

PREA Facility Audit Report: Final

Name of Facility: Norwood E. Jackson Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 03/06/2026

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Alton Baskerville	Date of Signature: 03/06/2026

AUDITOR INFORMATION	
Auditor name:	Baskerville, Alton
Email:	alton.abm@preaauditors.com
Start Date of On-Site Audit:	01/20/2026
End Date of On-Site Audit:	01/21/2026

FACILITY INFORMATION	
Facility name:	Norwood E. Jackson Correctional Facility
Facility physical address:	10 Woods Road, Valhalla, New York - 10595
Facility mailing address:	P.O. Box 389, Valhalla, New York - 10595

Primary Contact

Name:	Naima Johnson
Email Address:	naj2@westchestercountyny.gov
Telephone Number:	(914) 231-1361

Warden/Jail Administrator/Sheriff/Director	
Name:	Naima Johnson
Email Address:	naj2@westchestercountyny.gov
Telephone Number:	(914) 231-1361

Facility PREA Compliance Manager	
Name:	Peter Reczek
Email Address:	pjr5@westchestercountyny.gov
Telephone Number:	914-231-1598
Name:	Wilson Nivar
Email Address:	wrn1@westchestercountyny.gov
Telephone Number:	914-231-1528

Facility Health Service Administrator On-site	
Name:	Dr. Alexis Gendell
Email Address:	agendell@wellpath.us
Telephone Number:	(914) 231-1367

Facility Characteristics	
Designed facility capacity:	1800
Current population of facility:	585
Average daily population for the past 12 months:	597

Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both women/girls and men/boys
Age range of population:	18+
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:	807
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	242
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	121

AGENCY INFORMATION

Name of agency:	Westchester County Department of Correction
Governing authority or parent agency (if applicable):	
Physical Address:	10 Woods Road, Valhalla, New York - 10595
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Naima Johnson	Email Address:	naj2@westchestercountyny.gov

Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

3	<ul style="list-style-type: none"> • 115.13 - Supervision and monitoring • 115.71 - Criminal and administrative agency investigations • 115.73 - Reporting to inmates
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Number of standards met:

42

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

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

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2026-01-20
2. End date of the onsite portion of the audit:	2026-01-21

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Westchester Jewish Community Services - Crime Victims Advocacy & Support Services Program (WJCS - CVASSP), located at 845 North Broadway, White Plains, New York 10603.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1800
15. Average daily population for the past 12 months:	597
16. Number of inmate/resident/detainee housing units:	52

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

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

<p>23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</p>	<p>568</p>
<p>25. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</p>	<p>15</p>
<p>26. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</p>	<p>2</p>
<p>27. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>28. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</p>	<p>1</p>

29. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	25
30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0
31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	3
32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	8
33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	28
34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	The Facility does not track the inmates who identify as lesbian, gay, or bisexual. It is a part of the initial Risk Assessment, but not tracked as a separate category.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	827
37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	121
38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	239
39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No additional comments.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	16

<p>41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p><input checked="" 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>
<p>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Inmates were selected from all housing units.</p>
<p>43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>There were no barriers to interviewing the random or targeted inmates.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>16</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>47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
<p>49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</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>This population was not available during my visit according to the staff.</p>
<p>50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>3</p>
<p>52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</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>I do not have additional information to add.</p>

<p>53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</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>I do not have additional information to add.</p>
<p>54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>4</p>
<p>55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>5</p>
<p>56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</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>I do not have additional information to add.</p>
<p>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>There were no barriers while completing interviews.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>58. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</p>
<p>59. 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>60. 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>61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>There were no barriers.</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>62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>20</p>
<p>63. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>64. 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>
<p>65. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>66. Were you able to interview the PREA Compliance Manager?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

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

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

	<input type="checkbox"/> Other
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	2
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
69. 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:	3
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
70. Provide any additional comments regarding selecting or interviewing specialized staff.	No additional comments.

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.

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

<p>76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>Twelve(12) random employee records were reviewed for PREA training and Refresher training, Criminal background checks and five-year background checks. Records were compliant. Twelve (12) random inmate files were reviewed for initial risk screening, follow up 30-day screening, PREA training and acknowledge. The inmate records were compliant.</p>
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Documentation Sampling

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

<p>77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p>78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>No additional comments.</p>
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

79. 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	3	2	3	2
Staff-on-inmate sexual abuse	24	1	24	1
Total	27	3	27	3

80. 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	28	1	28	1
Staff-on-inmate sexual harassment	34	0	34	0
Total	62	1	62	1

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	1	0	0	0
Staff-on-inmate sexual abuse	0	1	0	0	0
Total	0	2	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	1	1	1
Staff-on-inmate sexual abuse	3	13	7	1
Total	3	14	8	2

Sexual Harassment Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	1	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	1	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	6	5	15	2
Staff-on-inmate sexual harassment	5	13	16	0
Total	11	18	31	2

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	27
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<p>86. 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>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>3</p>
<p>88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>89. 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>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>24</p>
<p>91. 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>92. 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>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>62</p>
<p>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>28</p>
<p>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>97. 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	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	34
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No additional comments.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
102. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

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

Yes

No

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

1

AUDITING ARRANGEMENTS AND COMPENSATION

108. Who paid you to conduct this audit?

The audited facility or its parent agency

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

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

Other

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy 2-12 Sexual Assault/ Harassment (PREA Compliance) 01/06/2025 • WCDOC Organization Chart <p>Auditor’s Discussion:</p> <p>WCDOC Policy #2-12 Sexual Assault/ Harassment (PREA Compliance)</p> <p>WCDOC has a written policy mandating zero tolerance toward all forms of sexual abuse and harassment. The policy outlines their approach to preventing, detecting and responding to such conduct. Policy #2-12 provides information on definitions, the limited use of protected custody, retaliation, screening, cross gender viewing and searches, minors, first responder duties, securing statements and evidence from witnesses, removing/isolating alleged perpetrators, and crime scene prevention. The policy highlights prevention planning, medical referrals, mental health referrals, classification and searches of transgender and intersexed prisoners, open reporting and mandatory responses to such reports/allegations of sexual misconduct. As per</p>

	<p>this policy, staff members are mandated reporters.</p> <p>Analysis/Reasoning:</p> <p>WCDOC designated an upper-level, agency-wide PREA Coordinator with sufficient time and authority to develop, implement and oversee agency efforts to comply with the PREA standards. WCDOC was well prepared for the audit and the organization of their files, in addition to the documentation provided, demonstrates their ability to devote sufficient time to meeting PREA standards. In an interview with the Deputy Commissioner, she disclosed that she has enough time to manage her PREA duties.</p> <p>This agency does not operate more than one facility. The agency has a PREA Coordinator and a PREA Compliance Manager to PREA related responsibilities. An organizational chart, with required duties, was provided to the auditors.</p> <p>Conclusion:</p> <p>WCDOC and Norwood E. Jackson Correctional Facility (NEJCF) have shown they meet the standard 115.11. The agency and facility have met PREA standards, and the coordinators, analysts and managers display great efforts in maintaining that status. Policy is very good requiring zero tolerance and adherence to efforts to prevent, detect and respond to sexual abuse of harassment of offenders under WCDOC charge.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	WCDOC meets the requirements of this standard based upon the following evidence: Documentation reviewed indicated that the WCDOC does not contract for the confinement of its inmates with private agencies or other entities including other government agencies.

115.13	Supervision and monitoring
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy Section 07 Personnel Staffing and Attendance 02/06/2015 • Staffing Plan Memo dated 01/05/2024 and 01/03/2025 • Cell Survey Form

- Westchester County Department Of Corrections Cross Complex Count
- Interviews:
 - PREA Compliance Manager
 - Random Staff
 - Random Confined Persons

Auditor’s Discussion:

WCDOC Policy 07 Personnel Staffing and Attendance

(a) The State Commission of Correction shall, in determining the minimum facility staffing requirement for each local correctional facility, ascertain the functions to be performed by facility staff including, but not limited to:

- (1) general facility administration and management;
- (2) control room operation;
- (3) general housing area supervision;
- (4) special housing, admissions/orientation housing, and medical/mental health observation supervision;
- (5) medical services;
- (6) visitation;
- (7) correspondence;
- (8) exercise;
- (9) facility maintenance;
- (10) library;
- (11) commissary;
- (12) religious services;
- (13) prisoner transportation; and
- (14) any other facility program or service.

The State Commission of Correction shall, in determining the minimum facility staffing requirement for each local correctional facility, consider the following factors, among others:

- (1) the physical plant of the facility;
- (2) the maximum prisoner capacity of such facility established pursuant to Part 7040 of this Subtitle; and
- (3) any other factors including those unique to a particular facility.

The State Commission of Correction shall, upon compliance with subdivisions (a) and (b) of this section, determine the number of man hours necessary to perform each facility function during each shift regularly scheduled within a 24-hour period. Upon making such determination, the State Commission of Correction shall determine the total number of persons necessary to perform such functions during each such shift.

To determine the minimum facility staffing requirement, the number of persons necessary to perform facility functions during each shift regularly scheduled within a 24-hour period as determined pursuant to section 7041.2 of this Part, shall be multiplied by the full coverage factor.

Staffing Analysis

A comprehensive staffing analysis shall be conducted at least annually to determine staffing needs and plans. Relief factors are calculated for each classification of staff that is assigned to relieved posts or positions. Essential posts or positions, as determined by the staffing plan are consistently filled with qualified personnel.

WCDOC Policy #2-12 Sexual Assault/ Harassment (PREA Compliance)

V. Preventing and Detecting Sexual Abuse and Harassment

A. Staffing Plan Video Monitoring

1. In the process of creating and revising a staffing plan to provide for adequate levels of staffing and video monitoring to protect residents against sexual abuse, the department shall ensure that the following factors are taken into consideration:

- a) Generally accepted detention and correctional practices;
- b) Any judicial findings of inadequacy;
- c) Any findings of inadequacy from Federal investigative agencies;
- d) Any findings of inadequacy from internal or external oversight bodies;
- e) All components of the facility's physical plan;
- f) The composition of the resident population;
- g) The number and placement of supervisory staff;
- h) Programs occurring on a particular shift;
- i) Any applicable State or local laws, regulations, or standards;
- j) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- k) Any other relevant factors.

2. WCDOC shall make its best effort to comply with the staffing and video monitoring plan and document and justify all deviations in circumstances where it is not adhered to.

3. At least once every year, and in collaboration with the PREA Coordinator, the Department shall assess whether adjustments are needed to the staffing plan and the deployment of video monitoring systems and other technologies. (See Sample Staffing Plan and Camera Location Report)

B. Unannounced Rounds

- 1. Supervisors shall conduct and document unannounced rounds covering all shifts and all areas of the facility to identify and deter staff sexual abuse or harassment
- 2. Department policy prohibits staff members aware of these rounds from alerting other staff when and where they occur.
- 3. The Department's administrative staff shall routinely conduct video audits of security inspections to monitor compliance.

Analysis/Reasoning

Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of inmates is 770. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of inmates on which the staffing plan was predicted, 1800. There have not been any deviations from the staffing plan in the past 12 months at NEJCF.

	<p>Conclusion:</p> <p>The Auditor noticed that the facility has an above average staffing plan to ensure the protection of offenders from sexual abuse. The auditor was impressed with the number security staff that was present in all the housing areas and throughout the facility. The facility had experienced a reduction in resident population in recent times. However, a corresponding reduction in the security staffing level did not occur. The staffing plan is reviewed in accordance with this standard. The Auditor reviewed policies, procedures, unannounced rounds, and interviewed staff and confined persons and made observations to determine the facility exceeds the requirements of this standard.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCCDOC Policy #2-12 Sexual Assault/ Harassment (PREA Compliance) 01/06/2025 • WCCDOC Policy # 05-10 SECTION: 05 Admissions/Discharges UNDER 18 YEARS 01/05/2022 • WESTLAW New York Codes, Rules and Regulations 9 CRR-NY 180-1.16 NY-CRR Jail Placement • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager <p>Auditor's Discussion:</p> <p>C. Youthful Offenders</p> <ol style="list-style-type: none"> 1. A youthful resident (defined as any person under the age of 18 who is under adult court supervision and incarcerated or detained in jail) shall not be placed in a housing unit in which they will have sight, sound, or physical contact with any adult resident through use of a shared dayroom or other common space, shower area, or sleeping quarters. 2. In areas outside of housing units, the Department shall either: <ol style="list-style-type: none"> a) Maintain sight and sound separation between youthful and adult residents or b) Direct staff supervision is provided when youthful and adult residents have sight, sound, or physical contact. <p>Note: Direct staff supervision" means that security staff are in the same room with, and within reasonable hearing distance of, the youthful offender. "Security staff" means employees primarily responsible for supervising and controlling residents and detainees in housing units, recreational areas, dining areas, and other program areas of the facility.</p>

3. To comply with this provision, the facility shall try to avoid isolating youthful residents. Absent exigent circumstances, the department shall not deny youthful residents daily large-muscle exercise and any legally required special education services to comply with this provision. Youthful residents shall also have access to other programs and work opportunities to the extent possible.

4. Any allegation of sexual abuse/harassment of a minor resident shall be immediately referred to SIU for referral to WCDPS, which shall make any mandatory reporting as may be required (i.e., to child protective services).

WCCDOC Policy # 05-10 SECTION: 05 Admissions/Discharges

The purpose of this policy is to establish guidelines for admissions under the age of eighteen and shall apply to individual admissions as well as group admissions.

A. All individuals accepted to the Westchester County Department of Correction for the purpose of confinement pursuant to a lawful court order shall be accepted in accordance with all State, NYS COC Minimum Standards and Office of Children and Family Services Rules and Regulations.

B. Individuals under the age of eighteen (18) may not be committed to the facility unless NYS CPL 510.15 and NYS FCA 304.1 are applicable for this commitment.

C. Juvenile Offenders and Adolescent Offenders designated for housing in an adult jail setting shall be housed in compliance with NYS OFCS PART 180.16 Jail Placement.

Definitions:

"Adolescent offender" or AO" means a person who is 16- or 17-years-olds that commit a felony-level crime. These individuals have their cases heard in the Youth Part of Criminal Court. If the judge determines there is a need for pre-trial detention, AOs will be held in the newly created "specialized secure juvenile detention facilities for older youth."

Juvenile Delinquent: a person who is under 16 years old, but is at least 7 years old, who commits an act which would be a "crime" if he or she were an adult, and is then found to be in need of supervision, treatment or confinement.

"Juvenile Offender" or "JO" means a person who is 13, 14, or 15-years-old and is charged with committing a serious or violent felony offense listed in Penal Law 10.00 (18)

IV. PROCEDURE-UNAPPROVED JUVENILE UNDER 18 YEARS OF AGE

A. Supervisors and Officers assigned to the Intake Booking Area are responsible to determine the age of the individual being committed in accordance with P & P 05-01 Admission Process and 06-01 Inmate Classification.

B. If determined at the time of admission that the individual is under the age of eighteen the individual will not be accepted and shall be returned to the committing court via the arresting agency.

C. If after the admissions process has been completed or anytime thereafter an individual has been determined to be under the age of eighteen (18) the individual is to be immediately moved to the Booking Area and segregated from the general inmate population.

D. The Booking Supervisor shall be responsible to contact the committing court, the District Attorney's Office, and the arresting agency and notify them of the age of the individual and the requirement to remove the individual from the facility. They shall also be informed as to how the age of the individual was determined. If the court or other listed agencies are not available contact the on-call judge.

E. Pending transfer the individual is to be housed within a unit designated to hold juveniles until such time as a suitable place of detention. this unit shall allow for sight and sound separation from the adult population.

V. Procedure-Approved Juvenile Under 18 Years Of Age

A. All rules and regulations set forth in Part 180.16 Jail Placement as outlined below shall be complied with for any individual under the age of eighteen (18) that is required to be housed within the facility.

2. No secure juvenile detention facility, including a 48-hour holdover facility, has a bed available to provide secure detention. A bed may be deemed unavailable in the following emergency conditions:

- a) When road conditions have been defined by the National Weather Service as hazardous.
- b) When the time in transporting to and from that facility would make it impractical (considering the health and welfare of the youth) to assure a timely court appearance.
- c) When a child needs secure care in a hospital and no children's ward is available.

Authorization shall be for a 12-hour period and may be renewed by the drop-off agency for additional 12-hour periods only so long as the emergency conditions defined above continue to exist.

No youth will be accepted without this authorization PRIOR to admissions.

B. If the court finds that it is in the interest of justice to temporarily lodge the youth in an alternate setting:

a. There must be a hearing at least every 30 days, and no youth shall be lodged in an alternate adult setting longer than 180 days unless:

- a) The court finds good cause; or
- b) The youth waives the limitation.

b. All youth shall continue to have sight and sound separation from adult detainees for as long as the youth is placed in a local adult correctional facility when the alternate jail placement is used; and

c. The local detention administering agency of the youth's court jurisdiction will be responsible for assessing the health and wellbeing of the youth during their stay.

C. Circumstances under which the hearing is not required:

1. The interest of justice hearing is not required under limited exigent circumstances described below for youth. All youth held in an adult correctional facility without a

hearing (unless directly remanded) must have sight and sound separation from incarcerated adult

VIII. MISCELLANEOUS

A Youth housed in accordance with Jail Placement 180.16 shall be segregated from adult population.

- a. There shall be complete sight and sound separation from adults.
- b. There shall be continuous direct staff supervision of youth in jail placement. Audio and visual
- c. monitoring devices may not be substituted for direct staff supervision.

Analysis/Reasoning:

The Westchester County DOC is prevented from housing youthful offenders in same housing unit with adult offenders where they would have sight or sound contact with any adult inmate through use of a shared dayroom or other common space, shower or sleeping quarters. In the past 12 months, no youthful offender has been assigned to WCCDOC. Conversation with random employees and random offenders indicate that they had no knowledge of any youthful offenders assigned to WCCDOC.

In the past 12 months, there were zero (0) number of housing units to which youthful inmates are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters.

In the past 12 months, there were zero (0) number of youthful inmates placed in SAME HOUSING UNIT as adults at this facility.

In the past 12 months, there were zero (0) number of youthful inmates who have been placed in isolation in order to separate them from adult inmates.

Conclusion:

No youthful offenders were observed in the facility while conducting a thorough tour of the compound. WCCDOC is in compliance with this standard based on review of relevant files, interviews of staff and confined persons and personal observations during the tour of the facility.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews and Other Evidence Reviewed <ul style="list-style-type: none">• WCCDOC Policy #02-14 Facility Search and Control of Contraband• Westchester County Department Of Correction Training Academy Lesson Plan

- Memo re: Opposite Gender Announcement 09/07/2024
- Log Book of Gender Announcement
- Interviews:
 - Warden
 - PREA Compliance Manager
 - Random Staff
 - Random Confined Persons

Auditor's Discussion:

WCCDOC Policy #02-14

6. Cross gender strip searches or cross gender visual body cavity searches are prohibited except in exigent circumstances or when performed by medical personnel in accordance with policy and procedure. Such searches must be documented.

7. Cross gender pat searches of female inmates is not permitted absent exigent circumstances.

8. Absent a bonafide emergency and/or significant security threat all searches of transgender or intersex inmates will be conducted by a staff member of the gender identified by the inmate on the Statement of Search Preference form contained in the inmate's booking folder or as per the designation on the ELITE Transgender/Intersex Inmates in Custody Report.

a. Supervisors assigned to sectors where inmate searches routinely take place (booking search, visit search etc.) and sectors where identified housing units have been targeted for contraband searches shall ensure that Officers assigned to those areas are provided with an up to date printout of the ELITE Transgender/Intersex Inmates in Custody Report to help ensure compliance with preferred gender searches.

b. Inmates being subjected to random or spontaneous reasonable suspicion searches will have their gender search preference verified prior to being searched when time and circumstances permit.

f. Searches will be performed by staff of the same gender. Under no circumstances will a staff member of the opposite gender cut or forcibly remove an inmate's clothing.

In instances for example when ERT is all male staff and the search involves a female inmate, the ERT supervisor will ensure that at least two female officers are suited up in personal protective equipment (PPE) and that a female officer is assigned to operate the video camera. If available, a female supervisor will be summoned to the area as well.

6. The ERT sergeant will inform the female inmate that female officers will be removing her clothing or strip searching her.

7. The inmate will be cautioned that in the event that she is not compliant or resistive, that male staff may intervene if necessary.

8. The inmate's restraints will then be removed and she will be turned over to the female supervisor and to PPE-equipped female officers for the removal of her clothing or the strip search.

9. The ERT sergeant will move the team to a position near the immediate area of

the clothing removal, ensuring that the team's position offers privacy to the female inmate yet provides for immediate access in the event of an emergency.

10. Should the inmate continue to be non-compliant or become physically resistive, with female staff present, ERT will use the appropriate amount of force to secure the inmate in full restraints.

11. Once secured in restraints, the inmate will again be turned over to female staff and the ERT Sergeant will again move the team to a position that offers privacy to the female inmate yet provides for immediate access in the event of an emergency.

12. The ERT sergeant will direct the female officers to forcibly remove the inmate's clothing by providing medical shears and instructions for cutting the clothing off. Should the inmate become physically resistive while female officers are attempting to remove the inmate's clothing, at the discretion of the ERT Sergeant, ERT will intervene and physically hold the inmate in place.

The ERT Sergeant will ensure that the female inmate is covered with a sheet, blanket, suicide prevention gown or similar covering in an effort to maximize her privacy.

While being held in place by ERT, the female officers will continue to cut the inmate's clothing off from under the privacy covering and complete search procedures.

13. Upon removing the inmate's clothing, the female officers will complete search procedures and provide new garments or suicide prevention gown for the inmate to re-dress. Such tasks will be performed in full prior to any male staff re-entering the immediate area.

14. Once an inmate is re-dressed ERT will secure the inmate in full restraints and escort them to an area to be secured (such as a holding cell or other appropriate location). NOTE: Inmates should be appropriately dressed when escorted throughout the facility. An inmate in a state of undress or wearing a suicide prevention gown should not be escorted from central booking to the med unit for example.

15. A medical and mental health evaluation will be conducted after the incident. These evaluations can be facilitated by regular line staff unless the inmate continues to be non-compliant, resistive or combative. Under these circumstances ERT will escort the inmate to the appropriate medical staff to conduct these evaluations or summon medical staff for on site evaluation.

16. All of the above details or other pertinent information will be documented as per Policy & Procedure 18-10 Alarm or Incident and Use of Force Reports.

D. Cross-Gender Viewing and Searches/Searches of Transgender Residents

Searches

a. The facility shall not conduct cross-gender strip searches(meaning a search that requires a person to remove or arrange clothing so as to permit a visual inspection of their breasts, buttocks, or genitalia) or cross-gender visual body cavity searches(meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.

Note: "Medical practitioner" means a health professional who, by virtue of education, credentials, and experience, is permitted by law to evaluate and care for patients within the scope of his or her professional practice.

b. The facility shall not permit cross-gender pat-down searches of female residents absent exigent circumstances. To comply with this provision, the facility shall not restrict female residents' access to regularly available programming or other out-of-cell opportunities.

c. The facility shall document all cross-gender strip searches and body cavity searches of residents and all cross-gender pat-down searches of female residents.

d. No staff member shall conduct a search of a transgender or intersex resident solely to determine genital status. If the resident's genital status is unknown, it may be determined during conversations with the resident 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.

Viewing

a. The facility shall enable residents to shower, perform bodily functions, and change clothing without a 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.

b. Staff members of the opposite gender shall announce their presence when entering a resident housing unit.

MEMO PREA Opposite Gender Announcements

In an effort to remain PREA compliant and as per PREA standard 115.15, Prevention and Planning. ALL staff members of the opposite gender are required to announce their presence when entering an resident housing area. This includes all uniformed staff members as well as it includes civilian staff members working in any capacity.

When entering any housing unit of the opposite gender, the announcement shall be made by the housing unit officer, the housing control officer or the individual entering the housing unit themselves. Additionally, a logbook entry shall be made in each housing unit logbook indicating their presence on the housing unit and that the announcement was made. As an example, the logbook entry should read (something to the effect of) - Nurse Jane Doe on 3NW to administer medication. Opposite gender announcement made to the resident population upon nurse Jane Doe's entry to 3NW.

Analysis/Reasoning:

The facility does not conduct cross-gender strip searches absent exigent circumstance as per policy #2-14 (Searches and Control of Contraband). Four (4) were conducted in the past 12 months. Cross Gender Strip Searches in exigent circumstances, Male ERT staff was required to re-engage female offender in order to facilitate completion of the strip search procedure due to imminent risk of harm to facility staff or offender.

Interviews with officers, offenders, confirm this practice. All officers said they do not

conduct cross gender pat frisks or strip searches, however, the majority remember receiving training on how to conduct such searches. All inmates said they have never been searched by staff of the opposite gender. According to Staff, there would never be a time a female CO would not be available for a strip frisk of a female inmate. Interviews with all female offenders confirmed this practice. Female officers were available each day and on each tour.

WCCDOC does not permit cross gender pat down searches except in exigent circumstances as per Policy #2-14. None were conducted in the last 12 months. Female staff is always on duty; hence, female offenders are not restricted from programming or other out-of-cell opportunities.

Interviews with female inmates and COs confirmed this practice. Anytime a cross gender search is conducted, Policy #2-14 mandates its documentation. No cross gender searches were conducted. A memorandum requires a supervisor to be present anytime a transgendered inmate is searched for contraband.

WCCDOC 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 (this includes viewing via video camera). The Auditor conducted a review of the training curriculum on offender searches. Offenders (male and female) were asked if they had been pat searched or strip searched by a staff member of the opposite gender of the offender. Confined Persons informed the Auditor they had not been pat searched or strip searched by the opposite gender staff member. The Auditor conducted formal interviews with male and female staff members. Each staff member was asked if opposite gender announcements were being made in the housing units. A memo from the superintendent stated that "All staff of the opposite gender of their unit assignment will continue to announce their entrance into Inmate Living Areas, AND, they will also log their announcement, and entrance into the living area, each time they enter".

Each staff member informed the Auditor opposite gender announcements are being made when entering any opposite gender housing unit. The Auditor observed each PREA Logbook includes documentation that opposite gender supervisors are announcing their presence when entering offender housing units. The Auditor observed opposite gender announcements documented in post logbooks. This facility did not conduct any strip searches of inmates for the sole purpose of determining the inmate's genital status. Posters were seen throughout the facility.

Conclusion:

The Auditor conducted a review of WCCDOC policies and procedures, training curriculum, training attendance rosters, shift assignment rosters, post logbooks, interviewed staff, offenders and made observations. The Auditor concluded the WCCDOC staff had been appropriately trained (100% staff trained) to conduct cross-gender searches and how to make opposite gender announcements when entering housing units. Offenders have the ability to shower, change clothes and use the

	restroom with a level of privacy. The Auditor determined the WCCDOC meets the requirements of this standard.
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCCDOC Policy #02-14 Facility and Control, 01-06-2025 • WCCDOC Policy #05-02 Inmate Grievance Procedure, 09-16-2022 • WCCDOC Policy #05-04 Resident Orientation Program, 12/16/2024 • WCCDOC Policy #15-09 Reasonable Accommodation for Residents with Disabilities, 01/21/2025 • Inmate Handbook- English, Spanish & Master Braille Transcription • Contract Sign Language Interpreter, Office for People with Disabilities • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Random Staff Random Confined Persons <p>Auditor's Discussion:</p> <p>WCCDOC Policy #02-14</p> <p>Residents with Disabilities or Who have Limited English Proficiency</p> <p>1. Disabled Residents</p> <p>a. The Department shall take appropriate steps to ensure that residents with disabilities have an equal opportunity to benefit from all aspects of the department's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include: when necessary to ensure effective communication with residents who are deaf or hard of hearing - providing access to interpreters who can interpret effectively, accurately, and impartially.</p> <p>Note: Residents with disabilities include residents who are deaf, hard of hearing, blind, or have low vision and those who have intellectual, psychiatric, or speech disabilities.</p> <p>b. The department shall also ensure that written materials are provided in formats and methods that effectively communicate with residents with disabilities.</p> <p>c. Cross Reference with Policy 15-09 Reasonable Accommodations for Inmates with Disabilities</p> <p>2. Residents Who Have Limited English Proficiency</p> <p>The Department shall take reasonable steps to ensure meaningful access to all</p>

aspects of its efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who have limited English proficiency, including by providing interpreters who can interpret effectively, accurately, and impartially.

Cross Reference with Policy 15-03 Non-Discriminatory Treatment and Language Access Plan

3. Use of Resident Interpreters

The Department shall not rely on resident interpreters, readers, or other resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise a resident's safety, the performance of first responder duties, or the investigation of a resident's allegations.

WCCDOC #15-02 Inmate Grievance Procedure

16. If a grievant is non-English speaking, illiterate, or the issue of the grievance is too complex for the grievant to adequately present the grievance, the first level grievance coordinators (FLGC), upon request from the inmate, shall ensure that the grievant is assisted in the preparation of the written grievance. A grievant may seek assistance from other inmates, the law librarian, Supervisors, Officers and civilian staff.

WCCDOC #15-03 Non-Discriminatory Treatment

IV. Access to Communication and Accessibility Resources

1. American Sign Language (ASL) Interpretation

a. ASL interpreters from the County's Office for the Disabled will be available for incarcerated deaf or hard-of-hearing individuals to facilitate communication during medical visits, disciplinary hearings, educational programs, religious services, and other essential interactions.

b. Video Remote Interpreting (VRI) services will be provided when in-person ASL interpreters are unavailable.

2. TTY Phones & Video Relay Services (VRS)

a. TTY (Text Telephone) devices and Video Relay Services will be accessible to individuals who are deaf, hard of hearing, or have speech impairments.

b. Staff will be trained to assist individuals using these services while ensuring privacy and security.

3. Large Font & Braille Documents

a. Important facility documents, including inmate handbooks, grievance forms, and legal materials, will be available in large print and Braille upon request

b. Alternative accessible formats will be provided to ensure individuals with visual impairments can access necessary information.

V. Language Access for Individuals with Limited English-Proficiency (Lep)

1. Language Access Plan (LAP)

a. The Department's Language Access Plan will ensure meaningful access to all

LEP individuals' programs, services, and legal processes.

b. All staff will be trained on procedures for assisting non-English speakers in accessing interpretation services through the department's Language Line.

c. The department has designated the First Deputy Commissioner as the Language Access Coordinator

2. Interpretation & Translation Services

a. The department's Language Line will provide professional interpretation services for non-English-speaking individuals, including for medical care, disciplinary proceedings, and legal interactions.

b. Key facility documents, such as rules, grievance procedures, and emergency protocols, will be translated into commonly spoken languages (English and Spanish) within the facility population.

3. Bilingual Staff & Volunteer Resources

a. Whenever possible, bilingual staff and approved volunteers will be utilized to assist with communication needs.

b. Staff members will not rely on other incarcerated individuals to interpret confidential or critical situations. They shall only use resident interpreters, readers, or other types of resident assistants in extremely limited circumstances: when a delay in obtaining a qualified interpreter would compromise the resident's safety, the performance of first responder duties, or an investigation.

WCCDOC Policy #05-04 Resident Orientation Program

III, Orientation Content

A. Resident Handbook

3. The Resident Handbook will be available in English and Spanish and, under the Department's Language Access Plan, in other languages based on need.

4. If a resident cannot read, the information in the handbook must be read to the resident by a staff member.

5. The Resident Handbook will be reviewed annually and revised as needed.

6. At a minimum, the Resident Handbook should include the following material:

- Resident's Bill of Rights; How to report misconduct;
- How to access medical and mental health care;
- Resident grievances; Disciplinary Code;
- Program and services information; and
- Information related to the Prison Rape Elimination Act and the Department's zero tolerance of sexual abuse or sexual harassment

B. Resident Orientation Videos

Designated Program Unit staff shall ensure that all new admissions can participate in the interactive orientation sessions. These sessions will include a 30-minute informative video presentation divided into two sections. Videos are available in English, Spanish, and American Sign Language and include close captioning.

Section 1 (15 minutes): The department's video shall include but not be limited to the following education:

- Description of facility rules and regulations;
- Expected behavior;
- Housing unit and cell cleanliness;
- The Disciplinary code;
- Sick call procedure and access to medical, mental health, and dental services;
- The grievance procedure;

Section 2 (15 minutes): Education from the PREA resource center, which includes the following education:

- Agency's zero-tolerance policy regarding sexual abuse and sexual harassment.
- How to report incidents or suspicions of sexual abuse or sexual harassment.
- Rights to be free from sexual abuse and sexual harassment.
- Free from retaliation for reporting such incidents.
- Agency policies and procedures for responding to such incidents.

WCCDOC Policy #15-09 Reasonable Accommodation for Residents with Disabilities

II. Policy

The Westchester County Department of Correction is committed to ensuring that all individuals with disabilities are provided meaningful access to correctional programs, services, and activities. No incarcerated individual shall be excluded from participation in, denied the benefits of, or subjected to discrimination based on a disability.

IV. PROCEDURE

4. Types of Accommodations

Examples may include but are not limited to:

- A. Accessible housing units and restrooms
- B. Mobility aids (e.g., wheelchairs, canes)
- C. Sign language interpreters or communication devices
- D. Modified work assignments or program participation
- E. Access to prescribed medical devices or therapy
- F. Alternative formats for written material

Analysis/Reasoning:

WCCDOC Policy #15-09 (Reasonable Accommodations for Inmates With Disabilities) takes appropriate steps to make sure that inmates with disabilities have an equal opportunity to participate in all efforts to prevent, detect and respond to sexual abuse and harassment. Services for non-speaking English inmates, as well as inmates with hearing impairments, are provided. Written materials are provided to ensure effective communication for all inmates. Notices are posted in Spanish. The inmate handbook, which provides information on PREA, is available in Spanish. There is also a Spanish speaking grievance assistant as per Policy #15-02. An inmate admission form was

	<p>provided as documentation for inmates receiving the handbook, wherein the officer discussed PREA and the disciplinary policy. Interviews with staff confirmed this practice. The interpreter was available within 24 hours of the request.</p> <p>In the past 12 months, there were zero (0) number of instances where offender interpreters, readers, or other types of offender assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the resident's safety, the performance of first-response duties under § 115.64, or the investigation of the resident's allegations.</p> <p>Conclusion:</p> <p>The Auditor concluded the agency provides information that ensures equal opportunity to offenders who are disabled. The facility takes reasonable steps to ensure meaningful access to all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment are provided to offenders who are Limited English proficient and those who are disabled. The Auditor conducted a thorough review of the agency's OP's, procedures, offender handbook, intake information, posters that were posted, has a contract with Sign Language Interpreter, Office for People with Disabilities. LEP interview was conducted with the use of an interpreter, and the Language is provided for a variety of services. Interviews with staff, offenders and observations were made to determine the agency meets the requirements of this standard.</p>
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115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Security and Control, 01-06-2025 • WCDOC Policy #07-04 Security Clearance for Civilians and Volunteers, 02-28-2025 • WCDOC Policy #07-19 Special Investigation Unit (Internal Affairs Squad) 11-09-2018 • WCDOC Policy #05-04 Resident Orientation Program 12/16/2024 • Executive Order NO 7 of 2002 • Executive Order NO 8 of 2002 • County Background Investigation Policy • Prison Rape Elimination Act of 2003 Notice and Disclosures • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Administrative (Human Resources) Staff <p>Auditor's Discussion:</p>

WCDOC Policy #02-12 Security and Control

4. Hiring and Promotion Practices

- a) The department shall not hire or promote anyone who may have contact with residents or retain the services of any contractor who may have contact with residents, who-
1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; or
 2. Has been convicted of, or civilly or administratively adjudicated for, engaging or attempting to engage in sexual activity in the community facilitated by force, threats of force, or coercion, or if the victim did not consent or was unable to consent.
- b) The department shall consider any incidents of sexual harassment in determining whether to hire or promote anyone or to retain the services of any contractor who may have contact with residents.
- c) Before hiring a new employee, who may have contact with residents, the department shall:
1. Perform a criminal background records check; and
 2. 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.

WCDOC Policy #07-04

I. Policy

To promote standardized guidelines for granting security clearance to civilian applicants and/or volunteers through appropriate background screening. Background investigations of civilian and/or volunteer applicants shall be as thorough as is necessary to make an informed evaluation and determination to ensure the safety and security of the institution. Background investigations shall include at a minimum criminal history searches, fingerprinting of applicants, and the collection of physical descriptive data of every civilian and/or volunteer applicant(s).

II. Procedure

- A. The Special Investigation Unit shall conduct background investigations and fingerprinting at the Department of Correction, (prior to issuing security clearances and Department identification cards to civilian/volunteer applicants).
- B. At the time of fingerprinting, the following original documents must be produced by the civilian/volunteer applicant to the Special Investigation Unit for verification with no exceptions:

WCDOC Policy #07-19

III. General Squad Functions

- A. Conduct pre-employment and pre-access inquiries (including searches of criminal records) on individuals seeking employment with or official access to the Department and determine whether such individuals appear suitable for access to the facility and

its population. Information obtained from such inquiries shall be forwarded to appropriate agencies and entities, including WCDOC's Hiring Board and/or other administrators.

B. Conduct reviews of employees regarding their suitability for promotion to higher ranks, and forward such information to WCDOC's Promotion Board and/or other administrators;

Executive Order NO 7 • 2002

1. The Westchester County Commissioner of Human Resources enter into an agreement with the New York State Division of Criminal Justice Services, at the earliest possible date, to receive the criminal history reports of prospective applicants for employment in the competitive class of the civil service of the County of Westchester; and

2. Subsequent to the effective date of the agreement referred to above, all prospective applicants for employment in the competitive class of the civil service of the County of Westchester be fingerprinted for the purpose of procuring a criminal history report from the New York State Division of Criminal Justice Services. This Executive Order shall be effective immediately and shall remain in full force and effect until otherwise suspended or revoked.

Executive Order NO 8 of 2002

WHEREAS, the County of Westchester is committed to ensuring that all County employees to be appointed to the position of Commissioner, Deputy Commissioner, Director, Deputy Director, Department Head, or any other appointment to be included at the discretion of the County Executive are properly trained, educated and otherwise suitable for the position for which they have been hired.

(1) the following Background Investigation Policy be implemented; (2) the policies and procedures set forth therein be complied with by the appointed County employees; (3) the Background Investigation Policy be disseminated to the appropriate County officers and employees; and (4) the County's policy take effect immediately.

County Background Investigation Policy

I. Purpose:

This policy has been established to create a procedure for employment background investigations for candidates to be appointed to the position of Commissioner, Deputy Commissioner, Director, Deputy Director, Department Head, or any other appointment to be included at the discretion of the County Executive, in Westchester County Government.

Analysis/Reasoning

WCDOC does not hire, promote or contract with anyone who has engaged in sexual abuse in their facility, in another facility or in the community. All incidents of sexual

harassment are considered in the decision to hire or promote. A civilian and officer background investigation, inclusive of a PREA screening, were provided to the auditors as documentation.

Background checks are performed on anyone who is hired or contracted to provide services to WCDOC. A PREA Notice and Required Disclosure form, which all employees must sign, was provided as documentation to the auditors. A Request for Applicant's Employment Record form was also provided as documentation to the auditors, which includes a section that inquires about substantiated instances of sexual misconduct.

Wellpath Health Services employees (i.e. medical/mental health staff) must also answer questions in regard to sexual misconduct or sexual harassment during their application process. PREA screenings are conducted prior to promotion. A promotion summary sheet, inclusive of a PREA screening, was provided as documentation to the auditors. All employees sign a PREA-related information form, which mandates reporting of any involvement in sexually-related abuse cases.

The civilians sign a Civilian Code of Conduct, as per Policy #7-04 (Security Clearance for Civilians/Volunteers), which mandates them to report such behavior as well. Prospective employees are required to report any incidents during the hiring process and staff are required to report any incidents that occurred while employed. A denied security clearance, based on a sexual offense, was provided as documentation to the auditors. WCDOC's Special Investigation Unit (SIU) is notified if an employee, contractor, or volunteer was arrested.

Interviews with the Captain of SIU indicated that everyone - employees, contractors and volunteers - are fingerprinted through E-Justice. WCDOC is notified within one day if they were arrested. Hence, monitoring for sexual misconduct is ongoing. During the hiring and promotional process, prior incidents of sexual harassment/abuse are considered. Staff are asked about prior misconduct and have an affirmative duty to report any misconduct. WCDOC can provide information to a new facility about a prior employee, in regard to misconduct issues, if there is a signed release. This is in accordance with NYS employment law.

Conclusion:

In the past 12 months, there were sixteen (16) number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates. The Auditor concluded the WCDOC is performing appropriate practices to identify previous acts of sexual misconduct prior to hiring staff and enlisting the services of contractors, and before promoting staff members. The Auditor did a record review of (12) random employees to check for standards compliance in the hiring process. The files review shows PREA compliance. The Auditor conducted a thorough review of the agency's policies, procedures, employee records, contractor records, Backgrounds Investigation Questionnaire, Confidential Summary Background Investigation Report, Employment Application, Criminal History Background Check Tracking, and interviewed staff and contractors to determine the agency meets the requirements of this standard.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Security and Control, 01-06-2025 • Memo re: Upgrades 01-25-2025 • Interviews: Warden <p>Auditor’s Discussion:</p> <p>WCDOC Policy #02-12 Security and Control</p> <p>At least once every year, and in collaboration with the PREA Coordinator, the Department shall assess whether adjustments are needed to the staffing plan and the deployment of video monitoring systems and other technologies.</p> <p>Analysis/Reasoning:</p> <p>Per a memo dated January 1, 2025, “On May 17, 2012, the United States Department of Justice (DOJ) released a final rule to prevent, detect and respond to sexual abuse in confinement facilities, in accordance with the Prison Rape Elimination Act of 2003 (PREA). One of the PREA standards set forth in the final rule and applicable to the Department of Correction relates to planned upgrades to our physical plant and technological systems and states:</p> <p>(a) When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse.</p> <p>(b) When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse.</p> <p>In an effort to comply with the foregoing regulation, which took effect on August 15, 2013, the Department of Correction respectfully requests that future capital projects or other significant modifications to its physical plant and information/security systems contain an analysis of these considerations. Chief of Administrative Services, James Birrittella (Capital Projects) and Leandro Diaz (PREA Coordinator) should be contacted as part of any design/modification process and will be responsible for monitoring/documenting our compliance with this regulation.</p> <p>Conclusion:</p> <p>This facility is equipped with a video monitoring/electronic surveillance system that is suitable for appropriate protection to protect offenders from sexual abuse. This auditor finds this standard compliant.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Security and Control, 01-06-2025 • WCDOC Policy #07-19 Special Investigation Unit (Internal Affairs Squad) 11-09-2018 • WCDOC Policy #02-03 Crime Scene Management 03/07/2013 • § 620.01. Legislative Authority. • MOU: Westchester County Health Care Corporation ("WCHCC") • Interviews: <ul style="list-style-type: none"> Deputy Commissioner PREA Compliance Manager Random Staff <p>WCDOC Policy #02-12</p> <p>G. Investigations of Incidents</p> <p>13. Evidence Protocol and Forensic Medical Exams</p> <p>a) To the extent the department is responsible for investigating allegations of sexual abuse; it shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. When warranted, the department will use the Westchester County Department of Public Safety for evidence collection.</p> <p>b) The department shall offer all victims of sexual abuse access to forensic medical examinations, without financial cost to the victim, where evidentiarily or medically appropriate. Such examinations shall be performed at the Westchester Medical Center FACT Team.</p> <p>WCDOC Policy #07-19</p> <p>I. AUTHORITY</p> <p>A Special Investigation Unit (SIU) - Internal Affairs Squad (IA) shall operate at the Westchester County Department of Correction (WCDOC) pursuant to this policy and separate and apart from the SIU- Major Case Squad (which operates pursuant to P&P 07-40).</p> <p>SIU-IA shall function as the administrative investigative arm of the Commissioner of Correction and I or Commissioner's designee and shall operate outside of WCDOC's traditional chain-of-command.</p> <p>In the performance of their assigned duties, staff assigned to SIU-IA function on the direct authority of the Commissioner of Correction to perform administrative investigations into acts of misconduct and/or corruption on the part of WCDOC staff, affiliates and inmates, and other appropriate matters (such as background investigations).</p>

II. PURPOSE

A. To promote the integrity, security, and public reputation of the Department and individuals affiliated with its operations.

B. To gather facts, evidence, and documentation that support administrative findings for action or decision-making by the Commissioner of Correction.

C. To promote the highest standards of ethical behavior and professional conduct of individuals affiliated with Department operations.

IV. Specific Investigative Functions of Squad

SIU-IA shall specifically be designated and authorized to conduct official administrative investigations in the following areas:

A. Any matter deemed necessary or otherwise approved by the Commissioner of Correction;

B. Any violation of the Department's Code(s) of Conduct (sworn and civilian);

H. Any alleged sexual abuse or sexual harassment of by or against an inmate (PREA), or other individual affiliated with WCDOC;

WCDOC Policy #02-03

II. POLICY

It shall be the policy of the Westchester County Department of Correction (WCDOC) that all staff assigned to a crime scene area preserves all physical evidence that may lead to the identification, prosecution and conviction of the perpetrator.

The Westchester County Department of Public Safety (WCDPS) has primary responsibility to conduct investigations into crimes committed on Westchester County property, including the WCDOC. It is WCDOC policy to assist the WCDPS in conducting these investigations. The WCDOC is responsible to recognize and preserve potential evidence and crime scenes as part of the law enforcement effort to prosecute crimes committed at this facility.

3. The Following Incidents are Typical Crime Scenes:

a. Any inmate death regardless of circumstance (Homicide, Suicide, Natural Causes if not occurring at the Westchester Medical Center, etc.).

b. The death of any person on WCDOC property.

c. Serious Assaults or Physical Altercations resulting in Serious Physical Injury, whether caused by or inflicted upon a staff member or inmate.

d. Sexual Assaults.

C. Physical Evidence- any articles and/or materials which are found in connection with an investigation and which aid in establishing the identity of the perpetrator or the circumstances under which the crime was committed, or which, in general, assist in the discovery of the facts. Types of evidence may include, but are not limited to, the following:

1. Clothing:

- a. At the scene;
- b. On the victim; or
- c. On the suspect.
2. Blood, Semen, or other Body fluids;
3. Fingerprints;
4. Weapons;
5. Rope;
6. Shoe Impressions;
7. Hair;
8. Tool Marks;
9. Documents; or
10. Firearms and Ammunition.

D. Preservation of evidence- is the process of recognizing and securing a crime scene, so that no items of evidence or potential evidential value are unduly disturbed prior to the implementation of proper collection of evidence procedures.

E. Chain of custody- is a continuous record of all persons who had contact or possession of a particular piece of evidence, from the person who first discovered it, to each individual who may have touched the evidence consistent with P&P 02-01 Chain of Evidence and Contraband Storage.

H. WCDPS Response - The responding WCDPS personnel shall assess the scene and contact WCDPS detectives as deemed appropriate. The responding detectives will contact the WCDPS Crime Scene Technicians following WCDPS protocol.

I. Turn Over Control of the Scene to Arriving WCDPS Personnel.

4. The WCDPS Crime Scene Technicians are responsible for processing the scene which may include the following:

- a. Conducting a scene assessment.
- b. Sketching and measuring the scene.
- c. Photographing and/or videotaping the scene.
- d. Collecting, documenting, and packaging evidence.
- e. Conducting a systematic search of the area for evidence.

5. Remain at the scene until properly relieved.

L. Releasing the Scene - Once a crime scene is identified it must be preserved intact until explicitly released by WCDPS detectives. Document the date, time, and name of the person releasing the scene and notify the Shift Commander that WCDPS has released the scene.

Analysis/Reasoning:

The Westchester County Police Department of Public Safety (WCPDPS) investigates all criminal acts that take place on facility grounds as per the Westchester County Code, Chapter 620, Parkway Police, Sec 620.01, Legislative Authority. They are responsible for the enforcement of law and order, and they have jurisdiction over criminal investigations at the WCDOC. WCDOC follows their protocol on evidence collection. A

detective from WCPDPS is based within WCDOC, assigned full-time to SIU.

The protocol for the Westchester County Department of Public Safety is followed in regard to conducting sexual assault forensic examinations, which are completed at Westchester Medical center. Interviews with COs and the Deputy Commissioner confirmed this practice.

Westchester County has entered into a contract with the Forensic Acute Care Team (FACT) at Westchester Medical Center (WMC) to serve all suspected victims of sexual assault.

FACT is a team of experienced, highly qualified, and compassionate physicians and nurses available 24/7 to offer various aspects of medical and/or forensic care to victims presenting with concerns for recent (within 96 hours) sexual abuse or assault. The Westchester Medical Center has earned the designation as a Center of Excellence from the New York State Department of Health (NYS DOH). As the County's first 24-hour Sexual Assault Forensic Examiner Program to achieve this honor, the Westchester Medical Center, which includes the Maria Fareri Children's Hospital, is the go-to source for the care of suspected victims of sexual assault.

WMC is one of only five hospitals statewide designated by the NYS DOH as a Center of Excellence for both pediatric and adult sexual assault patients. This prestigious designation supports the prior decision by County Executive Astorino to provide this vitally important program with more than \$100,000 in funding through the Westchester County Office for Women.

To assure all suspected sexual assault victims throughout Westchester receive expert, compassionate and timely services free of charge, please refer any suspected victim of sexual assault to FACT at WMC as soon as the alleged incident is reported.

Victims presenting with suspected sexual assault can be transported, without cost to them, via ambulance to WMC for specialized, state of the art forensic and medical care from a compassionate team of nurses and physicians. Patients can obtain preventive STD and HIV treatment, forensic rape exams, as well as appropriate referrals for mental health and patient advocacy services.

Within the past 12 months, WCDOC had four (4) forensic medical exams conducted.

Within the past 12 months, WCDOC had four (4) exams performed by SAFEs/SANEs and zero (0) performed by a qualified medical practitioner.

Conclusion:

The agency is utilizing an appropriate uniformed evidence protocol to maximize the potential for usable physical evidence. The facility makes victim advocates available to victims of sexual abuse and ensures access to a forensic examination performed by a certified Sexual Abuse Nurse Examiner. The Auditor reviewed the WCDOC policies, procedures, Memorandums of Understanding, and conducted interviews with staff, SANE, and Victim Advocate. The Auditor determined the agency meets the requirements of this standard.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Security and Control, 01-06-2025 • WCDOC Policy #02-43 Reporting Criminal Activity 02-19-2025 • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Facility Investigator Random Staff <p>Auditor’s Discussion:</p> <p>WCDOC Policy #02-12</p> <ol style="list-style-type: none"> 1. The department shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. 2. It is the department's policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to the department's Special Investigations Unit and the Westchester County Department of Public Safety. 3. When the department conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. 4. Where sexual abuse is alleged, the department shall use investigators who have received special training in sexual abuse investigations pursuant to Section 6. A. (Employee Training) of this policy. 5. Investigators shall 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. 6. When the quality of evidence appears to support a criminal prosecution, the department shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle to subsequent criminal prosecution. (Garrity Protections) 7. The credibility of an alleged victim, suspect, or witness shall be assessed individually and shall not be determined by the person's status as resident or staff. The department shall not require a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation. 8. Administrative investigations <ol style="list-style-type: none"> 1. Shall include an effort to determine whether staff actions or failures to act contributed to the abuse and 2. Shall be documented in written reports, including a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and

investigative facts and findings.

9. Criminal investigations

Shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible; and

10. The department shall retain all written reports required by this section for as long as the alleged abuser is incarcerated or employed by the department. plus five years.

11. The departure of the alleged abuser or victim from the employment or control of the facility or department shall not provide a basis for terminating an investigation.

12. When other agencies investigate sexual abuse, the department shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

13. Evidence Protocol and Forensic Medical Exams

a) To the extent the department is responsible for investigating allegations of sexual abuse; it shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. When warranted, the department will use the Westchester County Department of Public Safety for evidence collection.

b) The department shall offer all victims of sexual abuse access to forensic medical examinations, without financial cost to the victim, where evidentiarily or medically appropriate. Such examinations shall be performed at the Westchester Medical Center FACT Team. (See Agreement between the County and the Westchester Medical Center)

WCDOC Policy #02-23

I. Purpose

To outline the procedures to be followed by Westchester County Department of Correction staff in evaluating the need to refer for criminal investigation possible violations of criminal law that occur in the facility.

III. Procedure

When an obviously criminal activity has taken place the on-duty Shift Commander will ensure that the appropriate reports are completed. The Shift Commander or Sector Sergeant will supervise completion of the reports, and notify the Westchester County Department of Public Safety (W.C.D.P.S.) main desk. At this time the contacting supervisor will request the Valhalla Campus sector car and the W.C.D.P.S. incident number (if available). The W.C.D.P.S. incident number will be entered on all pertinent forms as a control number. If the form does not have a dedicated space for the entry of the incident number it will be placed in the upper right hand corner as "WCDPS#109".

B. The following incident types will be immediately reported to the senior divisional administrator on duty:

1. Physical / Sexual Assaults

	<p>D. Should a staff member have a reasonable suspicion that an employee may be involved in criminal activity they shall file a "Request for Special Investigation" pursuant to the Department Special Investigations Policy. All special investigations will be directed through the office of the Commissioner and conducted only with the approval of the Commissioner. No employee shall involve themselves in any unauthorized, off duty investigation, where the employee's activity is unknown to any law enforcement agency and may bring discredit upon the Department.</p> <p>Analysis/Reasoning:</p> <p>WCDOC conducts an administrative review for all allegations of sexual abuse and sexual harassment as stated WCDOC Policy #02-12. During the past 12 months, WCDOC received (105) number of allegations of sexual abuse or sexual harassment received. During the past 12 months, (91) number of allegations resulted in an administrative investigation. During the past 12 months, (4) number of allegations resulted in criminal investigation. This policy is available on the WCDOC website. The Auditor conducted formal interviews with offenders who made allegations of sexual abuse. The Auditor asked each if they spoke to an investigator after making the allegation. Each informed the Auditor they did speak to an investigator. The Auditor asked each how long it took before the investigator met with them. Each offender stated they met with the investigator quickly.</p> <p>Conclusion:</p> <p>The Westchester County Department of Public Safety investigates all criminal acts that take place on facility grounds as per the Westchester County Code, Chapter 620 Parkway Police, Sec 620.01 Legislative Authority (the county charter with the Westchester County Department of Public Safety). A copy of Chapter 620 was provided to the auditors as documentation. An interview with the Commissioner confirmed this practice. All local and state laws are followed in regard to criminal investigations of sexual assault cases. All federal laws are followed in regard to criminal investigations of sexual assault cases.</p> <p>WCDOC meets this standard; policies for internal and external investigations regarding sexual abuse and/or sexual harassment are in place.</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy 2-12 Sexual Assault/ Harassment (PREA Compliance) 01/06/2025 • PREA Training PowerPoint • PREA Training Plan • PREA Notice and Disclosure Forms

- Interviews:
Warden
PREA Compliance Manager
Random Staff
Random Confined Persons

Auditor's Discussion:

WCDOC Policy #02-12

VII. Training and Education

The Department is committed to communicating to the residents at its jail, to its employees, and to contractors and volunteers the following information through the training, education, and orientation programs described in this section:

- The department's zero-tolerance policy;
- The department's policies to prevent, detect, and respond to sexual abuse and sexual harassment; and
- Other rights and obligations under this policy.

A. Employee Training

1. The department shall train all employees who may have contact with residents on:
 - a) Its zero-tolerance policy for sexual abuse, sexual harassment, and retaliation;
 - b) How to fulfill their responsibilities regarding prevention, detection, reporting, and response to sexual abuse and sexual harassment;
 - c) Resident's right to be free from sexual abuse and sexual harassment;
 - d) The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
 - e) The dynamics of sexual abuse and sexual harassment in confinement;
 - f) The common reactions of sexual abuse and sexual harassment victims;
 - g) How to detect and respond to signs of threatened and actual sexual abuse;
 - h) How to avoid inappropriate relationships with residents;
 - i) How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents;
 - j) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.
2. Security staff employees shall be trained in how to conduct cross-gender pat-down searches and how to conduct searches of transgender and intersex residents professionally and respectfully, and in the least intrusive manner possible, consistent with security needs.
3. Training shall be tailored to the gender of the residents at the employee's facility. The employee shall receive additional training if reassigned from a facility that houses only male Residents to a facility that houses only female residents or vice versa.
4. All current employees shall receive this training, and the department shall provide each employee with refresher training every two years to ensure that all employees know the department's current sexual abuse and sexual harassment

	<p>policies and procedures. In the years when an employee does not receive refresher training, the department shall provide information on current sexual abuse and sexual harassment policies.</p> <p>Analysis/Reasoning:</p> <p>WCDOC Policy #02-12 states that all WCDOC employees who may have contact with inmates will be trained on all of the enumerated PREA training curriculum requirements. Employees receive training on PREA requirements at least once a year during annual refresher training, Norwood E. Jackson Correctional Facility. WCDOC employs agency directives to provide employees with information about current policies regarding sexual abuse and agency directives to provide employees with information about current policies regarding sexual abuse and harassment. Staff demonstrated their knowledge about the importance of PREA during the interviews.</p> <p>Conclusion:</p> <p>There are (807) 100% of staff currently employed by the facility, who may have contact with residents, who were trained or retrained on the PREA requirements enumerated. Facility records verify that all employees interviewed had PREA training. I find WCDOC in compliance with this standard.</p>
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115.32	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy 2-12 Sexual Assault/ Harassment (PREA Compliance) 01/06/2025 • WCDOC Civilian Handbook • PREA PowerPoint Training Curriculum • Interviews: <ul style="list-style-type: none"> PREA Coordinator PREA Compliance Manager Intake Staff Random Confined Persons <p>Auditor's Discussion:</p> <p>WCDOC #02-12</p> <p>WCDOC #02-12 designates that all contractors and contract employees, volunteers, and interns shall receive orientation and periodic in-service training consistent with their level of incarcerated individual contact relating to the prevention, detection, and response to sexual abuse and sexual harassment.</p>

Overview of Inmate Sexual Abuse and Excessive Force

Consistent with the law, the department maintains a zero-tolerance policy regarding sexual abuse, sexual harassment and excessive force against inmates. If you believe an inmate has been subject to any of these acts while in DOC custody, contact our Special Investigation Unit by calling(914) 231-1128.

New York Penal Law defines "sexual contact" as any touching of the sexual or other intimate parts of a person for the purpose of gratifying sexual desire of either party, and includes the touching of the actor by the victim, as well as the touching of the victim by the actor, whether directly or through clothing.

New York Penal Law states that an inmate in a local jail is incapable of consent to sex or sexual contact with an employee. The term 'employee' includes all DOC employees and anyone else who provides any services to our inmates (including vendors, volunteer, medical staff, counselors and educators).

Analysis/Reasoning:

The PREA training for WCDOC volunteers and contractors includes their zero tolerance policy (Policy# 2- 12). The civilian handbook, which is provided to all volunteers and contractors, includes the required information about PREA. An interview with a contractor confirmed that he was trained in responsibilities, prevention, detection and response as it relates to PREA. According to the Pre-Audit Questionnaire, in the past 12 months, (363) numbers of volunteers and contractors have received training on these policies.

Conclusion:

Documentation of training was provided to the auditors that included signed sheets by volunteers and contractors acknowledging PREA training. Such staff must also read the PREA 2003 Notice and Required Disclosure form. WCDOC meets this standard: All contractors and volunteers have been trained since the PREA standards took effect.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews and Other Evidence Reviewed <ul style="list-style-type: none">• WCDOC Policy #05-04 Resident Orientation Program 12/16/2025• WCDOC Policy 2-12 Sexual Assault/ Harassment (PREA Compliance) 01/06/2025• New York Correct Care Solutions (NYCCS) Westchester County Department of Correction

Policies & Procedures Title: HCD-120_E-02 Receiving Screening --Westchester NY
Reference: 50686 12/16/2024

- Interviews:
Warden
PREA Compliance Manager
Intake Staff
Random Inmates

Auditor's Discussion:

WCDOC Policy #05-04

II. Procedure

6. Program Unit staff are to utilize the Resident Orientation Sign-In Sheet (See attached) to document the attendance of all participants and any refusals. Residents refusing to attend orientation sessions shall not be subject to discipline.
7. Each resident must provide a signature on the sign-in sheet to acknowledge that they received and understand the materials provided.
8. The Department shall make best efforts to offer all residents an orientation session within two (2) business days of arrival but no later than thirty (30) days of admission.
9. Program Unit staff shall ensure that residents whose placement in special housing (e.g., SHU, PC housing, Hospital) precludes their receiving orientation with other new admissions are afforded the same presentation at another appropriate time.
11. Residents needing assistance during orientation shall be provided with appropriate accommodations. Such assistance may include, but is not limited to, the provision of sign language interpreters, foreign language interpreters, assistance to illiterate prisoners, and accommodation for physical or mental disability.

WCDOC Policy #2-12

B. Resident Orientation and Education

1. During the intake process, residents shall receive information explaining the department's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.
2. Within 30 days of intake, the department's Program Unit shall provide comprehensive education to residents, either in person or through video, regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents and department's policies and procedures for responding to such incidents.
3. The department shall provide resident education in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, and residents with limited reading skills.
4. The department shall maintain documentation of resident participation in these education sessions.
5. In addition to providing such education, the department shall ensure that key

information is continuously and readily available or visible to Residents through posters, handbooks, or other written formats.

6. Refer to Resident Education Brochure. Informational Signage. and Resident Handbook

E. Residents with Disabilities or Who have Limited English Proficiency

1. Disabled Residents

a) The Department shall take appropriate steps to ensure that residents with disabilities have an equal opportunity to benefit from all aspects of the department's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include: when necessary to ensure effective communication with residents who are deaf or hard of hearing - providing access to interpreters who can interpret effectively, accurately, and impartially.

Note: Residents with disabilities include residents who are deaf, hard of hearing, blind, or have low vision and those who have intellectual, psychiatric, or speech disabilities.

b) The department shall also ensure that written materials are provided in formats and methods that effectively communicate with residents with disabilities.

c) Cross Reference with Policy 15-09 Reasonable Accommodations for Inmates with Disabilities

2. Residents Who Have Limited English Proficiency

The Department shall take reasonable steps to ensure meaningful access to all aspects of its efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who have limited English proficiency, including by providing interpreters who can interpret effectively, accurately, and impartially.

Cross Reference with Policy 15-03 Non-Discriminatory Treatment and Language Access Plan

NYCCS Westchester County Department of Correction Policies & Procedures Title: HCD-120_E-02

5.9.6. Diabetic Flow Sheet - If an offender with diabetes is admitted a finger stick should be performed. The Diabetic Flow Sheet should be implemented to document the results. The form should be brought to the clinic area and placed in the treatment book for his housing location.

5.9.7. Daily Treatment Record- This form should be implemented for offenders who require scheduled weight checks, nebulizer treatments, blood pressure checks and other treatments/monitoring. The form should be brought to the clinic area and placed in the treatment book for his housing location.

5.9.8. Authorization For Release of Information - This form is to be completed if an offender's health information (including medication verification) is being requested from an outside health agency.

5.9.9. Refusal of Treatment (English and Spanish)- This form is used to document the

refusal of services.

5.9.10. Offender Medical Clearance Request - This form is used if it is determined to be in need of services beyond that required at the jail.

5.9.11. CIWA Performance - This form is used to document CIWA screening for offenders entering the jail who have a potential for withdrawing from alcohol.

5.9.12. COWS Performance - This form is used to document COWS screening for offenders entering the jail who have a potential for withdrawing from opiates.

5.9.13. Problem List - This form is to be used to document long and short term health problems that an offender may have. It is also used to document the PPD testing process. This form is to be maintained in the offender's health record

5.9.14. Screening Exceptions - This form is used to document the reasons that the receiving process could not be completed for a particular offender.

5.9.15 Sexual Assault Awareness for Offenders - This form is to be reviewed with the offenders to ensure compliance with the Prison Rape Elimination Act (PREA).

Analysis/Reasoning:

Per WCDoc Policy #02-12 all inmates arriving at WCDoc through intake must receive information about the agency's zero tolerance policy and how to report incidents or suspicions of sexual abuse or harassment. The intake form is signed by the inmate and maintained by the agency as documentation of the inmate's PREA education.

Sixteen (16) random residents were interviewed and all indicated that they had been given PREA training within 1-2 days of arriving at WCDoc. Everyone is taken through PREA training each time new residents arrive at the facility. Additionally, the residents are shown a PREA video during orientation. There were (3128) residents admitted during the past 12 months who were given this information at intake.

There were (1597) number of those inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

Conclusion:

WCDoc is in compliance with this standard based on auditors' interviews of supervisory staff, a review of Inmate Handbook, signed forms from inmates and applicable policies and procedures.

115.34 Specialized training: Investigations

Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #2-12 Sexual Assault/ Harassment (PREA Compliance) 01/06/2025 • Annual PREA Investigator Training Plan/Powerpoint • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Facility Investigator <p>WCDOC Policy #2-12</p> <p>A. Employee Training:</p> <p>5. Specialized Training Investigators</p> <p>a) In addition to the general training provided to all employees, the department shall ensure that, to the extent, it conducts sexual abuse investigations; its investigators have received training in conducting such investigations in confinement settings.</p> <p>b) Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence</p> <p>c) Required to substantiate a case for administrative action or prosecution referral.</p> <p>d) See Training Certifications</p> <p>Analysis/Reasoning:</p> <p>WCDOC conducts its own investigations of allegations of sexual abuse, and WCDOC Policy #02-12 requires all investigators to be trained in sexual abuse investigations in confinement settings. Nine (9) investigators currently employed at WCDOC and completed the required PREA training.</p> <p>Conclusion:</p> <p>Auditor finds WCDOC in compliance of this standard based on review of WCDOC Policy #02-12, review of investigators' training records, and interview with the Investigator.</p>
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115.35	<p>Specialized training: Medical and mental health care</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #2-12 Sexual Assault/ Harassment (PREA Compliance) 01/06/2025 • Interviews:
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Warden
 PREA Compliance Manager
 Medical Staff
 Mental Health Staff

Auditor's Discussion:

WCDOC Policy #2-12

A. Employee Training

6. Specialized Training: Medical and Mental Health Professionals

The department's medical provider shall ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facility have been trained in:

- a) How to detect and assess signs of sexual abuse and sexual harassment;
- b) How to preserve physical evidence of sexual abuse;
- c) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and
- d) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

Analysis/Reasoning:

One hundred percent (100%) of WCDOC medical and mental health care practitioners who work regularly at the facility, all of whom have received the agency's required PREA training in accordance with WCDOC Policy #02-12.

WCDOC ensures that all medical and mental health workers are trained in detecting and assessing signs of sexual abuse/harassment, in preserving physical evidence of sexual abuse, in responding effectively and professionally to victims of sexual abuse/harassment, and in reporting allegations of suspicion regarding sexual abuse/harassment. All contractors attended a civilian orientation, which included PREA training. WCDOC's medical staff does not conduct forensic examinations.

Conclusion:

This Auditor finds WCDOC compliant with this standard based on interviews of medical and mental health staff, random inmates receiving medical and mental health care, review of training documents of staff interviewed, and perusal of relevant policies and procedures.

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

Policy, Materials, Interviews and Other Evidence Reviewed

- WCDOC Policy #2-12 Sexual Assault/ Harassment (PREA Compliance) 01/06/2025
- Mental Health Intake Screening Form
- Psychological Evaluation Initial Screening
- Medical History Intake Screening Form
- Interviews:
 - Warden
 - PREA Compliance Manager
 - Staff Responsible for Risk Screening
 - Random Confined Persons

Auditor's Discussion:

WCDOC Policy #2-12

F. Screening of Residents

1. Screening for risk of victimization and abusiveness

- a) All residents will be screened using an objective instrument, the department's PREA Risk Screening Form, for their risk of being sexually abused by other residents or for being sexually abusive towards other residents.
- b) Intake screening shall ordinarily occur within 72 hours of arrival at the facility.
- c) Such assessments shall be conducted using an objective screening instrument.
- d) The intake screening shall consider, at a minimum, the following criteria to assess residents for risk of sexual victimization:
 1. Whether the resident has a mental, physical, or developmental disability;
 2. The age of the resident;
 3. The physical build of the resident;
 4. Whether the resident has previously been incarcerated;
 5. Whether the resident's criminal history is exclusively nonviolent
 6. Whether the resident has prior convictions for sex offenses against an adult or child;
 7. Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
 8. Whether the resident has previously experienced sexual victimization;
 9. The resident's perception of his or her vulnerability to sexual abuse or sexual harassment; and
 10. Whether the resident is detained solely for civil immigration purposes.
- e) The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and a history of prior institutional violence or sexual abuse, as known to the department in assessing residents for the risk of being sexually abusive.
- f) Within a set period not exceeding 30 days, the facility shall reassess the resident's risk of victimization or abusiveness based on any additional, relevant information received by the facility since the intake screening.
- g) A resident's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the Resident's risk of sexual victimization or abusiveness.

h) Residents may not be disciplined for refusing to answer or for not disclosing complete information related to(d1), (d7), (d8), and (d9) above.

i) The department shall implement appropriate controls on disseminating responses to questions asked pursuant to this policy to ensure that staff or other Residents do not exploit sensitive information to the Resident's detriment.

2. Use of Information Obtained from Screening

a) The department shall use information from the risk screening to inform housing, bed, work, education, and program assignments to keep separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive.

b) The department shall make individualized determinations about how to ensure the safety of each resident.

c) In deciding whether to assign a transgender or intersex resident to a facility for male or female residents and in making other housing and programming assignments, the department shall consider on a case-by-case basis whether a placement would ensure the resident's health and safety and whether the placement would present management or security problems.

d) Placement and programming assignments for each transgender or intersex resident shall be reassessed at least twice each year to review any threats to safety experienced by the resident.

e) A transgender or intersex resident's views for his or her safety shall be given serious consideration.

f) Transgender and intersex residents shall be allowed to shower separately from other residents.

g) The department shall not place lesbian, gay, bisexual, transgender, or intersex residents in dedicated facilities, units, or wings solely based on such identification or status unless pursuant to a legal settlement or judgment.

h) Cross Reference with Policies 06-01 Classification and 02-54 PREA- LGBTI (Lesbian, Gay, Bisexual, Transgender, Intersex) Inmates

3. Medical and Mental Health Screening

a) If the screening required in Section 4. F (1) above indicates that a resident has experienced prior sexual victimization, whether in an institutional setting or the community; staff shall ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

b) Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans, security, and management decisions, including housing, bed, work, education, and program assignments.

c) Medical and mental health practitioners shall obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting.

d) Cross Reference with WellPath Policy HCD-120 F-06 Response to Sexual Abuse and HCD-120 E-02 Receiving Screening

Procedural Process

- A. A risk assessment screening is conducted for all inmates committed to the Department's custody to identify mental health, medical and special housing needs.
- B. The number of inmates shall not exceed the facility's rated bed capacity. No less than 10 percent of the rated capacity of the facility is available for single occupancy.
- C. Each new admission inmate's classification status is determined within five business days of placement into new admission housing. The Deputy Commissioner of Operations may extend the time to complete the classification process for a particular inmate up to an additional ten business days if he concludes that additional time is necessary to determine appropriate housing.
- D. New admissions shall be housed in designated classification or special needs housing units
- E. Adult and Minor male and female inmates are housed in separate housing units, with the exception of the Med unit and the Infirmary in which they will be housed in separate rooms or cells.
- F. Once the classification process has been completed, inmates shall be housed according to Section IV and Section V; sub-sections C and D of this policy. Inmates that require special needs housing shall be housed based on the 4 classification categories.
- G. An inmate's classification is reviewed and revised as necessary when one of the following conditions occur:

- The inmate is involved in a serious, unusual incident or exhibits adjustment problems which threaten his/her safety or the safety, security and good order of the facility;
- Changes in legal status;
- A written request, including justification(s) made by facility staff based on new information or exhibited behavior;
- A justified written request or receipt of relevant information from the Medical Director or Mental Health Director which has not already been considered;
- Any updated information received from any source as related to and affecting an inmate's PREA victim/predator score.

Analysis/Reasoning:

WCDOC Policy #02-12 requires all residents to be screened for risk of sexual victimization or risk of sexual abusing other residents within 72 hours of their intake. Interviews with residents confirmed that they were screened within 72 hours of their intake. All residents who were interviewed indicated they were screened within seventy-two hours of their intake. Random review of sixteen (16) additional residents' files support initial screening within 72 hours, psychological screening, and reassessment within 30 days from date of arrival.

Conclusion:

The were (3128)number of residents entering the facility (either through intake of transfer) within the past 12 months whose length of stay in the facility was for 72

	<p>hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility:</p> <p>There were (510) number of inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more and who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake. WCDOC is compliant with this standard.</p>
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115.42	Use of screening information
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #2-12 Sexual Assault/ Harassment (PREA Compliance) 01/06/2025 • WCDOC Policy #16-06 Inmate Work Program 02/27/2018 • WCDOC # 02-54 LGBTI (Lesbian, Gay, Bisexual, Transgender, Intersex Inmates) 09/03/2024 • WCDOC Policy #6-01 Classification 08/14/2023 • Intake Medical History and Screening/Intake Mental Health Screen • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Staff Responsible for Risk Screening Intake Staff Random Staff Random Confined Persons <p>Auditor's Discussion:</p> <p>WCDOC Policy # 16-06</p> <p>D. Program Selection</p> <p>3. Inmates being transferred into a program block will be assessed by booking and if during the assessment they're alerted to the inmate being either a known victim or known predator the transfer may continue with the authorization of the Program Warden as long as the housing is not in a dormitory setting. If a known predator and known victim are going to be housed on the same block their cells are to be as far apart as possible and located on different floors whenever possible.</p> <p>WCDOC # 02-54</p>

I. PURPOSE

To provide guidelines for safe confinement of lesbian, gay, bisexual, transgender, and intersex (LGBTI) inmates and to comply with federal Prison Rape Elimination Act (PREA) and other legal/accrediting standards related to this population, including:

- A. Elimination/ reduction of discrimination and other stigmatization;
- B. Appropriate classification and safe, secure housing;
- C. Ensuring personal safety and appropriate access to programs and care; and
- D. Maintaining facility safety and the safety of all persons therein.

G. HOUSING OF TRANSGENDER OR INTERSEX INMATES

1. Housing determinations shall be individually tailored and based upon classification factors and an evaluation of the inmate's emotional and physical well-being.
2. Housing decisions must focus on minimizing the risk of sexual victimization.
3. At no time shall a transgender or intersex inmate be placed in a dormitory housing area.
4. LGBTI inmates may not be placed on facility-directed protective custody or otherwise administratively segregated based solely upon their sexual orientation.
5. If a transgender or intersex must be placed by placed on facility-directed protective custody or otherwise administratively segregated, reviews shall be conducted pursuant to Policy & Procedure 02-51.
6. In deciding whether to assign a transgender inmate to a male or female housing unit, the Booking Captain in conjunction with the PREA Coordinator shall consider whether placement will operate to reasonably ensure the inmate's personal safety, and whether placement may present other management or security issues.
7. A transgender or intersex inmate's own views, with respect to his or her safety, is to be afforded significant consideration in a determination of housing, but shall not be the sole or dispositive factor in the same.
8. Housing decisions shall be reviewed at least twice per year to consider changed circumstances such as allegations or substantiated incidents of sexual misconduct {by staff or other inmates), changes in appearance, upon request of the inmate or as the result of any other relevant information as may be received.

I. Showering and Personal Hygiene

Transgender and intersex inmates shall be given the opportunity to shower and conduct personal hygiene activities separately from other inmates, including during lock-in periods.

Analysis/Reasoning:

WCDOC assesses all inmates for risk of sexual abuse and risk of sexual aggressiveness during intake as per Policy #6-01 (Classification). Intake screening is done within 24 hours of facility arrival as per Policy# 6-01 (Inmate Classification). This was confirmed by the Booking Captain. Assessments are conducted using an objective screening tool.

The screening tool considers mental disabilities, physical disabilities, developmental

disabilities, the inmate's age, the build of the inmate, the inmate's previous incarcerations, the inmate's past criminal activity, the inmate's past victimizations, the inmate's perception of vulnerability and whether the inmate is being detained for civil immigration proceedings. The screening tool, which was provided to the auditors as documentation, asks the inmate whether they identify as gay, lesbian, transgendered, bisexual or gender non-conforming; the previous screening tool did not ask this information. The screening tool also allows inmates to choose the pronoun and name they are most comfortable with, which goes above the standard. As per an interview with the Booking Captain, the new screening tool has 11 indicators and if one of these indicators is positively answered, the PREA Coordinator, in addition to the medical and mental health departments, will receive an immediate e-mail. There is also a flag mechanism which alerts the intake officer if a potential victim is being housed with a potential abuser.

The screening tool considers prior acts of sexual abuse, prior convictions for violent offenses and whether there is a history of prior institutional violence or sexual abuse known to the agency for assessing their risk of being sexually abusive. An interview with the screening CO in Booking confirmed this. WCDOC screens for sexual abuse and it is done within hours of arrival. Inmates will be reassessed within 72 hours of arrival. This CO will look at past charges, whether they have been to WCDOC before, current charges, past incarcerations, issues during past incarcerations, appearance, demeanor, previous mental health issues, special alerts, previous Protective Custody (PC), if they feel safe, if they want PC, etc. Additional questions will be asked as needed.

As per Policy #6-01, after the booking/classification officer determines classification, it is reviewed within 72 hours by a booking sergeant, which exceeds the PREA requirement of thirty days. Within 72 hours of being admitted, the inmate is reassessed to consider their risk of victimization or abusiveness. If there is a referral, request, or incident of sexual abuse, the inmate's risk of victimization or abusiveness will be reassessed as per Policy #6-01.

Conclusion:

This Auditor find's WCDOC in compliance with this standard based on review of WCDOC policies and procedures, interviews with staff and inmates, and observations while touring the facility.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy # 04 Non-Association ("Keep Separates")

- WCDOC Policy #04-03 Administrative Segregation
- WCDOC Policy #54 PREA- LGBTI (Lesbian, Gay, Bisexual, Transgender, Intersex Inmates), 09/03/2024
- WCDOC Policy #02-51 Voluntary Protective Custody Operations 11/06/2024
- WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA Compliance) 01/06//2025
- Protective Custody Housing Review
- Interviews:
 - Warden
 - PREA Coordinator
 - PREA Compliance Manager
 - Staff who Supervise Inmates in Segregated Housing

Auditor's Discussion:

WCDOC Policy #04

VIII Types of Non-Associations

- A. Perpetrator-Prison Rape Elimination Act
- B. Victim-Prison Rape Elimination Act
- C. Court Ordered
- D. Assaults (perpetrator/victim)
- E. Fights (Mutual combatants)

WCDOC Policy #04-03

Facility-Ordered Protective Custody or Strict Protective Custody

This status shall be considered for inmates that may have a serious threat to their safety due to, but not limited to:

- a. As directed pursuant to a lawful court order
- b. When an inmate has a notation of "protective custody" on the commitment document it will be considered a "temporary" order from the court until an investigation can be conducted and a final determination made.
- c. A direct verifiable threat made against them personally by another inmate or groups(s) of other inmates
- d. Information received from the inmate's family or attorney
- e. The notoriety of their crime
- f. The nature of the crime for which the inmate is charged (e.g., sex crime especially those involving children)
- g. Obvious behavioral or physical indicators that increase the propensity for the inmate to be victimized if placed in general population
- h. The inmate's direct or indirect affiliation with a security risk group
- i. Upon verbal or written request from another law enforcement agency.

WCDOC Policy #54

G. Housing Of Transgender Or Intersex Inmates

1. Housing determinations shall be individually tailored and based upon classification factors and an evaluation of the inmate's emotional and physical well-being.
2. Housing decisions must focus on minimizing the risk of sexual victimization.
3. At no time shall a transgender or intersex inmate be placed in a dormitory housing area.
4. LGBTI inmates may not be placed on facility-directed protective custody or otherwise administratively segregated based solely upon their sexual orientation.
5. If a transgender or intersex must be placed by placed on facility-directed protective custody or otherwise administratively segregated, reviews shall be conducted pursuant to Policy & Procedure 02-51.

WCDOC Policy #02-51

C. Protective Custody status review:

1. The designated P.C. Review Assistant Warden or designee shall conduct P.C. reviews utilizing the Protective Custody Housing Review Form.
2. The status of any inmate on P.C. shall be reviewed every seven (7) days for the first two (2) months of being placed in P.C. status.
3. The status of any inmate on P.C. longer than two (2) months shall be reviewed at least every thirty (30) days following the initial two months.

WCDOC Policy #02-12

3. Protective Custody

- a) Residents at high risk for sexual victimization shall not be placed in involuntary segregated housing unless the department has assessed all available alternatives and has determined that there is no available alternative means of separation from the likely abuser
- b) If the facility cannot conduct such an assessment immediately, it may hold the resident in involuntary segregated housing for less than 48 hours while completing the assessment. Residents placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the fullest extent possible.
- c) If the facility restricts access to programs, privileges, education, or work opportunities, it shall document:
 1. The opportunities that have been limited
 2. The duration of the limitation; and
 3. The reasons for such limitations
- d) The facility shall assign such residents to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged. Such an assignment shall not ordinarily exceed a period of 30 days
- e) If an involuntary segregated housing assignment is made pursuant to this section, the facility shall document:
 1. The basis for the facility's concern for the resident's safety; and
 2. The reason why no alternative means of separation can be arranged.

Analysis/Reasoning:

	<p>WCDOC Policy #02-12 states that inmates at high risk for sexual victimization will not be placed in involuntary segregated housing unless no alternatives are available. In the past 12 months at WCDOC, there were no inmates at risk of sexual victimization were held in involuntary segregated housing.</p> <p>Conclusion:</p> <p>This Auditor finds WCDOC in compliance with this standard based on a review of policy and procedures and interviews of relevant staff and inmates.</p>
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA Compliance) 01/06//2025 • WCDOC Policy #06-02 Rights of Foreign Nationals 09/13/2018 • Memorandum Of Understanding Between Westchester County Department of Correction and Westchester County Department of Public Safety • Inmate Handbook Rules and Regulations • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Random Staff Random Confined Persons <p>Auditor’s Discussion:</p> <p>WCDOC Policy #06-02</p> <p>I. Responding to Reports of Sexual Abuse and Sexual Harassment</p> <p>A. Procedures for Reporting Sexual Abuse and Sexual Harassment</p> <p>1. Resident Reporting</p> <p>a) Ways for Residents to Report Incidents</p> <p>1. The department shall provide multiple internal ways for residents to privately report sexual abuse and sexual harassment, retaliation by other residents or staff for reporting sexual abuse or sexual harassment, and staff neglect that may have contributed to such incidents. Residents may report concerns by:</p> <ul style="list-style-type: none"> • Reporting to any staff, volunteer, contractor, or medical or mental health staff. • Submitting a sick call slip.

- Submitting confidential correspondence to the department's PREA Coordinator.
 - Residents can tell a family member, friend, legal counsel, or anyone outside the facility who can report on their behalf by calling the Special Investigation Unit at (914) 231-1128 or to The Westchester County Dept. of Public Safety at (914) 864-7700.
 - They can also submit a report on someone's behalf, or someone at the facility can report for them using the methods listed here.
2. The Department shall also provide at least one way for residents to report abuse, harassment, retaliation, and staff neglect to a public or private entity that is not part of the department and that can receive and immediately forward resident reports of sexual abuse and sexual harassment to department officials, allowing the resident to remain anonymous upon request. Residents may report concerns by:
- Residents can contact the Westchester County Department of Public Safety at (914)864-7700 or dial #60 on the resident phones. Residents can also write a letter to Westchester County Department of Public Safety: 1 Saw Mill River Parkway Hawthorne, NY 10532
3. Staff shall accept reports made verbally, in writing, and anonymously. Staff shall promptly accept reports made verbally, in writing, and anonymously.

Memorandum of Understanding Between Westchester County Department of Correction and Westchester County Department of Public Safety

This Memorandum of Understanding ("MOU") is entered into this 1 day of January 2025, by and between the Westchester County Department of Correction ("WCDOC") and the Westchester County Department of Public Safety ("WCDPS"). The purpose of this MOU is to delineate the role of the Department of Public Safety in accepting and forwarding inmate reports of sexual abuse and sexual harassment allegations to WCDOC's Special Investigation Unit ("SIU") and the Prison Rape Elimination Act ("PREA") Coordinator in compliance with PREA standards and applicable laws.

Inmate Handbook

Protection from Harm

You have a right to be safe, including being protected from excessive or unnecessary physical force any other misconduct by staff members. If you are the subject of what you believe is excessive force or staff misconduct, please report it to an uninvolved staff member or call the Special Investigation Unit at (914) 231-1128. You may also submit a confidential grievance in a sealed envelope regarding excessive force or staff misconduct. (See the grievance procedure section of this handbook)

You also have a right to freedom from harm from other inmates, including physical assault, coercion, gang activity, sexual misconduct and other unwanted acts. (See the grievance procedure and/or Sexual Abuse sections of this handbook).

Grievance Procedure

1. Grievance forms are available from your Housing Unit Officer and at the Law Library.
2. Whenever possible, attempts should be made to handle complaints informally;

however, inmates may request a grievance form at any time and not take part in the informal process.

NOTE: Although inmates have the right to choose not to settle complaints informally, the Department still has the responsibility to at least express a willingness to address complaints informally. Recording the actions taken will serve as documentation of our attempt to resolve complaints informally

3. All supervisors will function as grievance coordinators and must accept any grievance(s) handed to them by the grievant. Each grievance is to be investigated to the fullest extent necessary by an impartial Supervisor who is not personally involved in the circumstances giving rise to the grievance.

4. Grievances involving allegations of issues such as staff misconduct or unnecessary or excessive use of force will be screened, investigated and responded to in a timely manner.

5. Grievances involving allegations of issues as listed above in #4 may be filed confidentially as outlined below in the following section.

6. In an effort to provide a measure of "confidentiality" to the process, inmates may submit any grievance to the block officer in a sealed envelope stating:

PREA Related Grievances

1. General

- a. There is no time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse, sexual harassment or sexual misconduct.
- b. Grievance coordinators may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.
- c. Any portion of a PREA related grievance that does not relate to PREA must be handled and responded to by the grievance coordinator in accordance with standard grievance procedures and time constraints.
- d. An inmate shall not be required to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse
- e. An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint
- f. Such Grievance shall not be referred to a staff member who is the subject of the complaint

How Do You Report an Incident of Sexual Abuse?

It is important that you begin by telling a staff member if you have been sexually abused. You can tell any correctional staff, chaplain, civilian staff member, medical/mental health practitioner, or any other employee. Staff is instructed to keep the reported information confidential and only discuss it with the appropriate officials on a need to know basis. You may also have family members file reports by calling our Special Investigation Unit 914-231-1128 and/or online at <http://correction.westchestergov.com/>.

If you choose to first report the abuse or threats in writing, you may write to any correctional staff member, chaplain, civilian staff, medical/mental health practitioner, or any other employee. However, any delay in reporting an incident will make

investigating the incident far more difficult. An inmate who feels that he or she has been the victim of sexual abuse should report such occurrence immediately.

Third Party Reporting of Sexual Abuse to Westchester County Police

All block inmate phones are set up to allow you to make a report of sexual abuse to the Westchester County Police. Please pick up the handset and speed Dial #60

National Rape Crisis Center

All housing unit inmate phones are set up to allow you to contact the National Rape Crisis Center for emotional support services. Please pick up the handset and speed dial #61 Calls to the National Rape Crisis Center will not be monitored or recorded. Please be aware that reports of sexual abuse that occur in a confinement setting may be reportable to the respective agency in accordance to PREA (Prisoner Rape Elimination Act) standards. Additionally, you may contact the National Rape Crisis Center by mail at:

National Rape Crisis Center
1220 L. St. NW Suite 205
Washington, DC 20005

Victims Assistance Services:

All housing unit phones are set up to allow you to contact Westchester Jewish Community Services - Crime Victims Advocacy and Support Services Program for rape crisis counseling, victim advocacy, and emotional support services. Please pick up the handset and speed dial #62.

Calls to this service are CONFIDENTIAL and thus will not be monitored or recorded. Please be aware that reports of sexual abuse that occur in a confinement setting may be reportable to the agency in accordance with PREA (Prisoner Rape Elimination Act) standards.

B. Summary Description of Incident

The Special Investigations Unit (Sill) received notification of a Prison Rape Elimination Act (PREA) complaint filed by Inmate Eddie Bussey (ID #239700). The complaint was originally submitted via the PREA hotline on April 18, 2025. In the report, Mr. Bussey alleged that on April 17, 2025, while confined to his cell in Housing Unit 4NE during the 7:00 a.m. to 3:00 p.m. shift, a correctional officer made an inappropriate sexual comment. Although the inmate did not identify the officer by name, he reported that the officer stated he would not be released from his cell unless he exposed his genitalia.

B. Summary Description of Incident

On November 16, 2024, inmates Jessi Gamble (200073), Melissa Lawrence (282750), and Nikkida Roberts (U812) submitted PREA allegations using inmate statement forms. The forms were collected by Women's Unit Sector Sergeant Trameeka Nabors

(#262).

Analysis/Reasoning:

WCDOC provides multiple ways for inmates to privately report sexual abuse/harassment. Inmates can file a grievance as per Policy #15-02 (Inmate Grievance Procedure), call the Westchester County Police Department or the Rape Crisis Hotline. Incidents can also be reported to any staff member or they can be reported by other third parties on behalf of the inmate, such as family/friends. Information on third party reporting is available on the WCDOC website. Notices enclosed in hard plastic (to prevent their removal), with this information, are posted on all housing units. The auditors witnessed these postings (also available in Spanish) on the housing blocks next to the phones. In the inmate handbook, inmates are also informed that they can report abuse by sending a confidential letter to any staff member. While touring, most inmates knew where the signs were posted and most knew that the hotline was available. As per an interview with the staff, inmates have the hotline available to report privately or anonymously. If the county police department is notified, they will forward those recordings to SIU. SIU will investigate immediately. When interviewed formally, most inmates knew how to report sexual abuse and some knew they could report anonymously or via a 3rd party. All COs disclosed, during their interviews, ways inmates could report sexual abuse/harassment. They all knew inmates could report in writing, in person, anonymously or through a third party. The auditors were given an inmate report statement as documentation of another method of reporting.

Conclusion:

All staff are mandated reporters. Staff acknowledge their duty to report when they complete PREA training. In addition, staff receive information in the employee handbook regarding their duty to report all instances of sexual abuse/harassment.

All staff are informed about how to privately report incidents of sexual abuse/harassment. Custodial staff are trained in reporting during the academy and in yearly refresher training. Civilian staff are trained in reporting during civilian orientation training; it is also provided to them in the civilian handbook. WCDOC meets this standard; Inmates have multiple ways to report incidents of sexual/abuse harassment. Staff and inmates are adequately informed about how to report.

115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed

- WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA Compliance) 01/

06//2025

- WCDOC Policy #15-02 Inmate Grievance Procedure 09/16/2022
- WCDOC Inmate Handbook (Grievances)
- Interviews:
Warden
PREA Compliance Manager

Auditor's Discussion:

WCDOC Policy #02-12

VI. Responding to Reports of Sexual Abuse and Sexual Harassment

b) Resident Grievances

1. The department shall not impose a time limit on when a resident may submit a grievance regarding an allegation of sexual abuse.
2. The department shall not require a resident to use any informal grievance process or to attempt otherwise to resolve with staff an alleged incident of sexual abuse.
3. The department shall ensure that a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint and that such grievance is not referred to a staff member who is the subject of the complaint.
4. The department, through its Special Investigations Unit, shall issue a final decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. The computation of the 90 days shall not include time consumed by residents in preparing any administrative appeal.
5. The department's Special Investigations Unit can claim an extension of time to respond of up to 70 days if the expected time period for response is insufficient to make an appropriate decision. The unit shall notify the resident in writing of any such extension and provide a date by which a decision shall be made.
6. At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for the reply, including any adequately noticed extension, the resident may consider the absence of a response to be a denial at that level.

3. Rules for Third Parties to Report Abuse and to Assist Residents with Grievances

- a. The department shall establish a method to receive third-party reports of sexual abuse and sexual harassment. It shall distribute public information on how to report sexual abuse and sexual harassment on behalf of a resident.
- b. Staff shall accept reports made verbally, in writing, and anonymously from third parties and shall promptly document any verbal reports.
- c. Third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, shall be permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse and shall also be allowed to file such requests on behalf of residents.
- d. If a third party files such a request on behalf of a resident, the facility may

require that the alleged victim agree to have the request filed on his or her behalf as a condition of processing the request and may also require the alleged victim to pursue any subsequent steps in the administrative remedy process personally. If the resident declines to have the request processed on his or her behalf, the department shall document the resident's decision.

e. Link to Web Complaints: <https://correction.westchestergov.com/about-us/contact-us-form>

WCDOC Policy #15-02

C. PREA Related Grievances

1. General

a) There is no time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse or sexual harassment.

b) FLGC's may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.

c) Any portion of a PREA related grievance that does not relate to PREA must be handled and responded to by the grievance coordinator in accordance with standard grievance procedures and time constraints.

d) An inmate shall not be required to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse or sexual harassment.

e) An inmate who alleges sexual abuse or sexual harassment may submit a grievance without submitting it to a staff member who is the subject of the complaint. See section IV B 3 (a and b) of this policy for information regarding confidential submission of grievances.

2. Time Constraints

a) The CAO or designee shall 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. The original grievance complaint is subject to the time constraints set forth by the New York State Minimum Standard Part 7032.

b) The department may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The CAO or designee is to notify the inmate in writing of any such extension and provide a date by which a decision will be made.

4. Emergency PREA Grievances

If a grievance is received that alleges that an inmate is subject to a substantial risk of imminent sexual abuse, such grievance shall be immediately brought to the attention of the Shift Commander and PREA Coordinator. Appropriate action shall be taken to ensure the safety of the alleged victim. The inmate shall be notified, within 48 hours, of any action taken and shall receive a final grievance response within five (5) calendar days.

Analysis/Reasoning:

WCDOC Policies #02-12 and #15-02 establish administrative procedures for dealing with inmate grievances regarding sexual abuse. A procedure allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. Policy requires that a resident grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint. Policy requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance.

In the past 12 months, (6) grievances were filed of alleged sexual abuse. In the past 12 months, (4) grievances were filed alleging sexual abuse that reached final decision within 90 days after being filed. (2 remain in active investigation at the time of the audit) In the past 12 months, (0) alleging sexual abuse that involved extensions because final decision was not reached within 90 days. There were (0) number of grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline. There were (0) number of those grievances in 115.52(e)-3 that had an initial response within 48 hours.

Conclusion:

The Auditor determined the WCDOC has appropriate policies and procedures in place for addressing offender allegations of sexual abuse and an imminent risk of sexual abuse. Facility staff understand the agency's procedures and the offender population is aware they can submit grievances alleging sexual abuse and/or risk of imminent sexual abuse. The Auditor reviewed the agency's policies, procedures, Offender Handbook, grievances, investigative records, and conducted interviews with staff and offenders to determine the facility meets the requirements of this standard.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #06-02 Rights of Foreign Nationals 09/13/2018 • MOU between (WCDOC') and Westchester Jewish Community Services - Crime Victims Advocacy & Support Services Program (WJCS - CVASSP) • WCDOC Inmate Handbook • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager <p>Auditor's Discussion</p> <p>WCDOC Policy #06-02</p>

F. Support Services for Victims of Sexual Abuse

2. Emotional Support Services:

a) The facility shall provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers, where available, of local, State, or national victim advocacy or rape crisis organizations, and for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between residents and these organizations and agencies as confidentially as possible.

b) The facility shall inform residents, before giving them access to outside advocates, of the extent to which such communications shall be monitored and the extent to which reports of abuse shall be forwarded to authorities in accordance with mandatory reporting laws.

c) The department shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that can provide residents with confidential emotional support services related to sexual abuse. The department shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

Memorandum of Understanding:

Memorandum of Understanding by and between the County of Westchester having an office and principal place of business at 148 Martine Avenue. White Plains. New York 10601 (the "County") acting by and through its Department of Corrections. having an office at PO Box 389 Woods Road, HQ Building. Valhalla, New York 10595 ("WCDOC") and York 10595 ("WCDOC"), and Westchester Jewish Community Services - Crime Victims Advocacy & Support Services Program (WJCS - CVASSP), located at 845 North Broadway, White Plains, New York 10603. This document establishes guidelines for the provision of victim services to inmates in the custody of Westchester County who have been sexually abused or harassed.

Westchester Jewish Community Services (WJCS) a non-profit organization, the largest provider of licensed outpatient community mental health services and one of the largest human service agencies in Westchester County. They provide state-of-the-art programs, services, and compassionate care to more than 20,000 people of all ages and backgrounds throughout Westchester. WJCS - CVASSP provides crime victims and survivors assistance with supportive services, giving them the tools they need to make informed decisions. They provide advocacy services and trauma-informed therapeutic services including a 24 hour/7 days a week helpline, emotional support and short-term crisis counseling, information on victims' rights and options, along with accompaniment to hospitals, police, and courts.

WCDOC is a Department of the County that serves the public by providing an efficient, secure and humane means of detaining individuals with criminal matters pending in Westchester County. It consists of a Jail Division, which houses individuals 18 years and older (including males accused of a crime or awaiting sentencing and females accused of a crime, awaiting sentencing or sentenced to terms of a year or

less) and a Penitentiary Division, which houses males sentenced to terms of one year or less. WCDOC is accredited by the American Correctional Association and operates within local, state and federal guidelines. The National Commission on Correctional Health Care accredits its medical operations.

WCDOC is a Department of the County that serves the public by providing an efficient, secure and humane means of detaining individuals with criminal matters pending in Westchester County. It consists of a Jail Division, which houses individuals 16 years and older (including males accused of a crime or awaiting sentencing and females accused of a crime, awaiting sentencing or sentenced to terms of a year or less) and a Penitentiary Division, which houses males sentenced to terms of one year or less. WCDOC is accredited by the American Correctional Association and operates within local, state and federal guidelines. Its medical operations are accredited by the National Commission on Correctional Health Care.

Analysis/Reasoning:

WCDOC has signed a memorandum of understanding with the Westchester Jewish Community Services - Crime Victims Advocacy & Support Services Program (WJCS - CVASSP) to provide their contact information for inmates who wish to confidentially report incidents to an outside entity. Confined Persons are provided the contact information for WJCS-CVASSP through distributed written materials.

The Inmate Handbook provides information on the following:

Third Party Reporting of Sexual Abuse to Westchester County Police

All block inmate phones are set up to allow you to make a report of sexual abuse to the Westchester County Police. Please pick up the handset and speed Dial #60.

National Rape Crisis Center

All housing unit inmate phones are set up to allow you to contact the National Rape Crisis Center for emotional support services. Please pick up the handset and speed dial #61. Calls to the National Rape Crisis Center will not be monitored or recorded. Please be aware that reports of sexual abuse that occur in a confinement setting may be reportable to the respective agency in accordance to PREA (Prisoner Rape Elimination Act) standards.

Additionally, you may contact the National Rape Crisis Center by mail at:

National Rape Crisis Center
1220 L. St. NW Suite 205
Washington, DC 20005

Victims Assistance Services

Calls to this service are CONFIDENTIAL and thus will not be monitored or recorded. Please be aware that reports of sexual abuse that occur in a confinement setting may be reportable to the agency in accordance with PREA (Prisoner Rape Elimination Act)

standards.

Conclusion:

The auditor tested the inmate phones in the housing areas. It was discovered that a personal pin number was needed before assessing the external confidential sources. A pin number was needed to dial #60 to contact the Westchester County Department of Public Safety; a pin was needed to dial #61 to contact the National Rape Crisis Center; and the same was needed to dial #62 to contact the WJCS-Crime Victims Advocacy and Support Services Program. The administrative staff corrected the use of the pin number during the onsite audit. Viapath configured speed dials *60, *61, and *62 to bypass PIN entry for PREA hotlines. The facility maintains documentation it provides emotional support services for sexual abuse victims through written agreements. Contact information with the organization is provided by intake personnel through the Offender Handbook and comprehensive education. The Auditor reviewed the WCDOC policies, procedures, Memorandum of Understanding, Offender Handbook, training acknowledgements and interviewed staff, offenders and victim advocate to determine the facility meets the requirements of this standard.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Policy, Materials, Interviews and Other Evidence Reviewed <ul style="list-style-type: none">• WCDOC Policy #02-12 Sexual Assault/Harassment(PREA Compliance)• PREA Website• PREA Tip Line Posters (English, Spanish)• Interviews:<ul style="list-style-type: none">WardenPREA CoordinatorPREA Compliance ManagerRandom StaffRandom Confined Persons
	Auditor's Discussion:
	WCDOC Policy #02-12
	The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.
	3. Rules for Third Parties to Report Abuse and to Assist Residents with Grievances <ul style="list-style-type: none">a) The department shall establish a method to receive third-party reports of sexual abuse and sexual harassment. It shall distribute public information on how to

report sexual abuse and sexual harassment on behalf of a resident.

b) Staff shall accept reports made verbally, in writing, and anonymously from third parties and shall promptly document any verbal reports.

c) Third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, shall be permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse and shall also be allowed to file such requests on behalf of residents.

d) If a third party files such a request on behalf of a resident, the facility may require that the alleged victim agree to have the request filed on his or her behalf as a condition of processing the request and may also require the alleged victim to pursue any subsequent steps in the administrative remedy process personally. If the resident declines to have the request processed on his or her behalf, the department shall document the resident's decision.

Analysis/Reasoning:

WCDOC established multiple methods to receive third party reports of sexual abuse and sexual harassment. They distribute this information publicly on how third parties can report such incidents. Inmates are also allowed to report directly, by phone, to the Westchester County Police Department of Public Safety. During interviews, many inmates knew that third parties could report on their behalf. In regard to third party reporting, WCDOC has:

- a. Postings in public jail areas, such as the lobby, which explain how to report a PREA complaint on behalf of an incarcerated person.
- b. Information on its public website which allows a third party to file a complaint; the phone number to WCDOC's SIU (Special Investigation Unit) is provided.
- c. Information in the inmate handbook that inmates can share with a third party.

Conclusion:

WCDOC meets this standard; WCDOC provides multiple ways third parties can report incidents of sexual abuse/harassment on behalf of an incarcerated person.

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/Harassment (PREA Compliance) • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Random Staff Medical and Mental Health Staff <p>Auditor's Discussion:</p>

WCDOC Policy #02-12

3. Staff Reporting Duties

a) Any staff member who has knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment; retaliation against residents or staff who reported such an incident; and any staff neglect that may have contributed to such incident or retaliation shall immediately report such incident or retaliation, in the manner specified by department policy.

b) Staff shall not reveal any information related to a sexual abuse report to anyone except as specified by department policy, apart from reporting to designated supervisors or officials.

c) The department shall provide a method for staff to report sexual abuse and sexual harassment of residents privately.

1. Report directly to SIU-Internal Affairs Bureau

2. Report directly to the department's PREA Coordinator (Deputy Commissioner of Operations)

3. Report directly to a division Assistant Warden

d) Staff must report any knowledge, suspicion, and information, regardless of whether they believe the information to be true or reliable.

Analysis/Reasoning:

All staff are mandated reporters and must immediately report any knowledge, suspicion or information regarding sexual abuse/harassment. WCDOC Policy #2-12 (Sexual Assault/Harassment) requires mandatory reporting by staff and it lists all first responder duties. Through formal interviews, it was clear that all COs knew what steps to take and how to report an incident of sexual abuse/harassment. As per interviews with mental health and medical, it was clear that medical and mental health understood their duty to report and what steps should be followed when an incident of sexual abuse/harassment was made by an inmate.

Conclusion:

The Auditor concluded staff, is aware of the WCDOC requirement to report any knowledge, suspicion or information related to sexual abuse and sexual harassment. Staff understand the requirement to maintain confidentiality with the information obtained by an allegation. Interviews with medical and mental health practitioners revealed they understand the requirements for reporting sexual abuse that occurred in a community setting and for youthful offenders. The Auditor reviewed agency policies, procedures, training curriculum, investigative reports and conducted interviews with staff and confined persons to determine the facility meets the requirements of this standard.

115.62 Agency protection duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed

- WCDOC Policy #02-12 Sexual Assault/Harassment (PREA Compliance)
- WCDOC Policy #09-04 Inmate Information Received, 04/30/2014
- Interviews:
PREA Coordinator
Random Staff

Auditor's Discussion:

WCDOC Policy #02-12

II. POLICY

The Department shall maintain policies consistent with the requirements of PREA. The policies are intended to reduce the potential for sexual misconduct, including sexual abuse/harassment of residents; to address the safety and treatment needs of residents who have been victims of a sexual act; and to discipline and prosecute those who perpetrate these acts upon residents. Upon learning that the resident is subject to a substantial risk of imminent sexual abuse, the Department shall take immediate action to protect the resident and to assist in a successful prosecution of any perpetrator meaningfully.

WCDOC Policy #09-04

B. If information is received that an inmate is subject to a substantial risk of imminent sexual abuse the shift commander is to be immediately notified and shall take immediate action to protect the inmate.

Analysis/Reasoning

WCDOC takes immediate action when it learns an inmate is subject to a substantial risk of sexual abuse, as per Policy #2-12 (Sexual Assault/Harassment). Policy #9-04 (Inmate Information Received) requires that once information regarding sexual abuse is received by a staff member, the shift commander must be notified and immediate action must be taken. This policy provides a clear procedure for reporting. As per interviews with Staff, if an inmate is at imminent risk of sexual abuse, the shift commander and sector supervisor are notified; they will respond immediately. The CO will monitor the inmate to maintain his/safety, separate him/her from the abuser, and an investigation will begin. A risk assessment will be conducted to determine if the inmate requires a housing move or PC. All officers interviewed knew the proper steps to follow if they were a first responder to a report of sexual abuse/harassment. All COs said their response would be immediate.

In the past 12 months, there have been no cases where an inmate was determined to be in substantial risk of imminent sexual abuse.

Conclusion:

WCDOC is in full compliance with this standard: policy dictates that once there is an issue of sexual abuse, it is mandatorily reported and if a substantial risk exists,

	immediate action will be taken by the shift commander.
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115.63	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #5-01 Admission Process 04/29/2020 • Interviews: <ul style="list-style-type: none"> Commissioner Deputy Commissioner PREA Coordinator Random Staff <p>Auditor's Discussion:</p> <p>WCDOC Policy #5-01</p> <p>(a) Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.</p> <p>(b) Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.</p> <p>(c) The agency shall document that it has provided such notification.</p> <p>(d) The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.</p> <p>Analysis/Reasoning:</p> <p>The Auditor conducted a formal interview with the facility's Deputy Commissioner. The facility's Deputy Commissioner explained she notifies another facility once the WCDOC receives an allegation that an offender alleges suffering sexual abuse at another facility. The Commissioner/Deputy Commissioner places a telephone call followed by an email to make notification. When asked when the notification would occur the Deputy Commissioner explained she has up to 72 hours to make the notification but would make the notification as soon as she receives it. The Auditor asked the Deputy Commissioner to explain what takes place when she receives notification from another facility that a former WCDOC offender has alleged suffering sexual abuse at the WCDOC. She stated she would ensure the investigator is notified so an investigation would be conducted.</p> <p>Conclusion:</p> <p>In the past 12 months, WCDOC received (9) allegations that an inmate was abused</p>

	<p>while confined at another facility. In the past 12 months, there were (1) number of allegations of sexual abuse the facility received from other facilities: A review of WCDOC Policy #5-01 and interviews of staff and inmates show WCDOC is in compliance of this standard.</p>
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/Harassment (PREA Compliance) • WCDOC Coordinated Response Plan • Interviews: <ul style="list-style-type: none"> Random Staff Staff First Responder <p>Auditor’s Discussion:</p> <p>WCDOC Policy #02-12</p> <p>C. Immediate Steps After Receiving Report of Incident</p> <p>1 When a security staff first responder learns that a resident has been sexually abused, they shall take immediate action to protect the resident. This includes:</p> <ol style="list-style-type: none"> a) Separate the resident from the alleged perpetrator; b) Preserve and protect any crime scene until appropriate steps can be taken to collect evidence; and c) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim and ensure that the suspected abuser-not take any actions that could destroy physical evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and d) If no qualified medical or mental health practitioners are on duty when a recent abuse report is made, security staff first responders shall immediately notify the appropriate medical and mental health practitioners. <p>2. When the first staff responder is not a security staff member, they shall request that the alleged victim refrain from taking any actions that could destroy physical evidence and then notify security staff.</p> <p>3. The Sector Supervisor or a supervisor designated by the Shift Commander shall obtain detailed information from the alleged victim. This information shall be appropriately documented on a special report and, at a minimum. include the following information:</p> <ol style="list-style-type: none"> a. The date, time, and location of the incident(s). b. The names of any possible perpetrators if known to the victim. In the event names are unknown, any physical characteristics or other identifying information (i.e.,

cell number).

- c. Whether the victim knew the perpetrator before the incident and whether they had been subjected to any prior threats, intimidation, or coercion.
 - d. The names, if known, of any possible witnesses. In the event names are unknown, any physical characteristics or other identifying information (i.e., cell number).
 - e. Was a weapon or threat of a weapon involved?
 - f. Were physical force or threats of physical force involved?
 - g. What was the perpetrator wearing?
 - h. Whether the victim and/or perpetrator (s) sustain any injuries and, if so, the nature and extent of such injuries.
 - i. Any communication (verbal or written) between the victim and perpetrator before or during the incident. If written(i.e., 'kites'), request copies of such material from the victim.
 - j) Did the suspect(s) leave anything at the scene (including ejaculation or other bodily fluid/tangible evidence) or take anything away from the scene?
 - k) Whether the victim has bathed or potentially compromised tangible evidence since the incident.
4. The Sector Supervisor or a supervisor designated by the Shift Commander shall gather appropriate special reports and/or statement forms from all staff members, except any staff member alleged to have engaged in sexual abuse/harassment.

D. Crime Scene Management and Preservation of Tangible Evidence

1. If the physical crime scene is known, it is to be immediately secured for potential processing by the WCDPS Crime Scene Unit(which shall be notified by responding WCPD patrol officers and/or detectives if they determine it to be warranted).
2. Staff should be cognizant of the potential for multiple crime scenes, including but not limited to the victim's cell, suspect(s)' cell, shower, or other areas.
3. The Sector Supervisor should determine and include in any report whether the scene(s) were under video surveillance (including whether the system included a DVR and, if so, the DVR's number).
4. If the abuse occurred within a period that still allows for the collection of physical evidence, 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.
5. If the abuse occurred within a period that still allows for the collection of physical evidence, ensure that the alleged perpetrator does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, including placement under direct and continuous observation by security staff (dry cell).

WCDOC Coordinated Response Plan

B. Following Suspected or Alleged Incident of Sexual Abuse

Security Staff First Responder:

1. Immediately notify the sector sergeant or the Jail Administrator.
2. Separate the victim and alleged perpetrator(s).

3. Secure the crime scene, preserve evidence, including on the victim's and alleged perpetrator's bodies or clothing, and maintain custody of the evidence until released to the SIU and or WCDPS.
4. Escort the alleged resident perpetrator(s) to an isolated area, preferably in a dry cell with restricted access to a toilet or water, until the arrival of the SIU Investigators.
5. Request that the victim - and ensure that the alleged perpetrator - refrain from actions that could destroy evidence, such as bathing, brushing teeth, changing their clothes, urinating, defecating, smoking, drinking, or eating until they have been examined by qualified medical personnel.
6. Complete any required report (s).
7. Share information related to the incident with only those people who need to know to ensure the victim's safety, conduct the investigation, or provide treatment to the victim or alleged perpetrator.

Analysis/Reasoning:

When a staff member learns that an inmate was sexually abused, the first security staff person to respond shall follow the protocol of separating the victim and abuser and preserving and protecting the crime scene, as per Policy #02-12 (Sexual Assault/Harassment), which outlines the protocol for first responders; Policy #2-03 (Crime Scene Management), which outlines procedures for the protection of crime scene and crime scene evidence; and Policy #2-01 (Chain of Evidence and Contraband Storage) which discusses chain of evidence. If the abuse occurred within a time frame suitable for evidence collection, he/she will ask the victim not to do anything which could destroy evidence and will ensure the perpetrator does not do anything to destroy evidence (i.e., showering, changing clothes, etc), as per Policy #2-12. Lesson plans for training on responding to sexual abuse claims and a power point on evidence preservation were provided as additional documentation to the auditors.

Interviews with COs indicated that they all knew to respond immediately to an allegation of abuse/harassment and they knew what steps to take and how to report such incidences. They were also well versed in protecting/preserving evidence on both the victim and abuser, insuring the victim's safety, and preserving the crime scene.

In the past 12 months, there were (40) allegations that an inmate was sexually abused. Of these allegations of sexual abuse in the past 12 months, there were (31) number of times the first security staff member to respond to the report separated the alleged victim and abuser. In the past 12 months, there was (4) allegation where staff was notified with in a time period that still allowed for the collection of physical evidence.

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there was (4) number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence.

Of these allegations in the past 12 months where staff were notified within a time

	<p>period that still allowed for the collection of physical evidence, there was (4) number of times the first security staff member to respond to the report requested that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.</p> <p>Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there were (4) number of times the first security staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.</p> <p>Of the allegations that an inmate was sexually abused made in the past 12 months, there was zero (16) number of times a non-security staff member was the first responder. Of those allegations responded to first by a non-security staff member, there was (16) number of times that staff member requested that the alleged victim not take any actions that could destroy physical evidence. Of those allegations responded to first by a non-security staff member, there was (16) number of times that staff member notified security staff.</p> <p>Conclusion:</p> <p>WCDOC is in compliance with this policy; protocols for first responder duties are clearly stated in policy and procedure.</p>
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 PREA (Coordinated Response) • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Random Staff <p>Auditor's Discussion:</p> <p>WCDOC Policy #02-12</p> <p>Coordinated Response</p> <p>This plan outlines the coordinated response to allegations of sexual abuse in compliance with the Prison Rape Elimination Act (PREA). It defines the roles and responsibilities of first responders, the shift commander, PREA coordinator, medical</p>

	<p>and mental health staff, the department's Special Investigations Unit, the Westchester County Department of Public Safety, the Westchester County District Attorney's Office, WJCS (Victim Advocacy Services), and the Forensic Acute Care Team at the Westchester Medical Center to ensure a trauma-informed and legally sound response.</p> <p>Analysis/Reasoning:</p> <p>The facility has a written policy to coordinate actions taken in response to an incident of sexual abuse among first responders, including medical staff, mental health staff, investigators and facility supervisors. A WCDOC Sexual Abuse Response Team Protocol was provided as documentation to the auditors. The institutional plan outlines the steps taken by custodial or non-custodial responders, jail supervisors, jail medical staff, SANE/SAFE staff, the Rape Crisis Advocate, SIU (Special Investigations Unit), the district attorney, jail mental health staff, and the jail transport officer. An interview with the Deputy Commissioner confirmed this; WCDOC has a coordinated response plan which highlights the responsibilities of each unit/person when an allegation is made (i.e., 1st responders, sector supervisor, SIU, PD, DA, MH, medical, outside hospital, etc.).</p> <p>Conclusion:</p> <p>WCDOC is in compliance with this standard; WCDOC has a clear coordinated response protocol in place.</p>
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<p>115.66</p>	<p>Preservation of ability to protect inmates from contact with abusers</p>
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <hr/> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance) • Interviews: <ul style="list-style-type: none"> Commissioner PREA Compliance Manager <p>Auditor's Discussion:</p> <p>WCDOC Policy #02-12</p> <p>Upon collective bargaining, WCDOC will not enter into agreements that limit their ability to remove alleged staff abusers from inmate contact pending an investigation. WCDOC entered into collective bargaining with WESTCHESTER County Corrections Officers Benevolent Association, INC., COBA, New York Correct Care Solutions Medical Services, and Comprehensive Healthcare Services for Individuals in the Custody of</p>

the Westchester County Department of Correction. Contracts for healthcare and food services were also negotiated. None of these agreements prohibit the suspension, termination, separation or removal of Department staff or contract staff from the facility when faced with sexual abuse allegations. Post bid removal is expressly provided for in the officers' union agreement pending an investigation. WCDOC can remove any employee, pending investigation, without pay. Union agreements were provided to the auditors as documentation. This was confirmed through an interview with the Commissioner, who can remove anyone for cause. As per staff, contractors or volunteers will be removed and have their security clearance revoked pending an investigation.

Analysis/Reasoning:

WCDOC has not entered into a collective bargaining agreement that limits its ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

Conclusion:

This Auditor finds WCDOC to be in compliance with this standard based upon review of WCDOC policy, and interviews with staff which confirmed WCDOC does engage in collective bargaining.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance) • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Retaliation Monitor <p>Auditor's Discussion:</p> <p>WCDOC Policy #02-12</p> <p>H. Protection from Retaliation</p> <ol style="list-style-type: none"> 1. The department's policy is to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. 2. The department shall employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or

resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

3. For at least 90 days following a report of sexual abuse, the Special Investigation Unit shall monitor the conduct and treatment of residents or staff who reported sexual abuse and of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff and shall act promptly to remedy any such retaliation.

The department shall continue such monitoring beyond 90 days if the initial monitoring indicates an ongoing need. Monitoring shall include:

- a) Periodic in-person conversations with residents and/or staff; Review of disciplinary incidents
- b) involving residents;
- c) Review of housing or program changes; and
- d) Review of negative performance reviews or reassignments of staff.

4. Any use of segregated housing to protect a resident who is alleged to have suffered sexual abuse shall be subject to the exact requirements that are discussed above in Section 4. G (3) (Protective Custody)

E. Anti-Retaliation Policy

Consistent with the law, DOC prohibits any individuals from being retaliated against for reporting sexual abuse (including inmate-victims, witnesses and mandatory reporters). You should also report any retaliation you believe has or may occur due to reporting an incident of sexual abuse or for participating in an investigation of an allegation of sexual abuse. If you believe that you or someone else have been retaliated against for reporting sexual abuse, you may report the same per the procedures set forth.

Analysis/Reasoning:

WCDOC, Policy #2-12 (Sexual Assault Harassment) prohibits retaliation by staff toward any inmate or staff person who reports an incident of sexual abuse and/or who cooperates in an investigation. A captain in charge of monitoring retaliation was interviewed by the auditor.

Multiple measures are in place to offer retaliation protection, such as housing changes, removal of abusers (staff or inmates) and emotional support for staff/inmates who fear retaliation. As per Policy #2-12, immediate action will be taken to protect a victim of sexual abuse. Collective bargaining agreements with staff allow for the removal of staff pending an investigation. Mental health referrals are available for inmates. EAP services are available to employees.

WCDOC monitors the conduct and treatment of inmates and staff who report incidents of sexual misconduct or who cooperate in investigations of sexual misconduct for retaliation. If additional monitoring is needed, WCDOC will monitor beyond the 90 day period. A memorandum to SIU (Special Investigation Unit) Sergeants from the SIU commander charges SIU with conducting regular checks for

	<p>retaliation of staff and inmates during the first 90 days. Documentation of retaliation checks were provided to the auditors.</p> <p>Conclusion:</p> <p>The number of times an incident of retaliation occurred in the past 12 months (0). This Auditor finds WCDOC in compliance of this standard based on review of audit files, and interviews of investigative staff, and random staff.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-51 Voluntary Protective Custody Operations • WCDOC PART 7076 Segregated Confinement • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Staff who Supervise Inmates in Segregated Housing <p>Auditor’s Discussion:</p> <p>PART 7076 Segregated Confinement</p> <p>Post-Allegation Protective Custody</p> <p>The purpose of this Part shall be to ensure that the conditions, programming, duration, recordkeeping and reporting of segregated confinement practices in local correctional facilities remain consistent with relevant law and ensure the fair and humane treatment of affected incarcerated individuals.</p> <p>3. Protective Custody:</p> <p>a) Residents at high risk for sexual victimization shall not be placed in involuntary segregated housing unless the department has assessed all available alternatives and has determined that there is no available alternative means of separation from the likely abuser</p> <p>b) If the facility cannot conduct such an assessment immediately, it may hold the resident in involuntary segregated housing for less than 48 hours while completing the assessment. Residents placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the fullest extent possible.</p> <p>c) If the facility restricts access to programs, privileges, education, or work opportunities, it shall document:</p> <ol style="list-style-type: none"> 1. The opportunities that have been limited

	<p>2. The duration of the limitation; and</p> <p>3. The reasons for such limitations</p> <p>d) The facility shall assign such residents to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged. Such an assignment shall not ordinarily exceed a period of 30 days</p> <p>e) If an involuntary segregated housing assignment is made pursuant to this section, the facility shall document:</p> <p>1. The basis for the facility's concern for the resident's safety; and</p> <p>2. The reason why no alternative means of separation can be arranged.</p> <p>f) The facility shall review each such resident every 30 days to determine whether there is a continuing need for separation from the general population.</p> <p>g) Cross reference with Policy 04-03 Administrative Segregation</p> <p>WCDOC Policy #02- 51 state that any use of segregated housing to protect an inmate who is an alleged victim of sexual abuse will be subject to the requirements of the policy regarding Protective Custody.</p> <p>Analysis/Reasoning:</p> <p>From December 2024 to the present, the Westchester County Department of Correction has not placed any individuals identified as victims in facility-ordered Protective Custody or administrative segregation as a result of their involvement in a PREA (Prison Rape Elimination Act) allegation.</p> <p>This includes cases where such placement might have been considered due to potential risk of victimization or as a means of protection from an alleged abuser. It is important to note that this practice is not limited to the current reporting period. Historically, the Department has maintained a consistent policy of avoiding the use of involuntary segregation or protective custody for victims in connection with PREA-related incidents. This approach reflects the Department's commitment to trauma-informed care and the principles outlined in PREA standards, which discourage isolating victims as a protective measure.</p> <p>The Department continues to prioritize alternative, non-punitive strategies to ensure the safety and well-being of all individuals in custody, while upholding their rights and dignity.</p> <p>Conclusion:</p> <p>This Auditor finds WCDOC to be in compliance with this standard based upon review of WCDOC Policy interviews with staff and residents.</p>
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed

- WCDOC Policy #02-03 Crime Scene Management
- WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance)
- Memorandum Of Understanding Between Westchester County Department of Correction and Westchester County Department of Public Safety
- WCDOC Coordinated Response Plan
- Interviews:
Warden
PREA Compliance Manager
Investigator

Auditor's Discussion:

WCDOC Policy #02-03

The Westchester County Department of Public Safety (WCDPS) has primary responsibility to conduct investigations into crimes committed on Westchester County property, including the WCDOC. It is WCDOC policy to assist the WCDPS in conducting these investigations. The WCDOC is responsible to recognize and preserve potential evidence and crime scenes as part the law enforcement effort to prosecute crimes committed at this facility.

WCDOC Policy #02-12

F. Investigation of Incidents

1. The department shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.
2. It is the department's policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to the department's Special Investigations Unit and the Westchester County Department of Public Safety.
3. When the department conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.
4. Where sexual abuse is alleged, the department shall use investigators who have received special training in sexual abuse investigations pursuant to Section 6. A. (Employee Training) of this policy.
5. Investigators shall 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.
6. When the quality of evidence appears to support a criminal prosecution, the department shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle to subsequent criminal prosecution. (Garrity Protections)
7. The credibility of an alleged victim, suspect, or witness shall be assessed

individually and shall not be determined by the person's status as resident or staff. The department shall not require a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation.

8. Administrative Investigations

- a) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse and
- b) Shall be documented in written reports, including a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.
- c) Shall be referred for prosecution if substantiated allegations of conduct appear criminal.
- d) The department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated in administrative investigations.
- e) Refer to memorandum Re: Standard of Review and Investigation for Sexual Abuse Investigation

9. Criminal investigations

Shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible; and

10. The department shall retain all written reports required by this section for as long as the

alleged abuser is incarcerated or employed by the department. plus five years.

11. The departure of the alleged abuser or victim from the employment or control of the facility or department shall not provide a basis for terminating an investigation.

12. When other agencies investigate sexual abuse, the department shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

13. Evidence Protocol and Forensic Medical Exams

Memorandum of Understanding

This Memorandum of Understanding ("MOU") is entered into this January 1, 2025 by and between the Westchester County Department of Correction ("WCDOC"). The purpose of this MOU is to delineate the role of the Department of Public Safety in accepting and forwarding inmate reports of sexual abuse and sexual harassment allegations to WCDOC's Special Investigation Unit ("SIU") and the Prison Rape Elimination Act ("PREA") Coordinator in compliance with PREA standards and applicable laws.

Cooperate with WCDOCs SIU in any follow-up investigative efforts as requested. As appropriate, collaborate with the Department of Public Safety's assigned jail detective regarding the status of the allegations.

WCDOC Coordinated Response Plan

Administrative Investigations

The Westchester County DOC's Special Investigations Unit ("SIU") is responsible for conducting administrative investigations into allegations of sexual abuse. The unit's Commander shall assign a PREA Investigator, who shall initiate a thorough and objective investigation for all allegations as circumstances dictate.

SIU Investigators and the Westchester County Department of Public Safety ("WCDPS") shall gather and preserve direct and circumstantial evidence, including available physical and DNA evidence, and available electronic monitoring data; shall interview victims, perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

Investigators shall assess the credibility of victims, perpetrators, and witnesses on an individual basis, rather than by the person's status as an adult in custody or staff. The assigned investigators may not require a person who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of abuse.

Administrative investigations must include an effort to determine whether staff actions or failures to act contributed to the abuse. The administrative written report must include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. The assigned investigator may not terminate the investigation based on the discharge or termination of employment of the perpetrator or victim.

Criminal Investigations

If, during the administrative investigation, it is determined that some acts may be potentially criminal, the administrative investigation will be suspended until the conclusion of the criminal investigation, unless the District Attorney's Office clears it to proceed. Information cannot be shared between the administrative investigator and the criminal investigator, unless a Miranda Warning is given during administrative interrogations of the individual(s) who may face criminal charges. The primary criminal investigative agency for allegations within all divisions of the Westchester County Department of Corrections ("WCDOC") is the Westchester County Department of Public Safety ("WCDPS"). When the WCDPS investigates sexual abuse, WCDOC investigators shall, as requested, cooperate and assist WCDPS investigators and shall remain informed about the progress of the investigation. In some cases, the WCDOC may elect to have the criminal investigation completed by trained SIU investigators in collaboration with the assigned WCDPS Investigator.

Analysis/Reasoning:

When WCDOC conducts internal investigations via SIU (Special Investigation Unit), such investigations are conducted promptly, thoroughly and objectively, including third party and anonymous reporting, as per policy #7-19 (SIU- Special Investigation Unit - Policy) and Policy #2-12 (Sexual Assault & Harassment Policy). All allegations of sexual abuse/harassment have to be reported. Internal investigations regarding any alleged sexual abuse or sexual harassment of an inmate are conducted by SIU, as per Policy #7-19.

	<p>Policy #2-12, addresses the crime scene and preservation of tangible evidence. Investigations with criminal implications are referred to the Westchester County Department of Public Safety; they have jurisdiction over criminal investigations. A detective from this Department is based within WCDOC. As per Policy #2-12, shift commanders must report all incidents of sexual abuse/harassment to the Deputy Commissioner of Operations, the PREA Coordinator and SIU. All reports of sexual harassment/abuse are investigated by SIU (Special Investigation Unit). Behavior deemed criminal is reported to the Westchester County Police Department of Public Safety. As per an interview with the SIU Captain, all investigations are screened through the WCPDPS detective, who is based in SIU full-time, for criminality.</p> <p>All WCDOC SIU staff and supervisors receive specialized training in sexual abuse investigations as per PREA Standard 115.34. SIU receives specialized PREA training, in addition to the PREA training all Correction Officers receive. SIU investigators and newly promoted supervisors are mandated to complete the PREA online course –PREA: Investigating Sexual Abuse in a Confinement Setting, presented by the National Institute of Corrections. The training, which was developed by the PREA Resource Center, includes techniques for interviewing sexual abuse victims, proper use of Miranda warnings, proper use of Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria of evidence to satisfy the burden of proof in both criminal and administrative proceedings. WCDOC maintains documentation that SIU completed specialized training for conducting sexual abuse investigations. Certificates of course completion were provided as documentation for the auditors.</p> <p>Conclusion:</p> <p>During the past 12 months, there were (2) substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012. The facility has exceeded this standard in the thorough, timely and consistent documentation used in the investigation of all complaints reported of sexual abuse and sexual harassments. A review of over sixty files indicates a very good investigative system which is well organized and provides excellent documentation in the files. The file review reveals timely initiation of an investigation as well as a timely completion process This Auditor finds WCDOC has exceeded this standard.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance) • WCDOC Coordinated Response Plan

- Interviews:
Warden
PREA Compliance Manager
Investigator

Auditor's Discussion:

WCDOC Policy #02-12

8. Administrative Investigations

- a) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse and
- b) Shall be documented in written reports, including a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.
- c) Shall be referred for prosecution if substantiated allegations of conduct appear criminal.
- d) The department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated in administrative investigations.
- e) Refer to memorandum Re: Standard of Review and Investigation for Sexual Abuse Investigation

WCDOC Coordinated Response Plan

For each allegation investigated under PREA, the PREA investigator shall make a final determination on whether the allegation is substantiated, unsubstantiated, or unfounded. The allegation will be considered substantiated if a preponderance (more than 50 percent) of the credible evidence supports this finding. If the investigation yields insufficient evidence to make a final determination regarding whether the incident occurred, it will be considered unsubstantiated. If the investigation determines that the incident did not happen, the allegation will be deemed unfounded. If the investigation reveals a resident made a false allegation in bad faith, disciplinary action may be imposed.

Standard of Review and Investigation for Sexual Abuse Investigation

Pursuant to the Prison Rape Elimination Act of 2003 (PREA), the Department shall use a "Preponderance of the Evidence" standard in determining whether allegations of sexual abuse or sexual harassment are substantiated.

Analysis/Reasoning:

The Auditor conducted a formal interview with facility Sexual Abuse Investigators. Each Investigator informed the Auditor the agency's policy requires the use of preponderance as the standard of evidence to substantiate an allegation of sexual abuse or sexual harassment. The Auditor asked the investigators to explain the meaning of preponderance. Investigators explained a preponderance means there is more evidence to justify the investigator's determination.

	<p>Conclusion:</p> <p>The Auditor was able to determine Investigators understand preponderance as the basis for determining investigative outcomes. The Auditor reviewed the agency's policies, procedures, investigative reports and interviewed facility Investigators and determined the facility meets the requirements of this standard. This Auditor finds WCDOC in compliance of this standard after reviewing WCDOC Policy# 02-12 and after interviews of investigative staff and administrative staff.</p>
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115.73	Reporting to inmates
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance) • Sample Investigation • Notification of Outcome/Status Update • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Investigator Inmate Reported Sexual Abuse <p>Auditor's Discussion:</p> <p>WCDOC Policy #02-12</p> <p>(a) Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.</p> <p>(b) If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate.</p> <p>(c) Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever:</p> <ol style="list-style-type: none"> (1) The staff member is no longer posted within the inmate's unit; (2) The staff member is no longer employed at the facility; (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. <p>(d) Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever:</p> <ol style="list-style-type: none"> (1) The agency learns that the alleged abuser has been indicted on a charge related

- to sexual abuse within the facility; or
- (2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.
- (e) All such notifications or attempted notifications shall be documented.
- (f) An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.

WCDOC Coordinated Response Plan

In cases of alleged staff sexual abuse, notify the victim whenever the staff member is no longer posted within the unit or the staff member is no longer employed at the facility. Document the notifications or attempted notifications.

Inform the victim of the progress and outcome of the investigation. In cases of alleged staff sexual abuse, notify the victim if the staff member has been charged or indicted on a criminal offense related to the allegation of sexual abuse within the facility or if the staff member has been convicted of a charge associated with the allegation of sexual abuse within the facility.

In cases of an alleged resident perpetrator, notify the victim if the resident has been charged or indicted on a criminal offense related to the allegation of sexual abuse within the facility or if the resident abuser has been convicted of a charge associated with the allegation of sexual abuse within the facility.

In cases of alleged staff sexual abuse, notify the victim if the staff member has been charged or indicted on a criminal offense related to the allegation of sexual abuse within the facility or if the staff member has been convicted of a charge associated with the allegation of sexual abuse within the facility.

In cases of an alleged resident perpetrator, notify the victim if the resident has been charged with a criminal offense related to the allegation of sexual abuse within the facility, or if the resident abuser has been convicted of a charge associated with the allegation of sexual abuse.

Analysis/Reasoning:

The Auditor conducted a formal interview with the PREA Compliance Manager. The SIU investigator informs offender victims of the investigative outcome at the conclusion of an investigation. The Auditor asked the SIU investigator who notifies the offender following an indictment and/or criminal charges placed against an offender or staff member. He stated that information is obtained from the conclusion of the investigation. The notification would be made by SIU Investigator.

Conclusion:

WCDOC Policy #02-12 states that following an investigation the agency will inform the offender as to whether the allegation has been substantiated, unsubstantiated or unfounded. In the past 12 months, (30) criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility. In the past 12 months, (24) alleged sexual abuse investigations that were completed and

	<p>inmates were notified, verbally or in writing of the results of the investigation. In the past 12 months, there were (3) investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency. In the past 12 months, there was (75) number of notifications to inmates that were provided pursuant to this standard. Of those notifications made in the past 12 months, (75) was documented. Documentation indicated that all were notified of the results of their investigation. This Auditor finds WCDOC exceeds this standard.</p>
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<p>115.76</p>	<p>Disciplinary sanctions for staff</p>
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance) • Interviews: <ul style="list-style-type: none"> Warden PREA Coordinator PREA Compliance Manager <p>Auditor's Discussion:</p> <p>WCDOC Policy #02-12</p> <p>II. POLICY</p> <p>The Department shall maintain policies consistent with the requirements of PREA. The policies are intended to reduce the potential for sexual misconduct, including sexual abuse/harassment of residents; to address the safety and treatment needs of residents who have been victims of a sexual act: and to discipline and prosecute those who perpetrate these acts upon residents. Upon learning that the resident is subject to a substantial risk of imminent sexual abuse, the Department shall take immediate action to protect the resident and to assist in a successful prosecution of any perpetrator meaningfully.</p> <p>I. Sanctions for Individuals Found to Have Participated In Sexual Abuse or Harassment</p> <p>Disciplinary Sanctions for Staff</p> <ol style="list-style-type: none"> a) Staff who violate department sexual abuse or sexual harassment policies shall be subject to disciplinary sanctions, up to and including termination. b) Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. c) Disciplinary sanctions for violations of department policies relating to sexual abuse

or sexual harassment shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

d) All terminations for violations of department sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies unless the activity was not criminal and to any relevant licensing bodies.

Analysis/Reasoning:

The Auditor conducted formal interviews with facility Investigators. Investigators informed the Auditor if the act was criminal in nature the investigator would contact the SIU for a criminal investigation. Facility investigators immediately cease efforts once a determination is made that sufficient evidence appears to support criminal activity. Each Investigator coordinates with the SIU Investigator and assists in their efforts when requested by the SIU Investigator. The Auditor asked how the investigation is handled if the act was not criminal in nature. The Investigator continues the investigation until a determination is made. The results of the investigation are shared with command staff so appropriate discipline against a staff member can be sanctioned if warranted.

Conclusion:

WCDOC Policy # 02-12 states that staff will be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history and sanctions imposed for comparable offenses by other staff with similar history. All terminations for violations of a sexual abuse or sexual harassment policies or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal. In the past 12 months, (0) staff has been found in violation of PREA policies. In the past 12 months, (0) staff from the facility has been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies. In the past 12 months, there were (0) number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.

This Auditor finds WCDOC in compliance with this standard based upon review the above named policy and responses of administrative and investigative staff who were interviewed.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance) • WCDOC Policy #07-35 Civilian Code of Conduct • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager <p>Auditor's Discussion:</p> <p>WCDOC Policy #02-12</p> <p>(a) Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.</p> <p>(b) The facility shall take appropriate remedial measures and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>WCDOC Policy #07-35</p> <p>3. Sexual Misconduct</p> <p>3.1 Civilian employees/volunteers shall not engage in any form of Sexual Misconduct. Any employee who engages in sexual misconduct with an inmate will be subject to appropriate disciplinary action. up to and including termination and/or criminal charges in accordance with the facility's "Zero Tolerance" sexual abuse/harassment policy</p> <p>Analysis/Reasoning:</p> <p>WCDOC Policy #02-12 states that any contractor or volunteer who engages in sexual abuse will be prohibited from contract with inmates and will be reported to the Corrections Investigations Division. WCDOC takes remedial measures and prohibits further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>Conclusion:</p> <p>According to the PREA Questionnaire, in the past 12 months, there were (1) number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates. This Auditor finds WCDOC in compliance of this standard based on review of WCDOC Policy #02-12. Also, review of investigative files, and interviews with investigative and administrative staff support compliance.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed

- WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance)
- Interviews:
 - Warden
 - PREA Compliance Manager
 - Medical Staff
 - Mental Health Staff

Auditor's Discussion:

WCDOC Policy #02-12

PREA - Guidelines

1. Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.
2. Sanctions shall be 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.
3. The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.
4. If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.
5. The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.
6. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.
7. An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.

3. Disciplinary Sanctions for Residents

a) Residents shall be subject to disciplinary sanctions pursuant to a final disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for resident-on-resident sexual abuse.

b) Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the Resident's disciplinary history, and the sanctions imposed for comparable offenses by other Residents with similar histories.

- c) The disciplinary process shall consider whether a resident's mental disability or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.
- d) If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending resident to participate in such interventions as a condition of access to programming or other benefits.
- e) The department may discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact.
- f) For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Analysis/Reasoning:

WCDOC Policy #02-12 states that inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate sexually abused another inmate. Agency disciplines inmate for sexual conduct with staff only upon finding that staff member did not consent to such contact. Agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not established evidence sufficient to substantiate the allegation.

Conclusion:

In the past 12 months, there has been (1) finding of guilt for inmate-on-inmate sexual abuse that have occurred at the facility and zero (0) criminal findings. This Auditor finds WCDOC in compliance of this standard based upon review of WCDOC #02-12 and interviews with random, administrative and investigative staff.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance) • Risk Assessment and Referral to Psychology for Prior Victim • Risk Assessment and Referral to Psychology Perpetrator • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Intake Staff Medical Staff

Staff Perform Risk of Victimization Screening

WCDOC Policy #02-12 (Medical and Mental Health)

- (a) If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.
- (b) If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.
- (c) If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall 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. Sexual Assault Awareness for Offenders - This form is to be reviewed with the offenders to ensure compliance with the Prison Rape Elimination Act (PREA). In addition, upon admission, any patient who has experienced prior sexual victimization will be offered the opportunity for follow-up mental health services which will occur within 14 days from admission. If the patient refuses such services, mental health staff will determine if there is a need to continue to follow the patient due to presentation, mental status, and possible risk factors.

6.1.4. Upon admission, any patient who has experienced prior sexual victimization will be offered the opportunity for follow up mental health services which will occur within 14 days from admission. If the patient refuses such services, mental health staff will determine if there is a need to continue to follow the patient due to presentation, mental status, and possible risk factors.

Analysis/Reasoning:

If the screening required in Section 4,F (1) indicates that a resident has experienced prior sexual victimization, whether in an institutional setting or the community, staff shall ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. Identified as high risk with a history of sexually assaultive behavior or sexual victimization be assessed by a mental health or other qualified professional within 14 days. Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners, and other staff, as necessary, to form treatment plans and to make security and management decisions, including housing, bed, work, education and program assignments.

WCDOC policy #02-12 also states that medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18. The auditor reviewed submitted documentation showing follow up meetings occurring within the 14 days of intake. Also, documentation confirms that

	<p>information related to sexual victimization or abusiveness occurring in an institutional setting is strictly limited to medical, mental health practitioners, and other necessary staff. Interviews with medical and mental health, and classification staff confirms knowledge of this policy requirement.</p> <p>Conclusion:</p> <p>In the past 12 months, (100%) of inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner. In the past 12 months, (0) of inmates who have previously perpetrated sexual abuse, as indicated during the screening, who were offered a follow up meeting with a mental health practitioner. This Auditor finds that WCDOC is in compliance of this standard.</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance) • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Medical Staff Mental Health Staff Confined Persons who Reported Sexual Abuse <p>Auditor's Discussion:</p> <p>WCDOC Policy #02-12</p> <p>E. Medical and Mental Health Services</p> <ol style="list-style-type: none"> 1. Emergency <ol style="list-style-type: none"> a) Resident victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. b) Resident victims of sexual abuse, while incarcerated, shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis following professionally accepted standards of care, where medically appropriate. c) Treatment services shall be provided to the victim-without financial cost to the victim-and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

	<p>Analysis/Reasoning:</p> <p>WCDOC Policy #02-12 provide for timely, unimpeded access to emergency medical treatment and crisis intervention services without any cost to the inmate. The nature and scope of such services are determined by medical and mental practitioners according to their professional judgement. The inmate victims of sexual abuse while incarcerated are offered timely information to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care where medically appropriate.</p> <p>Conclusion:</p> <p>This Auditor finds WCDOC in compliance with this standard based upon my review of the above referenced policy, and interviews with professional and random staff, and interviews with confined persons.</p>
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115.83	<p>Ongoing medical and mental health care for sexual abuse victims and abusers</p>
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance) • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager Mental Health Staff Medical Staff Confined Persons who Reported Sexual Abuse <p>Auditor's Discussion:</p> <p>WCDOC Policy #02-12</p> <p>2. Ongoing Medical and Mental Health Care</p> <p>(a) The facility shall 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.</p> <p>(b) The evaluation and treatment of such victims shall 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.</p> <p>(c) The facility shall provide such victims with medical and mental health services consistent with the community level of care.</p>

- (d) Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.
- (e) If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.
- (f) Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.
- (g) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.
- (h) All prisons shall 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.

Analysis/Reasoning:

WCDOC Policy #02-12 state that WCDOC will offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse consistent with the community level of care. Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

Conclusion:

The facility attempts to conduct a mental health evaluation of all known inmate on inmate abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners. This Auditor finds WCDOC in compliance with this standard based upon review of this policy, and interview of medical and mental health staff.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #2-52 Sexual Assault Incident Review Board • Memo re: Incident Review Team • Incident Review Form/Example • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager <p>Auditor’s Discussion:</p> <p>WCDOC Policy #2-52</p>

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

Analysis/Reasoning:

WCDOC Policy #2-52 states that it will conduct sexual abuse review at the conclusion of every sexual abuse investigation unless the allegation has been determined unfounded. This review will take 30 days after the conclusion of the investigation and will be conducted by the facility head, the PREA Coordinator and the PREA Manager. The Annual Report documents WCDOC's efforts to improved policies for more effective compliance with PREA.

Per a memo from the Deputy Commissioner, "The following staff will be part of the incident review team at WCDOC, the list is subject to change based on the nature of the incident(s) however the listed staff are permanent members of the team:

Asst. Warden
Captain
PSY D (2)
Secretary I

Conclusion:

In the past 12 months, there were (61) number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents. In the past 12 months, there were (26) number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility

	<p>that were followed by a sexual abuse incident review within 30 days, excluding only “unfounded” incidents. This Auditor finds WCDOC in compliance with this standard based upon a review of all relevant documents, and interviews with incident review team members, investigators and management staff.</p>
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<p>115.87</p>	<p>Data collection</p>
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #09-06 Automated Incident Tracking • WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance) • Interviews: <ul style="list-style-type: none"> Warden PREA Coordinator PREA Compliance Manager Incident Review Team Member <p>Auditor's Discussion:</p> <p>WCDOC Policy #09-06</p> <p>To establish an automated incident tracking system accessible by Special Investigation Unit (SIU) members and other appropriately-credentialed facility administrators. For such system to collect, manage, track and report on a wide range of data related to certain operational incidents/events, including all serious incidents related ton inmate safety/supervision, use of force by staff, as well as general SIU activities.</p> <p>It is the policy of the Westchester County Department of Correction to utilize the Administrative Investigations Management (AIM) system, or its equivalent, as the official automated record of special investigations and certain other matters, including investigations and data related to use of force by staff, sexual abuse of inmates and all serious incidents.</p> <p>Operational and investigative events captured in AIM shall include: Allegations of sexual abuse/misconduct against inmates (PREA).</p> <p>E. Information regarding allegations of sexual abuse/misconduct by staff against inmates (PREA) shall be recorded in AIM and shall include:</p> <ol style="list-style-type: none"> 1. All information set forth in IV (A), above; 2. Name(s) and credentials of other individuals involved (i.e. mental health staff/counselors); 3. Name(s) and ranks of police agencies involved (i.e. WCDPS); and 4. A brief summary of the incident

	<p>WCDOC Policy #02-12</p> <p>VIII. Data Collection and Review Data Collection</p> <p>A. Data Collection</p> <ol style="list-style-type: none"> 1. The department's Special Investigation Unit shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. 2. SIU shall aggregate the incident-based sexual abuse data at least annually. 3. The incident-based data collected shall 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. 4. SIU shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. 5. Upon request, the department shall provide all such data from the previous calendar year to the Department of Justice no later than June 30. <p>Analysis/Reasoning:</p> <p>Pursuant to WCDOC Policy #02-12 and 09-06, WCDOC uses a standard form and definitions sheet to facilitate the uniform collection of data for every sexual abuse allegation. WCDOC Policy states that the agency will collect incident data at least annually, and upon request, will provide such data for the previous calendar year to the Department of Justice.</p> <p>Conclusion:</p> <p>This Auditor finds WCDOC in compliance with this standard based upon a review of all relevant documents, and interview with the PREA Coordinator.</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance) • WCDOC Website Annual PREA Report • Interviews: <ul style="list-style-type: none"> Warden PREA Compliance Manager <p>Auditor's Discussion:</p>

	<p>WCDOC Policy #02-12</p> <p>B. Data Review for Corrective Action</p> <p>1. The department shall review data collected and aggregated pursuant to Section 7. A (Data Collection) above to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by:</p> <ol style="list-style-type: none"> a. Identifying problem areas; b. Taking corrective action on an ongoing basis; and c. Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole. d. Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse. e. The agency's report shall be 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.\ <p>Analysis/Reasoning:</p> <p>WCDOC Policy #02-12 requires the agency to review data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The annual report includes a comparison of the current year's data and corrective actions with those from prior years. When the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility.</p> <p>Conclusion:</p> <p>Annual reports, approved by the WCDOC Commissioner, containing institutional assessment information are posted online at https://correction.westchestergov.com/. This Auditor finds WCDOC in compliance with this standard based on my review of policy, reporting documents, and online website posting.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • WCDOC Policy #02-12 Sexual Assault/ Harassment (PREA "Compliance) • WCDOC Policy #09-01 General Department Records • Interviews: Warden

PREA Compliance Manager

Auditor's Discussion:

WCDOC Policy #02-12

- (a) The agency shall ensure that data collected pursuant to § 115.87 are securely retained.
- (b) The agency shall 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.
- (c) Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.
- (d) The agency shall maintain sexual abuse data collected pursuant to § 115.87 for at least 15 years after the date of the initial collection unless Federal, State, or local law requires otherwise.

IV. Categories of General Department Records; Schedules for Disposition

A. The Department of Correction maintains many categories of records in various formats, including digital/electronic records, paper records and tangible items. Such records are noted below, with respective schedules for retention.

- 1. Inmate-Specific Data Files (also known as 'Booking Folders').
 - a. These records are customarily maintained in Booking. For additional information regarding these records, see P&P 09-02 (Inmate-Specific Records).
 - b. Inactive records shall be filed in an orderly manner within the facility records room.
 - c. Schedule for retention: To be retained for 15 years after death or discharge of inmate.
 - d. Disposition: Upon passage of 15 years, to be securely destroyed.

Analysis/Reasoning:

WCDOC Policy #02-12 state that the agency will ensure that data is securely retained, and personal identifiers are removed before making data on sexual abuse publicly available. Agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website. Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.

Conclusion:

The agency maintains sexual abuse data collected pursuant to 115.87 for at least 15 years after the date of initial collection, unless federal, state, or local law requires otherwise. This Auditor finds WCDOC to be in compliance with this standard based on review of policy, reporting documents, and online website posting.

115.401	Frequency and scope of audits
	<p data-bbox="280 188 983 224">Auditor Overall Determination: Meets Standard</p> <p data-bbox="280 264 564 300">Auditor Discussion</p> <p data-bbox="280 340 1469 707">This is the second PREA audit of this facility. West Chester County Department of Corrections was last audited in August 8-11, 2016. The auditor was allowed access to all areas of the facility and had access to all required documentation. The auditor was allowed to conduct private interviews with offenders and staff. Notifications of the audit were posted throughout the facility permitting offenders to send confidential letters to the Auditor prior to the audit. WCDOC posts all audit reports on the WCDOC website in accordance with PREA Standard 115.403 subsection (f) which may be reviewed at: https://correction.westchestergov.com//Pages/PREA-Audit-Reports.aspx</p> <p data-bbox="280 748 1453 864">I received access to, and the ability to observe, all areas of the audited facility and requested and received copies of any relevant documents (including electronically stored information).</p>

115.403	Audit contents and findings
	<p data-bbox="280 1075 983 1111">Auditor Overall Determination: Meets Standard</p> <p data-bbox="280 1151 564 1187">Auditor Discussion</p> <p data-bbox="280 1227 1481 1635">When the audit was completed, the auditor conducted an exit briefing on January 21, 2026. The auditor gave the Administrative Staff a preliminary overview of the audit and thanked the staff for their hard work and commitment to the Prison Rape Elimination Act. After the onsite audit, the auditor utilized the Auditor Compliance Tool for Prison Confinement as a guide in determining compliance with each standard and13 created a Final Report documenting the facility's compliance. In order to determine compliance, the auditor used the information and documentation provided during the pre-audit, onsite documentation review, information obtained through inmate and staff interviews, as well as visual observations during the facility tour.</p>

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.)	na
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	na

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
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.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

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

	facility does not have female inmates.)	
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)?	yes
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	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.15 (f)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
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 with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in	yes

	formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	
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 may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42	yes

	U.S.C. 1997)?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
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,	yes

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

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

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

	inmates on how to avoid inappropriate relationships with inmates?	
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	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	yes

	to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	
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 Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or	yes

	prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
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 suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
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 screening instrument?	yes
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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	

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

	being sexually abusive, to inform: Work Assignments?	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
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	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (d)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (e)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (f)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (g)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
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 anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials	yes

	and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	
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 this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency	yes

	is exempt from this standard.)	
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, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between	yes

	inmates and these organizations and agencies, in as confidential a manner as possible?	
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 abuse or sexual harassment or retaliation?	yes
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	yes

	sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	
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 response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities	yes

	responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	
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 sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report	yes

	of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor 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 of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations,	yes

	including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
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).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in	na

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

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

	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does	yes

	the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	
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).	yes
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 sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
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.)	na
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	yes

	has been determined to be unfounded?	
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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
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.)	na
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 to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
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	Frequency and scope of audits	

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

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