring instrument is used to collect and track uniform data of sexual abuse at facilities and includes all the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the U. S. Department of Justice's Bureau of Justice Statistics. An aggregated assessment is made of the data annually and included in a compiled report by the PREA Coordinator for placement on the DOC website, and the PREA Coordinator and PCM interviews state that this is the procedure that is followed.</p> <p>DPS&C Procedures for Reporting to the United States Department of Justice:</p>

	<ul style="list-style-type: none"> • DPS&C's PREA Investigator prepares the annual Survey of Sexual Victimization (SSV Report) for State Prison Systems report, containing required statistics for DPS&C owned and operated • A separate Incident Form is prepared for each substantiated sexual victimization allegation reported at a Department facility and is created by the PREA Investigator at the facility where the incident occurred. • These forms are submitted by the PREA Investigator to the United States Department of Justice by September 1st of each year for the statistics accumulated the prior calendar • A second report is completed by DPS&C's PREA Investigator which includes all privately-operated prisons and transitional work programs under contract to or under cooperative endeavor agreement with the DPS&C. • The Department's PREA Investigator maintains any reports concerning a substantiated sexual victimization allegation occurring at all state privately operated prisons and all transitional work programs under contract or cooperative agreement with the DPS&C. • The Department's PREA Investigator submits copies of both SSV reports to the Secretary and the Chief of Operations prior to September 1st of each • The aggregate numbers of the SSV reports' statistics from the state facilities, privately operated prison facilities and transitional work programs are posted on DPS&C's website by October 1st of each year. • The Department maintains sexual abuse data collected pursuant to La. R.S. 115.87 for at least 10 years after the date of initial
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Reviews of all data collected are used to assess and improve the effectiveness of sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas in DOC. LSP's annual report contains statistics for the Fiscal Year reporting and can be compared to the previous year data. The Warden and PCM stated that the Warden approves the LSP Annual Reports and submits them to the parent agency (DOC). There are also automated monthly reporting mechanisms for this data area. Reviews of this data are accomplished at each level for analysis, determining trends or needs, etc.</p> <p>On a yearly basis, the agency PREA Coordinator reviews the collected and aggregated data to identify areas in need of corrective action, then develops an annual report which is approved by the Chief of Operations and the Secretary and made available on the agency's website.</p>

	<p>Investigations leadership review all details of both criminal and administrative investigations, including what staff actions or inactions may have led to the sexual abuse and/or sexual harassment, and these are reviewed at each successive level per DOC policy. Investigative reports are compiled in accordance with DPS&C's Standardized Case Report Format, which includes descriptions of physical and testimonial evidence as well as the reasoning behind credibility assessments and findings.</p> <p>For annual reporting purposes redaction is not needed as it (the report) only contains statistical data and does not refer to any individual(s).</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>All data is securely preserved and retained in accordance with the procedures outlined in 115.87. In accordance with the Department Records Management Program rules, Investigative Reports are retained while Active plus a minimum of six years.</p> <p>DPS&C makes an annual report regarding all sexual abuse data from DPS&C facilities available to the public through its website www.doc.la.gov. LSP provides its data to the PREA Coordinator and PREA allegations are tracked through a secured database that can be easily accessed by the State Institutions. The report consists of numbers only; DOC philosophy is that anonymity will ensure the integrity of the process and encourage the reporting of all PREA allegations in the future.</p> <p>Investigations (both criminal and administrative) review all details including what staff actions or inactions may have led to the sexual abuse and/or sexual harassment, and these are later reviewed for potential changes to policy or operations. Investigative reports are compiled in accordance with DPS&C Standardized Case Report Format, which includes descriptions of the physical evidence and testimonial evidence as well as the reasoning behind credibility assessments and facts and findings.</p> <p>Cases sent for criminal prosecution are maintained as long as the alleged abuser is incarcerated or the employee is still employed, plus five years. The release of the accused abuser (offender or staff) does not constitute grounds for termination of the investigation.</p> <p>The PREA Coordinator and investigator report that unsubstantiated or unfounded claims are maintained in accordance with the Department Records Management Program, which requires the active year plus 6 years be archived.</p>

115.401	Frequency and scope of audits
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Warden, PREA Compliance Manager, and staff were extremely supportive and made all efforts to ensure full access and ease of audit operation for the auditors, both before and after the site visit and during the time at the prison.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The LA DPS&C PREA Coordinator publishes all required reporting data and makes an annual report regarding all sexual abuse data from DPS&C facilities available to the public through DPS&C's website www.doc.la.gov .

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).)	yes
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).)	yes
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
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).)	yes
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
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.)	na
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.)	na
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.)	no
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?	no
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	no

	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.)	yes
	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?	no
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	no
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.)	na
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.)	yes
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?	no
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?	no
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	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.)	yes
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,	yes

	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?	no

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?	no
	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?	no
	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?	no
	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?	no
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?	no
	Following an inmate's allegation that he or she has been sexually	no

	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?	no
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.)	yes
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.)	yes
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.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	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.)	yes
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